

**Return of Organization Exempt From Income Tax**  
 Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

The organization may have to use a copy of this return to satisfy state reporting requirements.

**A For the 2011 calendar year, or tax year beginning and ending**

|   |   |   |   |
|---|---|---|---|
| <b>B</b> Check if applicable:<br><input type="checkbox"/> Address change<br><input type="checkbox"/> Name change<br><input type="checkbox"/> Initial return<br><input type="checkbox"/> Terminated<br><input type="checkbox"/> Amended return<br><input type="checkbox"/> Application pending | <b>C Name of organization</b><br>SECOND AMENDMENT FOUNDATION              |   | <b>D Employer identification number</b><br>91-6184167 |
|   | Doing Business As   |   | <b>E Telephone number</b><br>(425) 454-7012           |
|   | Number and street (or P O box if mail is not delivered to street address) | Room/suite  |   |
|   | 12500 N.E. 10TH PLACE   |   | <b>G Gross receipts \$</b> 3,894,695.                 |
|   | City or town, state or country, and ZIP + 4<br>BELLEVUE, WA 98005         |   |   |
| <b>F Name and address of principal officer:</b> ALAN M GOTTLIEB<br>12500 N.E. 10TH PLACE, BELLEVUE, WA 98005  |   | <b>H(a) Is this a group return for affiliates?</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br><b>H(b) Are all affiliates included?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No<br>If "No," attach a list. (see instructions)<br><b>H(c) Group exemption number</b> ▶ |   |

**I Tax-exempt status**  501(c)(3)  501(c)( ) ◀ (insert no)  4947(a)(1) or  527

**J Website:** ▶ WWW.SAF.ORG

**K Form of organization**  Corporation  Trust  Association  Other ▶ **L Year of formation** 1974 **M State of legal domicile** WA

**Part I Summary**

**1** Briefly describe the organization's mission or most significant activities: EDUCATION IN SUPPORT OF GUN RIGHTS

**2** Check this box  if the organization discontinued its operations or disposed of more than 25% of its net assets

|                                    |  |           |         |
|------------------------------------|--|-----------|---------|
| <b>Activities &amp; Governance</b> | <b>3</b> Number of voting members of the governing body (Part VI, line 1a)             | <b>3</b>  | 7       |
|                                    | <b>4</b> Number of independent voting members of the governing body (Part VI, line 1b) | <b>4</b>  | 4       |
|                                    | <b>5</b> Total number of individuals employed in calendar year 2011 (Part V, line 2a)  | <b>5</b>  | 16      |
|                                    | <b>6</b> Total number of volunteers (estimate if necessary)                            | <b>6</b>  | 29      |
|                                    | <b>7a</b> Total unrelated business revenue from Part VIII, column (C), line 12         | <b>7a</b> | 82,056. |
|                                    | <b>7b</b> Net unrelated business taxable income from Form 990-T, line 34               | <b>7b</b> | 0.      |

|  | Prior Year                              | Current Year              |
|--|---|---------------------------|
| <b>8</b> Contributions and grants (Part VIII, line 1h)                                       | 3,519,586.                              | 3,631,077.                |
| <b>9</b> Program service revenue (Part VIII, line 2g)  | 0.                                      | 0.                        |
| <b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d)                      | 23,510.                                 | 17,966.                   |
| <b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)           | 271,439.                                | 245,652.                  |
| <b>12</b> Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) | 3,814,535.                              | 3,894,695.                |
| <b>13</b> Grants and similar amounts paid (Part IX, column (A), lines 1-3)                   | 0.                                      | 0.                        |
| <b>14</b> Benefits paid to or for members (Part IX, column (A), line 4)                      | 0.                                      | 0.                        |
| <b>15</b> Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)  | 416,406.                                | 442,832.                  |
| <b>16a</b> Professional fundraising fees (Part IX, column (A), line 11e)                     | 0.                                      | 0.                        |
| <b>16b</b> Total fundraising expenses (Part IX, column (D), line 25) ▶ 1,046,637.            |   |                           |
| <b>17</b> Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)                       | 3,556,101.                              | 3,492,570.                |
| <b>18</b> Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)          | 3,972,507.                              | 3,935,402.                |
| <b>19</b> Revenue less expenses. Subtract line 18 from line 12                               | <157,972.>                              | <40,707.>                 |
| <b>20</b> Total assets (Part X, line 16)   | Beginning of Current Year<br>4,533,776. | End of Year<br>4,478,424. |
| <b>21</b> Total liabilities (Part X, line 26)  | 668,420.                                | 638,244.                  |
| <b>22</b> Net assets or fund balances. Subtract line 21 from line 20                         | 3,865,356.                              | 3,840,180.                |

**Part II Signature Block**

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 officer) is based on all information of which preparer has any knowledge.

|                  |   |                   |
|------------------|---|-------------------|
| <b>Sign Here</b> | Signature of officer<br><i>Alan M. Gottlieb</i>                           | Date<br>7/30/2012 |
|                  | ALAN M GOTTLIEB, EXECUTIVE VICE PRESIDENT<br>Type or print name and title |                   |

|                          |   |  |  |   |                   |
|--------------------------|---|--|--|---|-------------------|
| <b>Preparer Use Only</b> | Print/Type preparer's name<br>JOHN C GUNNING  | Preparer's signature<br><i>[Signature]</i> | Date<br>7/26/12  | Check <input type="checkbox"/> if self-employed | PTIN<br>P00144778 |
|                          | Firm's name<br>GUNNING, STENSON & PRICE, P.S. | Firm's EIN<br>91-1584061                   | Firm's address<br>10655 N.E. 4TH STREET, SUITE 611<br>BELLEVUE, WA 98004 | Phone no<br>206-462-1151                        |                   |

May the IRS discuss this return with the preparer shown above? (see instructions)  Yes  No

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Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response to any question in this Part III

Input box for Schedule O response

1 Briefly describe the organization's mission: EDUCATION IN SUPPORT OF GUN RIGHTS

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? [ ] Yes [X] No

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [ ] Yes [X] No

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code ) (Expenses \$ 2,339,501. including grants of \$ ) (Revenue \$ ) PUBLIC EDUCATION IN SUPPORT OF GUN RIGHTS, INCLUDING THE EDUCATION OF THE PUBLIC WITH REGARDS TO THE BILL OF RIGHTS, THE CONSTITUTION AND THE INVOLVEMENT OF FIRE ARMS IN CRIME PREVENTION.

4b (Code ) (Expenses \$ 338,557. including grants of \$ ) (Revenue \$ ) LEGAL ACTION IN DEFENSE OF GUN OWNERS, INCLUDING CONSTITUTIONAL CHALLENGE OF LEGISLATION IN THE COURTS. (EXCLUDING LEGAL SERVICE PERFORMED PRO BONO).

4c (Code ) (Expenses \$ including grants of \$ ) (Revenue \$ )

4d Other program services (Describe in Schedule O.) (Expenses \$ including grants of \$ ) (Revenue \$ )

4e Total program service expenses 2,678,058.

**Part IV Checklist of Required Schedules**

|   | Yes | No |
|---|-----|----|
| <b>1</b> Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?<br><i>If "Yes," complete Schedule A</i>  | X   |    |
| <b>2</b> Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ?   | X   |    |
| <b>3</b> Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>  |     | X  |
| <b>4</b> <b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>   |     | X  |
| <b>5</b> Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>   |     | X  |
| <b>6</b> Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>  |     | X  |
| <b>7</b> Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>  |     | X  |
| <b>8</b> Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>   |     | X  |
| <b>9</b> Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>   |     | X  |
| <b>10</b> Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>   |     | X  |
| <b>11</b> If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.   |     |    |
| <b>a</b> Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>   | X   |    |
| <b>b</b> Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i>   |     | X  |
| <b>c</b> Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i>   |     | X  |
| <b>d</b> Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i>  |     | X  |
| <b>e</b> Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>   | X   |    |
| <b>f</b> Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>  |     | X  |
| <b>12a</b> Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI, XII, and XIII</i>   | X   |    |
| <b>b</b> Was the organization included in consolidated, independent audited financial statements for the tax year?<br><i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional</i>   |     | X  |
| <b>13</b> Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>  |     | X  |
| <b>14a</b> Did the organization maintain an office, employees, or agents outside of the United States?  |     | X  |
| <b>b</b> Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i> |     | X  |
| <b>15</b> Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? <i>If "Yes," complete Schedule F, Parts II and IV</i>  |     | X  |
| <b>16</b> Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? <i>If "Yes," complete Schedule F, Parts III and IV</i>  |     | X  |
| <b>17</b> Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i>   |     | X  |
| <b>18</b> Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>   |     | X  |
| <b>19</b> Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>   |     | X  |
| <b>20a</b> Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>   |     | X  |
| <b>b</b> If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?   |     |    |

**Part IV Checklist of Required Schedules** (continued)

|   | Yes | No |
|---|-----|----|
| <b>21</b> Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II.</i>   |     | X  |
| <b>22</b> Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III.</i>   |     | X  |
| <b>23</b> Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J.</i>  |     | X  |
| <b>24a</b> Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25.</i>                            |     | X  |
| <b>b</b> Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?  |     |    |
| <b>c</b> Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?   |     |    |
| <b>d</b> Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  |     |    |
| <b>25a</b> <b>Section 501(c)(3) and 501(c)(4) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I.</i>   |     | X  |
| <b>b</b> Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I.</i>  |     | X  |
| <b>26</b> Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If "Yes," complete Schedule L, Part II.</i>  |     | X  |
| <b>27</b> Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III.</i> |     | X  |
| <b>28</b> Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):   |     |    |
| <b>a</b> A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV.</i>  |     | X  |
| <b>b</b> A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV.</i>   |     | X  |
| <b>c</b> An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV.</i>   | X   |    |
| <b>29</b> Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M.</i>  |     | X  |
| <b>30</b> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M.</i>  |     | X  |
| <b>31</b> Did the organization liquidate, terminate, or dissolve and cease operations?<br><i>If "Yes," complete Schedule N, Part I.</i>   |     | X  |
| <b>32</b> Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II.</i>  |     | X  |
| <b>33</b> Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I.</i>  |     | X  |
| <b>34</b> Was the organization related to any tax-exempt or taxable entity?<br><i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1.</i>  | X   |    |
| <b>35a</b> Did the organization have a controlled entity within the meaning of section 512(b)(13)?  |     | X  |
| <b>b</b> Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2.</i>  |     | X  |
| <b>36</b> <b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization?<br><i>If "Yes," complete Schedule R, Part V, line 2.</i>  |     | X  |
| <b>37</b> Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI.</i>   |     | X  |
| <b>38</b> Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?<br><b>Note.</b> All Form 990 filers are required to complete Schedule O.  | X   |    |

Form 990 (2011)



Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Check if Schedule O contains a response to any question in this Part VI [X]

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include questions 1a-9 regarding governing body members, relationships, and documentation.

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

Table with 3 columns: Question, Yes, No. Rows include questions 10a-16b regarding local chapters, conflict of interest policies, whistleblower policy, and joint ventures.

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed WA, OR, PA, MN, OH, WV, UT, IL, FL, WI, MD, ME
18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection.
19 Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: MR. ALAN GOTTLIEB - 425-454-7012 12500 N.E. 10 PLACE, BELLEVUE, WA 98005







**Part VIII Statement of Revenue**

|  |  |  | (A)<br>Total revenue | (B)<br>Related or<br>exempt function<br>revenue | (C)<br>Unrelated<br>business<br>revenue | (D)<br>Revenue<br>excluded from<br>tax under<br>sections 512,<br>513, or 514 |  |
|--|--|--|----------------------|---|---|--|--|
| <b>Contributions, Gifts, Grants<br/>and Other Similar Amounts</b>    | <b>1 a</b> Federated campaigns   | <b>1a</b>  |                      |   |   |  |  |
|  | <b>b</b> Membership dues   | <b>1b</b>  |                      |   |   |  |  |
|  | <b>c</b> Fundraising events  | <b>1c</b>  |                      |   |   |  |  |
|  | <b>d</b> Related organizations   | <b>1d</b>  |                      |   |   |  |  |
|  | <b>e</b> Government grants (contributions)   | <b>1e</b>  |                      |   |   |  |  |
|  | <b>f</b> All other contributions, gifts, grants, and<br>similar amounts not included above   | <b>1f</b> 3,631,077.                                     |                      |   |   |  |  |
|  | <b>g</b> Noncash contributions included in lines 1a-1f \$  |  |                      |   |   |  |  |
|  | <b>h Total.</b> Add lines 1a-1f  |  | ▶ 3,631,077.         |   |   |  |  |
|  | <b>Program Service<br/>Revenue</b>   | <b>2 a</b>   | Business Code        |   |   |  |  |
| <b>b</b>   |  |  |                      |   |   |  |  |
| <b>c</b>   |  |  |                      |   |   |  |  |
| <b>d</b>   |  |  |                      |   |   |  |  |
| <b>e</b>   |  |  |                      |   |   |  |  |
| <b>f</b> All other program service revenue                           |  |  |                      |   |   |  |  |
| <b>g Total.</b> Add lines 2a-2f                                      |  |  | ▶                    |   |   |  |  |
| <b>Other Revenue</b>   | <b>3</b> Investment income (including dividends, interest, and<br>other similar amounts)   |  | ▶ 17,966.            |   |   | 17,966.  |  |
|  | <b>4</b> Income from investment of tax-exempt bond proceeds  |  | ▶                    |   |   |  |  |
|  | <b>5</b> Royalties   |  | ▶ 1,839.             | 1,839.  |   |  |  |
|  | <b>6 a</b> Gross rents   | (i) Real   | (ii) Personal        |   |   |  |  |
|  |  | <b>b</b> Less: rental expenses                           |                      |   |   |  |  |
|  |  | <b>c</b> Rental income or (loss)                         |                      |   |   |  |  |
|  |  | <b>d</b> Net rental income or (loss)                     |                      | ▶   |   |  |  |
|  | <b>7 a</b> Gross amount from sales of<br>assets other than inventory   | (i) Securities   | (ii) Other           |   |   |  |  |
|  |  | <b>b</b> Less: cost or other basis<br>and sales expenses |                      |   |   |  |  |
|  |  | <b>c</b> Gain or (loss)                                  |                      |   |   |  |  |
|  |  | <b>d</b> Net gain or (loss)                              |                      | ▶   |   |  |  |
|  | <b>8 a</b> Gross income from fundraising events (not<br>including \$ _____ of<br>contributions reported on line 1c). See<br>Part IV, line 18 | <b>a</b>   |                      |   |   |  |  |
|  |  | <b>b</b> Less: direct expenses                           | <b>b</b>             |   |   |  |  |
|  |  | <b>c</b> Net income or (loss) from fundraising events    |                      | ▶   |   |  |  |
|  | <b>9 a</b> Gross income from gaming activities. See<br>Part IV, line 19  | <b>a</b>   |                      |   |   |  |  |
| <b>b</b> Less: direct expenses                                       |  | <b>b</b>   |                      |   |   |  |  |
| <b>c</b> Net income or (loss) from gaming activities                 |  |  | ▶                    |   |   |  |  |
| <b>10 a</b> Gross sales of inventory, less returns<br>and allowances | <b>a</b>   |  |                      |   |   |  |  |
|  | <b>b</b> Less: cost of goods sold  | <b>b</b>   |                      |   |   |  |  |
|  | <b>c</b> Net income or (loss) from sales of inventory  |  | ▶                    |   |   |  |  |
| Miscellaneous Revenue  |  | Business Code  |                      |   |   |  |  |
| <b>11 a</b> SUBSCRIPTIONS  |  | 511120   | 161,757.             | 161,757.  |   |  |  |
| <b>b</b> ADVERTISING   |  | 541800   | 82,056.              |   | 82,056.                                 |  |  |
| <b>c</b>   |  |  |                      |   |   |  |  |
| <b>d</b> All other revenue   |  |  |                      |   |   |  |  |
| <b>e Total.</b> Add lines 11a-11d                                    |  |  | ▶ 243,813.           |   |   |  |  |
| <b>12 Total revenue.</b> See instructions                            |  |  | ▶ 3,894,695.         | 163,596.  | 82,056.                                 | 17,966.  |  |

**Part IX Statement of Functional Expenses**

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D)

Check if Schedule O contains a response to any question in this Part IX

| <i>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</i>  | (A)<br>Total expenses | (B)<br>Program service expenses | (C)<br>Management and general expenses | (D)<br>Fundraising expenses |
|--|-----------------------|---------------------------------|--|-----------------------------|
| 1 Grants and other assistance to governments and organizations in the United States See Part IV, line 21   |                       |                                 |  |                             |
| 2 Grants and other assistance to individuals in the United States See Part IV, line 22   |                       |                                 |  |                             |
| 3 Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16   |                       |                                 |  |                             |
| 4 Benefits paid to or for members  |                       |                                 |  |                             |
| 5 Compensation of current officers, directors, trustees, and key employees   | 64,880.               | 46,880.                         | 9,000.                                 | 9,000.                      |
| 6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)  |                       |                                 |  |                             |
| 7 Other salaries and wages   | 279,520.              | 271,588.                        | 2,954.                                 | 4,978.                      |
| 8 Pension plan accruals and contributions (include section 401(k) and section 403(b) employer contributions)   |                       |                                 |  |                             |
| 9 Other employee benefits  | 68,367.               | 15,316.                         | 53,051.                                |                             |
| 10 Payroll taxes   | 30,065.               | 24,333.                         | 5,126.                                 | 606.                        |
| 11 Fees for services (non-employees):  |                       |                                 |  |                             |
| a Management   |                       |                                 |  |                             |
| b Legal  | 319,715.              | 319,715.                        |  |                             |
| c Accounting   |                       |                                 |  |                             |
| d Lobbying   |                       |                                 |  |                             |
| e Professional fundraising services See Part IV, line 17   |                       |                                 |  |                             |
| f Investment management fees   |                       |                                 |  |                             |
| g Other  | 322,614.              | 145,130.                        | 70,343.                                | 107,141.                    |
| 12 Advertising and promotion   | 289,405.              | 289,405.                        |  |                             |
| 13 Office expenses   | 19,431.               | 14,192.                         | 1,252.                                 | 3,987.                      |
| 14 Information technology  |                       |                                 |  |                             |
| 15 Royalties   |                       |                                 |  |                             |
| 16 Occupancy   | 89,717.               | 63,369.                         | 6,295.                                 | 20,053.                     |
| 17 Travel  |                       |                                 |  |                             |
| 18 Payments of travel or entertainment expenses for any federal, state, or local public officials  |                       |                                 |  |                             |
| 19 Conferences, conventions, and meetings  | 193,158.              | 193,158.                        |  |                             |
| 20 Interest  | 24,888.               | 1,616.                          | 23,272.                                |                             |
| 21 Payments to affiliates  |                       |                                 |  |                             |
| 22 Depreciation, depletion, and amortization   | 4,699.                |                                 | 4,699.                                 |                             |
| 23 Insurance   |                       |                                 |  |                             |
| 24 Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O) |                       |                                 |  |                             |
| a <b>POSTAGE &amp; SHIPPING</b>  | 769,136.              | 452,117.                        |  | 317,019.                    |
| b <b>TELEPHONE MARKETING</b>   | 581,860.              | 290,930.                        |  | 290,930.                    |
| c <b>PRINTING</b>  | 523,954.              | 334,047.                        |  | 189,907.                    |
| d <b>MAILING LIST RENTAL</b>   | 194,028.              | 97,399.                         |  | 96,629.                     |
| e All other expenses   | 159,965.              | 118,863.                        | 34,715.                                | 6,387.                      |
| 25 Total functional expenses. Add lines 1 through 24e  | 3,935,402.            | 2,678,058.                      | 210,707.                               | 1,046,637.                  |
| 26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation                                   |                       |                                 |  |                             |

Check here  if following SOP 98-2 (ASC 958-720)

**Part X Balance Sheet**

|   |  | (A)                 |            | (B)         |  |
|---|--|---------------------|------------|-------------|--|
|   |  | Beginning of year   |            | End of year |  |
| Assets  | <b>1</b> Cash - non-interest-bearing   | 503,463.            | <b>1</b>   | 357,001.    |  |
|   | <b>2</b> Savings and temporary cash investments  | 2,175,099.          | <b>2</b>   | 2,257,773.  |  |
|   | <b>3</b> Pledges and grants receivable, net  |                     | <b>3</b>   |             |  |
|   | <b>4</b> Accounts receivable, net  | 9,754.              | <b>4</b>   | 7,076.      |  |
|   | <b>5</b> Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L   |                     | <b>5</b>   |             |  |
|   | <b>6</b> Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) |                     | <b>6</b>   |             |  |
|   | <b>7</b> Notes and loans receivable, net   |                     | <b>7</b>   |             |  |
|   | <b>8</b> Inventories for sale or use   |                     | <b>8</b>   |             |  |
|   | <b>9</b> Prepaid expenses and deferred charges   | 15,093.             | <b>9</b>   | 11,119.     |  |
|   | <b>10a</b> Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D   | <b>10a</b> 456,097. |            |             |  |
|   | <b>b</b> Less: accumulated depreciation  | <b>10b</b> 450,003. |            |             |  |
|   | <b>11</b> Investments - publicly traded securities   | 10,794.             | <b>10c</b> | 6,094.      |  |
|   | <b>12</b> Investments - other securities. See Part IV, line 11   | 274,777.            | <b>11</b>  | 294,565.    |  |
|   | <b>13</b> Investments - program-related. See Part IV, line 11  | 1,530,213.          | <b>12</b>  | 1,530,213.  |  |
|   | <b>14</b> Intangible assets  |                     | <b>13</b>  |             |  |
|   | <b>15</b> Other assets. See Part IV, line 11   | 14,583.             | <b>14</b>  | 14,583.     |  |
| <b>16</b> <b>Total assets.</b> Add lines 1 through 15 (must equal line 34)  | 4,533,776.   | <b>15</b>           | 4,478,424. |             |  |
| <b>17</b> Accounts payable and accrued expenses   | 558,900.   | <b>16</b>           | 548,350.   |             |  |
| <b>18</b> Grants payable  |  | <b>17</b>           |            |             |  |
| <b>19</b> Deferred revenue  |  | <b>18</b>           |            |             |  |
| <b>20</b> Tax-exempt bond liabilities   |  | <b>19</b>           |            |             |  |
| <b>21</b> Escrow or custodial account liability. Complete Part IV of Schedule D   |  | <b>20</b>           |            |             |  |
| <b>22</b> Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L  |  | <b>21</b>           |            |             |  |
| <b>23</b> Secured mortgages and notes payable to unrelated third parties  |  | <b>22</b>           |            |             |  |
| <b>24</b> Unsecured notes and loans payable to unrelated third parties  |  | <b>23</b>           |            |             |  |
| <b>25</b> Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D | 109,520.   | <b>24</b>           | 89,894.    |             |  |
| <b>26</b> <b>Total liabilities.</b> Add lines 17 through 25   | 668,420.   | <b>25</b>           | 638,244.   |             |  |
| <b>27</b> <b>Organizations that follow SFAS 117, check here</b> <input checked="" type="checkbox"/> <b>and complete lines 27 through 29, and lines 33 and 34.</b>               |  | <b>26</b>           |            |             |  |
| <b>28</b> Unrestricted net assets   | 3,865,356.   | <b>27</b>           | 3,840,180. |             |  |
| <b>29</b> Temporarily restricted net assets   |  | <b>28</b>           |            |             |  |
| <b>30</b> Permanently restricted net assets   |  | <b>29</b>           |            |             |  |
| <b>31</b> <b>Organizations that do not follow SFAS 117, check here</b> <input type="checkbox"/> <b>and complete lines 30 through 34.</b>  |  | <b>30</b>           |            |             |  |
| <b>32</b> Capital stock or trust principal, or current funds  |  | <b>31</b>           |            |             |  |
| <b>33</b> Paid-in or capital surplus, or land, building, or equipment fund  |  | <b>32</b>           |            |             |  |
| <b>34</b> Retained earnings, endowment, accumulated income, or other funds  | 3,865,356.   | <b>33</b>           | 3,840,180. |             |  |
| <b>35</b> Total net assets or fund balances   | 4,533,776.   | <b>34</b>           | 4,478,424. |             |  |
| <b>36</b> Total liabilities and net assets/fund balances  |  |                     |            |             |  |

**Part XI Reconciliation of Net Assets**

Check if Schedule O contains a response to any question in this Part XI

|   |  |   |            |
|---|--|---|------------|
| 1 | Total revenue (must equal Part VIII, column (A), line 12)  | 1 | 3,894,695. |
| 2 | Total expenses (must equal Part IX, column (A), line 25)   | 2 | 3,935,402. |
| 3 | Revenue less expenses. Subtract line 2 from line 1   | 3 | <40,707.>  |
| 4 | Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))                      | 4 | 3,865,356. |
| 5 | Other changes in net assets or fund balances (explain in Schedule O)   | 5 | 15,531.    |
| 6 | Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B)) | 6 | 3,840,180. |

**Part XII Financial Statements and Reporting**

Check if Schedule O contains a response to any question in this Part XII

- 1 Accounting method used to prepare the Form 990:  Cash  Accrual  Other \_\_\_\_\_  
 If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.
- 2a Were the organization's financial statements compiled or reviewed by an independent accountant?
- b Were the organization's financial statements audited by an independent accountant?
- c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?  
 If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O
- d If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both:  
 Separate basis  Consolidated basis  Both consolidated and separate basis
- 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?
- b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

|    | Yes | No |
|----|-----|----|
| 2a |     | X  |
| 2b | X   |    |
| 2c | X   |    |
| 3a |     | X  |
| 3b |     |    |

Form 990 (2011)

**SCHEDULE A**  
**(Form 990 or 990-EZ)**

**Public Charity Status and Public Support**

OMB No 1545-0047

**2011**

**Open to Public Inspection**

Department of the Treasury  
Internal Revenue Service

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

Name of the organization **SECOND AMENDMENT FOUNDATION** Employer identification number **91-6184167**

**Part I Reason for Public Charity Status** (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is (For lines 1 through 11, check only one box.)

- 1  A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).
- 2  A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.)
- 3  A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).
- 4  A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: \_\_\_\_\_
- 5  An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.)
- 6  A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).
- 7  An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.)
- 8  A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)
- 9  An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.)
- 10  An organization organized and operated exclusively to test for public safety. See section 509(a)(4).
- 11  An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h.
  - a  Type I
  - b  Type II
  - c  Type III - Functionally integrated
  - d  Type III - Other
- e  By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).
- f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?
  - (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?
  - (ii) A family member of a person described in (i) above?
  - (iii) A 35% controlled entity of a person described in (i) or (ii) above?
- h Provide the following information about the supported organization(s).

|          | Yes | No |
|----------|-----|----|
| 11g(i)   |     |    |
| 11g(ii)  |     |    |
| 11g(iii) |     |    |

| (i) Name of supported organization | (ii) EIN | (iii) Type of organization (described on lines 1-9 above or IRC section (see instructions)) | (iv) Is the organization in col (i) listed in your governing document? |    | (v) Did you notify the organization in col (i) of your support? |    | (vi) Is the organization in col (i) organized in the US? |    | (vii) Amount of support |
|------------------------------------|----------|---|--|----|---|----|--|----|-------------------------|
|                                    |          |   | Yes  | No | Yes   | No | Yes  | No |                         |
|                                    |          |   |  |    |   |    |  |    |                         |
|                                    |          |   |  |    |   |    |  |    |                         |
|                                    |          |   |  |    |   |    |  |    |                         |
|                                    |          |   |  |    |   |    |  |    |                         |
|                                    |          |   |  |    |   |    |  |    |                         |
|                                    |          |   |  |    |   |    |  |    |                         |
|                                    |          |   |  |    |   |    |  |    |                         |
|                                    |          |   |  |    |   |    |  |    |                         |
|                                    |          |   |  |    |   |    |  |    |                         |
| <b>Total</b>                       |          |   |  |    |   |    |  |    |                         |

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule A (Form 990 or 990-EZ) 2011

**Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)**

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

**Section A. Public Support**

| Calendar year (or fiscal year beginning in) ▶   | (a) 2007 | (b) 2008 | (c) 2009 | (d) 2010 | (e) 2011 | (f) Total |
|---|----------|----------|----------|----------|----------|-----------|
| 1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")  | 3233467. | 3180568. | 4346737. | 3519586. | 3631077. | 17911435. |
| 2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf   |          |          |          |          |          |           |
| 3 The value of services or facilities furnished by a governmental unit to the organization without charge   |          |          |          |          |          |           |
| 4 <b>Total.</b> Add lines 1 through 3   | 3233467. | 3180568. | 4346737. | 3519586. | 3631077. | 17911435. |
| 5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) |          |          |          |          |          |           |
| 6 <b>Public support.</b> Subtract line 5 from line 4  |          |          |          |          |          | 17911435. |

**Section B. Total Support**

| Calendar year (or fiscal year beginning in) ▶  | (a) 2007 | (b) 2008 | (c) 2009 | (d) 2010 | (e) 2011 | (f) Total |
|--|----------|----------|----------|----------|----------|-----------|
| 7 Amounts from line 4  | 3233467. | 3180568. | 4346737. | 3519586. | 3631077. | 17911435. |
| 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources   | 59,998.  | 58,937.  | 44,244.  | 23,510.  | 19,805.  | 206,494.  |
| 9 Net income from unrelated business activities, whether or not the business is regularly carried on   |          |          |          |          |          |           |
| 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)   | 437,585. | 322,216. | 293,788. | 271,438. | 243,813. | 1568840.  |
| 11 <b>Total support.</b> Add lines 7 through 10  |          |          |          |          |          | 19686769. |
| 12 Gross receipts from related activities, etc. (see instructions)   |          |          |          |          | 12       |           |
| 13 <b>First five years.</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ▶ <input type="checkbox"/> |          |          |          |          |          |           |

**Section C. Computation of Public Support Percentage**

|   |    |       |   |
|---|----|-------|---|
| 14 Public support percentage for 2011 (line 6, column (f) divided by line 11, column (f))   | 14 | 90.98 | % |
| 15 Public support percentage from 2010 Schedule A, Part II, line 14   | 15 | 90.10 | % |
| 16a <b>33 1/3% support test - 2011.</b> If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ▶ <input checked="" type="checkbox"/>   |    |       |   |
| b <b>33 1/3% support test - 2010.</b> If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ▶ <input type="checkbox"/>   |    |       |   |
| 17a <b>10% -facts-and-circumstances test - 2011.</b> If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ▶ <input type="checkbox"/>    |    |       |   |
| b <b>10% -facts-and-circumstances test - 2010.</b> If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ▶ <input type="checkbox"/> |    |       |   |
| 18 <b>Private foundation.</b> If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ▶ <input type="checkbox"/>   |    |       |   |

**Part III Support Schedule for Organizations Described in Section 509(a)(2)**

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

**Section A. Public Support**

| Calendar year (or fiscal year beginning in) ►   | (a) 2007 | (b) 2008 | (c) 2009 | (d) 2010 | (e) 2011 | (f) Total |
|---|----------|----------|----------|----------|----------|-----------|
| <b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")   |          |          |          |          |          |           |
| <b>2</b> Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose |          |          |          |          |          |           |
| <b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513   |          |          |          |          |          |           |
| <b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf  |          |          |          |          |          |           |
| <b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge  |          |          |          |          |          |           |
| <b>6 Total.</b> Add lines 1 through 5   |          |          |          |          |          |           |
| <b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons  |          |          |          |          |          |           |
| <b>b</b> Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year           |          |          |          |          |          |           |
| <b>c</b> Add lines 7a and 7b  |          |          |          |          |          |           |
| <b>8 Public support</b> (Subtract line 7c from line 6)  |          |          |          |          |          |           |

**Section B. Total Support**

| Calendar year (or fiscal year beginning in) ►   | (a) 2007 | (b) 2008 | (c) 2009 | (d) 2010 | (e) 2011 | (f) Total |
|---|----------|----------|----------|----------|----------|-----------|
| <b>9</b> Amounts from line 6  |          |          |          |          |          |           |
| <b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources |          |          |          |          |          |           |
| <b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975                          |          |          |          |          |          |           |
| <b>c</b> Add lines 10a and 10b  |          |          |          |          |          |           |
| <b>11</b> Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on     |          |          |          |          |          |           |
| <b>12</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)                                 |          |          |          |          |          |           |
| <b>13 Total support</b> (Add lines 9, 10c, 11, and 12)  |          |          |          |          |          |           |

**14 First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here

**Section C. Computation of Public Support Percentage**

|  |           |   |
|--|-----------|---|
| <b>15</b> Public support percentage for 2011 (line 8, column (f) divided by line 13, column (f)) | <b>15</b> | % |
| <b>16</b> Public support percentage from 2010 Schedule A, Part III, line 15                      | <b>16</b> | % |

**Section D. Computation of Investment Income Percentage**

|   |           |   |
|---|-----------|---|
| <b>17</b> Investment income percentage for 2011 (line 10c, column (f) divided by line 13, column (f)) | <b>17</b> | % |
| <b>18</b> Investment income percentage from 2010 Schedule A, Part III, line 17                        | <b>18</b> | % |

**19a 33 1/3% support tests - 2011.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

**b 33 1/3% support tests - 2010.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

**20 Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. Attach to Form 990. See separate instructions.

OMB No 1545-0047

2011 Open to Public Inspection

Name of the organization

SECOND AMENDMENT FOUNDATION

Employer identification number 91-6184167

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

Table with 2 columns: (a) Donor advised funds, (b) Funds and other accounts. Rows include: 1 Total number at end of year, 2 Aggregate contributions to (during year), 3 Aggregate grants from (during year), 4 Aggregate value at end of year, 5 Did the organization inform all donors...?, 6 Did the organization inform all grantees...?

Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

Form for Part II Conservation Easements. Includes checkboxes for purpose(s) of easements, questions about monitoring, expenses, and reporting requirements. Includes a table for 'Held at the End of the Tax Year' with rows 2a, 2b, 2c, 2d.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

Form for Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Includes questions about reporting requirements and amounts for revenues and assets.



**Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets** (continued)

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):

- a  Public exhibition
- b  Scholarly research
- c  Preservation for future generations
- d  Loan or exchange programs
- e  Other \_\_\_\_\_

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?  Yes  No

**Part IV Escrow and Custodial Arrangements.** Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?  Yes  No

b If "Yes," explain the arrangement in Part XIV and complete the following table:

- c Beginning balance
- d Additions during the year
- e Distributions during the year
- f Ending balance

|    | Amount |
|----|--------|
| 1c |        |
| 1d |        |
| 1e |        |
| 1f |        |

2a Did the organization include an amount on Form 990, Part X, line 21?  Yes  No

b If "Yes," explain the arrangement in Part XIV.

**Part V Endowment Funds.** Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

|  | (a) Current year | (b) Prior year | (c) Two years back | (d) Three years back | (e) Four years back |
|--|------------------|----------------|--------------------|----------------------|---------------------|
| 1a Beginning of year balance                     |                  |                |                    |                      |                     |
| b Contributions                                  |                  |                |                    |                      |                     |
| c Net investment earnings, gains, and losses     |                  |                |                    |                      |                     |
| d Grants or scholarships                         |                  |                |                    |                      |                     |
| e Other expenditures for facilities and programs |                  |                |                    |                      |                     |
| f Administrative expenses                        |                  |                |                    |                      |                     |
| g End of year balance                            |                  |                |                    |                      |                     |

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

- a Board designated or quasi-endowment  \_\_\_\_\_ %
- b Permanent endowment  \_\_\_\_\_ %
- c Temporarily restricted endowment  \_\_\_\_\_ %

The percentages in lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

- (i) unrelated organizations
- (ii) related organizations

|        | Yes | No |
|--------|-----|----|
| 3a(i)  |     |    |
| 3a(ii) |     |    |
| 3b     |     |    |

b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

4 Describe in Part XIV the intended uses of the organization's endowment funds

**Part VI Land, Buildings, and Equipment.** See Form 990, Part X, line 10.

| Description of property   | (a) Cost or other basis (investment) | (b) Cost or other basis (other) | (c) Accumulated depreciation | (d) Book value |
|---|--------------------------------------|---------------------------------|------------------------------|----------------|
| 1a Land   |                                      |                                 |                              |                |
| b Buildings   |                                      |                                 |                              |                |
| c Leasehold improvements  |                                      |                                 |                              |                |
| d Equipment   |                                      |                                 |                              |                |
| e Other   |                                      | 456,097.                        | 450,003.                     | 6,094.         |
| <b>Total.</b> Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c)) |                                      |                                 |                              | 6,094.         |

**Part VII Investments - Other Securities.** See Form 990, Part X, line 12.

| (a) Description of security or category<br>(including name of security) | (b) Book value | (c) Method of valuation:<br>Cost or end-of-year market value |
|---|----------------|--|
| (1) Financial derivatives   |                |  |
| (2) Closely-held equity interests                                       |                |  |
| (3) Other   |                |  |
| (A) INVESTMENT IN RADIO AND   |                |  |
| (B) TV STATIONS   | 1,392,399.     | COST   |
| (C) INVESTMENT IN INTERNET  |                |  |
| (D) MEDIA WEB SITE  | 137,814.       | COST   |
| (E)   |                |  |
| (F)   |                |  |
| (G)   |                |  |
| (H)   |                |  |
| (I)   |                |  |
| <b>Total</b> (Col (b) must equal Form 990, Part X, col (B) line 12) ▶   | 1,530,213.     |  |

**Part VIII Investments - Program Related.** See Form 990, Part X, line 13.

| (a) Description of investment type                                    | (b) Book value | (c) Method of valuation:<br>Cost or end-of-year market value |
|---|----------------|--|
| (1)   |                |  |
| (2)   |                |  |
| (3)   |                |  |
| (4)   |                |  |
| (5)   |                |  |
| (6)   |                |  |
| (7)   |                |  |
| (8)   |                |  |
| (9)   |                |  |
| (10)  |                |  |
| <b>Total</b> (Col (b) must equal Form 990, Part X, col (B) line 13) ▶ |                |  |

**Part IX Other Assets.** See Form 990, Part X, line 15.

| (a) Description  | (b) Book value |
|--|----------------|
| (1)  |                |
| (2)  |                |
| (3)  |                |
| (4)  |                |
| (5)  |                |
| (6)  |                |
| (7)  |                |
| (8)  |                |
| (9)  |                |
| (10)   |                |
| <b>Total</b> (Column (b) must equal Form 990, Part X, col (B) line 15) ▶ |                |

**Part X Other Liabilities.** See Form 990, Part X, line 25.

| 1. (a) Description of liability   | (b) Book value |
|---|----------------|
| (1) Federal income taxes  |                |
| (2) DEFERRED MAGAZINE SUBSCRIPTIONS                                       | 89,894.        |
| (3)   |                |
| (4)   |                |
| (5)   |                |
| (6)   |                |
| (7)   |                |
| (8)   |                |
| (9)   |                |
| (10)  |                |
| (11)  |                |
| <b>Total</b> (Column (b) must equal Form 990, Part X, col (B) line 25.) ▶ | 89,894.        |

FIN 48 (ASC 740) Footnote In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740)

**Part XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements**

|    |   |    |            |
|----|---|----|------------|
| 1  | Total revenue (Form 990, Part VIII, column (A), line 12)                                | 1  | 3,894,695. |
| 2  | Total expenses (Form 990, Part IX, column (A), line 25)                                 | 2  | 3,935,402. |
| 3  | Excess or (deficit) for the year. Subtract line 2 from line 1                           | 3  | <40,707.>  |
| 4  | Net unrealized gains (losses) on investments  | 4  | 15,531.    |
| 5  | Donated services and use of facilities  | 5  |            |
| 6  | Investment expenses   | 6  |            |
| 7  | Prior period adjustments  | 7  |            |
| 8  | Other (Describe in Part XIV)  | 8  |            |
| 9  | Total adjustments (net) Add lines 4 through 8   | 9  | 15,531.    |
| 10 | Excess or (deficit) for the year per audited financial statements Combine lines 3 and 9 | 10 | <25,176.>  |

**Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return**

|   |  |    |            |
|---|--|----|------------|
| 1 | Total revenue, gains, and other support per audited financial statements       | 1  | 3,910,226. |
| 2 | Amounts included on line 1 but not on Form 990, Part VIII, line 12:            |    |            |
| a | Net unrealized gains on investments  | 2a | 15,531.    |
| b | Donated services and use of facilities   | 2b |            |
| c | Recoveries of prior year grants  | 2c |            |
| d | Other (Describe in Part XIV.)  | 2d |            |
| e | Add lines 2a through 2d  | 2e | 15,531.    |
| 3 | Subtract line 2e from line 1   | 3  | 3,894,695. |
| 4 | Amounts included on Form 990, Part VIII, line 12, but not on line 1:           |    |            |
| a | Investment expenses not included on Form 990, Part VIII, line 7b               | 4a |            |
| b | Other (Describe in Part XIV.)  | 4b |            |
| c | Add lines 4a and 4b  | 4c | 0.         |
| 5 | Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) | 5  | 3,894,695. |

**Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return**

|   |  |    |            |
|---|--|----|------------|
| 1 | Total expenses and losses per audited financial statements                     | 1  | 3,935,402. |
| 2 | Amounts included on line 1 but not on Form 990, Part IX, line 25:              |    |            |
| a | Donated services and use of facilities   | 2a |            |
| b | Prior year adjustments   | 2b |            |
| c | Other losses   | 2c |            |
| d | Other (Describe in Part XIV.)  | 2d |            |
| e | Add lines 2a through 2d  | 2e | 0.         |
| 3 | Subtract line 2e from line 1   | 3  | 3,935,402. |
| 4 | Amounts included on Form 990, Part IX, line 25, but not on line 1:             |    |            |
| a | Investment expenses not included on Form 990, Part VIII, line 7b               | 4a |            |
| b | Other (Describe in Part XIV)   | 4b |            |
| c | Add lines 4a and 4b  | 4c | 0.         |
| 5 | Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18) | 5  | 3,935,402. |

**Part XIV Supplemental Information**

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.

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**SCHEDULE O**  
(Form 990 or 990-EZ)

Department of the Treasury  
Internal Revenue Service

**Supplemental Information to Form 990 or 990-EZ**

Complete to provide information for responses to specific questions on  
Form 990 or 990-EZ or to provide any additional information.  
▶ Attach to Form 990 or 990-EZ.

OMB No 1545-0047

**2011**  
Open to Public  
Inspection

Name of the organization

SECOND AMENDMENT FOUNDATION

Employer identification number  
91-6184167

FORM 990, PART VI, SECTION A, LINE 6: INDIVIDUALS MAY BECOME CONTRIBUTING MEMBERS OF THE ORGANIZATION WITH NO VOTING RIGHTS.

FORM 990, PART VI, SECTION B, LINE 11: A COPY OF FORM 990 IS GIVEN TO EACH BOARD MEMBER FOR REVIEW AFTER FILING. THE FORM IS DISCUSSED AT THE NEXT BOARD MEETING AND APPROVED.

FORM 990, PART VI, SECTION B, LINE 12C: THE ORGANIZATION MONITORS ALL EXPENDITURES FOR POTENTIAL CONFLICTS OF INTEREST.

FORM 990 PART VI SECTION B QUESTION

15. ALL COMPENSATION DECISIONS ARE REVEIWD AND APPROVED BY THE BOARD.

FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990:  
WA, OR, PA, MN, OH, WV, UT, IL, FL, WI, MD, ME, SC, KY, NM, NJ, NY, NC

FORM 990, PART VI, SECTION C, LINE 19: GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS ARE AVAILABLE UPON WRITTEN REQUEST.

FORM 990, PART XI, LINE 5, CHANGES IN NET ASSETS:

NET UNREALIZED GAINS ON INVESTMENTS: 15,531.

FORM 990 PART XI QUESTION 2C. THERE HAS BEEN NO CHANGE IN HOW THE COMMITTEE THAT ASSUMES RESPONSIBILITY FOR OVERSIGHT OF THE AUDIT CONDUCTS ITS ACTIVITIES.

Name of the organization

SECOND AMENDMENT FOUNDATION

Employer identification number

91-6184167

FORM 990 PART IV AN IRS SECTION 501(H) ELECTION WAS MADE BY THE FOUNDATION. NO LOBBYING EXPENDITURES HAVE BEEN MADE BY THE CORPORATIONS.

**Related Organizations and Unrelated Partnerships**  
▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.  
▶ Attach to Form 990. ▶ See separate instructions.

Name of the organization: **SECOND AMENDMENT FOUNDATION** Employer identification number: **91-6184167**

**Part I Identification of Disregarded Entities** (Complete if the organization answered "Yes" to Form 990, Part IV, line 33)

| (a)<br>Name, address, and EIN<br>of disregarded entity | (b)<br>Primary activity | (c)<br>Legal domicile (state or<br>foreign country) | (d)<br>Total income | (e)<br>End-of-year assets | (f)<br>Direct controlling<br>entity |
|--|-------------------------|---|---------------------|---------------------------|-------------------------------------|
| N/A  |                         | WASHINGTON  |                     |                           |                                     |
|  |                         |   |                     |                           |                                     |
|  |                         |   |                     |                           |                                     |
|  |                         |   |                     |                           |                                     |
|  |                         |   |                     |                           |                                     |
|  |                         |   |                     |                           |                                     |
|  |                         |   |                     |                           |                                     |

**Part II Identification of Related Tax-Exempt Organizations** (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.)

| (a)<br>Name, address, and EIN<br>of related organization | (b)<br>Primary activity | (c)<br>Legal domicile (state or<br>foreign country) | (d)<br>Exempt Code<br>section | (e)<br>Public charity<br>status (if section<br>501(c)(3)) | (f)<br>Direct controlling<br>entity | (g)<br>Section 512(b)(13)<br>controlled<br>entity? |    |
|--|-------------------------|---|-------------------------------|---|-------------------------------------|--|----|
|  |                         |   |                               |   |                                     | Yes  | No |
| N/A  |                         | WASHINGTON  |                               |   |                                     |  | X  |
|  |                         |   |                               |   |                                     |  |    |
|  |                         |   |                               |   |                                     |  |    |
|  |                         |   |                               |   |                                     |  |    |
|  |                         |   |                               |   |                                     |  |    |
|  |                         |   |                               |   |                                     |  |    |
|  |                         |   |                               |   |                                     |  |    |

For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule R (Form 990) 2011





**Part V Transactions With Related Organizations** (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35, 35a, or 36)

**Note.** Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

**1** During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

- a** Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity
- b** Gift, grant, or capital contribution to related organization(s)
- c** Gift, grant, or capital contribution from related organization(s)
- d** Loans or loan guarantees to or for related organization(s)
- e** Loans or loan guarantees by related organization(s)

- f** Sale of assets to related organization(s)
- g** Purchase of assets from related organization(s)
- h** Exchange of assets with related organization(s)
- i** Lease of facilities, equipment, or other assets to related organization(s)
- j** Lease of facilities, equipment, or other assets from related organization(s)
- k** Performance of services or membership or fundraising solicitations for related organization(s)
- l** Performance of services or membership or fundraising solicitations by related organization(s)
- m** Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)
- n** Sharing of paid employees with related organization(s)

- o** Reimbursement paid to related organization(s) for expenses
- p** Reimbursement paid by related organization(s) for expenses

- q** Other transfer of cash or property to related organization(s)
- r** Other transfer of cash or property from related organization(s)

**2** If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

|     | (a)<br>Name of other organization | (b)<br>Transaction type (a-r) | (c)<br>Amount involved | (d)<br>Method of determining amount involved | Yes | No |
|-----|-----------------------------------|-------------------------------|------------------------|--|-----|----|
| (1) |                                   |                               |                        |  |     | X  |
| (2) |                                   |                               |                        |  |     | X  |
| (3) |                                   |                               |                        |  |     | X  |
| (4) |                                   |                               |                        |  |     | X  |
| (5) |                                   |                               |                        |  |     | X  |
| (6) |                                   |                               |                        |  | X   |    |





2011 DEPRECIATION AND AMORTIZATION REPORT  
FORM 990 PAGE 10

990

| Asset No | Description         | Date Acquired | Method | Life | Line No | Unadjusted Cost Or Basis | Bus % Excl | Reduction In Basis | Basis For Depreciation | Accumulated Depreciation | Current Sec 179 | Current Year Deduction |
|----------|---------------------|---------------|--------|------|---------|--------------------------|------------|--------------------|------------------------|--------------------------|-----------------|------------------------|
| 19       | COMPUTER EQUIPMENT  | 123109SL      |        | 5.00 | 16      | 5,374.                   |            |                    | 5,374.                 | 5,374.                   |                 | 0.                     |
| 21       | COPIER              | 110105SL      |        | 5.00 | 16      | 795.                     |            |                    | 795.                   | 795.                     |                 | 0.                     |
|          | * 990 PAGE 10 TOTAL |               |        |      |         |                          |            | 0.                 | 6,169.                 | 6,169.                   | 0.              | 0.                     |
|          | OTHER               |               |        |      |         |                          |            |                    |                        |                          |                 |                        |
|          | PROGRAM SERVICES    |               |        |      |         |                          |            |                    |                        |                          |                 |                        |
| 1        | GUNWEK ASSETS       | VARIESVAR     |        | .000 | 16      | 151,300.                 |            |                    | 151,300.               | 151,300.                 |                 | 0.                     |
|          | * 990 PAGE 10 TOTAL |               |        |      |         |                          |            | 0.                 | 151,300.               | 151,300.                 | 0.              | 0.                     |
|          | PROGRAM SERVICES    |               |        |      |         |                          |            |                    |                        |                          |                 |                        |
|          | MANAGEMENT AND      |               |        |      |         |                          |            |                    |                        |                          |                 |                        |
|          | GENERAL             |               |        |      |         |                          |            |                    |                        |                          |                 |                        |
| 2        | VARIOUS             | VARIESVAR     |        | .000 | 16      | 233,805.                 |            |                    | 233,805.               | 233,805.                 |                 | 0.                     |
| 3        | COMPUTER EQUIPMENT  | 051002SL      |        | 3.00 | 16      | 7,800.                   |            |                    | 7,800.                 | 7,800.                   |                 | 0.                     |
| 4        | COMPUTER EQUIPMENT  | 061502SL      |        | 5.00 | 16      | 2,282.                   |            |                    | 2,282.                 | 2,282.                   |                 | 0.                     |
| 5        | COMPUTER EQUIPMENT  | 090203SL      |        | 5.00 | 16      | 1,536.                   |            |                    | 1,536.                 | 1,536.                   |                 | 0.                     |
| 6        | COMPUTER EQUIPMENT  | 061504SL      |        | 5.00 | 16      | 3,824.                   |            |                    | 3,824.                 | 3,824.                   |                 | 0.                     |
| 7        | NETWORK EQUIPMENT   | 080104SL      |        | 3.00 | 16      | 4,401.                   |            |                    | 4,401.                 | 4,401.                   |                 | 0.                     |
| 9        | COMPUTER SONY VGN   | 050105SL      |        | 5.00 | 16      | 2,394.                   |            |                    | 2,394.                 | 2,394.                   |                 | 0.                     |
|          | 5 DESKTOP & 1       |               |        |      |         |                          |            |                    |                        |                          |                 |                        |
| 10       | LAPTOP              | 060105SL      |        | 5.00 | 16      | 4,177.                   |            |                    | 4,177.                 | 4,177.                   |                 | 0.                     |
| 113      | DESKTOP COMPUTERS   | 060105SL      |        | 5.00 | 16      | 1,943.                   |            |                    | 1,943.                 | 1,943.                   |                 | 0.                     |
| 12       | COMPUTER EQUIPMENT  | 050106SL      |        | 5.00 | 16      | 1,083.                   |            |                    | 1,083.                 | 1,012.                   |                 | 71.                    |
| 13       | COMPUTER EQUIPMENT  | 040106SL      |        | 5.00 | 16      | 1,667.                   |            |                    | 1,667.                 | 1,582.                   |                 | 85.                    |

128102  
05-01-11

(D) - Asset disposed

\* ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction

| Asset No | Description         | Date Acquired | Method | Life | Line No | Unadjusted Cost Or Basis | Bus % Excl | * Reduction In Basis | Basis For Depreciation | Accumulated Depreciation | Current Sec 179 | Current Year Deduction |
|----------|---------------------|---------------|--------|------|---------|--------------------------|------------|----------------------|------------------------|--------------------------|-----------------|------------------------|
| 14       | LAPTOP COMPUTER     | 090107SL      |        | 5.00 | 16      | 7,011.                   |            |                      | 7,011.                 | 4,674.                   |                 | 1,402.                 |
| 15       | COMPUTER EQUIPMENT  | 020108SL      |        | 3.00 | 16      | 12,772.                  |            |                      | 12,772.                | 12,417.                  |                 | 355.                   |
| 16       | COMPUTER EQUIPMENT  | 020108SL      |        | 5.00 | 16      | 5,869.                   |            |                      | 5,869.                 | 3,424.                   |                 | 1,174.                 |
| 17       | COMPUTER EQUIPMENT  | 030108SL      |        | 5.00 | 16      | 1,806.                   |            |                      | 1,806.                 | 1,023.                   |                 | 361.                   |
| 18       | COMPUTER EQUIPMENT  | 010109SL      |        | 5.00 | 16      | 3,630.                   |            |                      | 3,630.                 | 1,452.                   |                 | 726.                   |
| 20       | COPIER              | 100110SL      |        | 5.00 | 16      | 2,628.                   |            |                      | 2,628.                 | 88.                      |                 | 526.                   |
|          | * 990 PAGE 10 TOTAL |               |        |      |         | 298,628.                 |            | 0.                   | 298,628.               | 287,834.                 | 0.              | 4,700.                 |
|          | MANAGEMENT AND GEN  |               |        |      |         | 456,097.                 |            | 0.                   | 456,097.               | 445,303.                 | 0.              | 4,700.                 |
|          | * GRAND TOTAL 990   |               |        |      |         |                          |            |                      |                        |                          |                 |                        |
|          | PAGE 10 DEPR        |               |        |      |         |                          |            |                      |                        |                          |                 |                        |

128102 05-01-11 (D) - Asset disposed \* ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction

# Application for Extension of Time To File an Exempt Organization Return

OMB No 1545-1709

▶ **File a separate application for each return.**

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box
- 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.

**Electronic filing (e-file)** You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit [www.irs.gov/efile](http://www.irs.gov/efile) and click on e-file for Charities & Nonprofits

**Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed).**

A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only

All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns

|  |   |  |
|--|---|--|
| <b>Type or print</b>   | Name of exempt organization or other filer, see instructions<br><b>SECOND AMENDMENT FOUNDATION</b>                    | Employer identification number (EIN) or<br><input checked="" type="checkbox"/> <b>91-6184167</b> |
| File by the due date for filing your return See instructions | Number, street, and room or suite no. If a P.O. box, see instructions<br><b>12500 N.E. 10TH PLACE</b>                 | Social security number (SSN)<br><input type="checkbox"/>   |
|  | City, town or post office, state, and ZIP code. For a foreign address, see instructions.<br><b>BELLEVUE, WA 98005</b> |  |

Enter the Return code for the return that this application is for (file a separate application for each return) 01

| Application Is For                       | Return Code | Application Is For       | Return Code |
|--|-------------|--------------------------|-------------|
| Form 990                                 | 01          | Form 990-T (corporation) | 07          |
| Form 990-BL                              | 02          | Form 1041-A              | 08          |
| Form 990-EZ                              | 01          | Form 4720                | 09          |
| Form 990-PF                              | 04          | Form 5227                | 10          |
| Form 990-T (sec. 401(a) or 408(a) trust) | 05          | Form 6069                | 11          |
| Form 990-T (trust other than above)      | 06          | Form 8870                | 12          |

**MR. ALAN GOTTLIEB**

• The books are in the care of ▶ **12500 N.E. 10 PLACE - BELLEVUE, WA 98005**  
Telephone No. ▶ **425-454-7012** FAX No. ▶ \_\_\_\_\_

- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) \_\_\_\_\_. If this is for the whole group, check this box . If it is for part of the group, check this box  and attach a list with the names and EINs of all members the extension is for.

**1** I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until **AUGUST 15, 2012**, to file the exempt organization return for the organization named above. The extension is for the organization's return for:  
▶  calendar year **2011** or  
▶  tax year beginning \_\_\_\_\_, and ending \_\_\_\_\_.

**2** If the tax year entered in line 1 is for less than 12 months, check reason:  Initial return  Final return  
 Change in accounting period

|  |           |    |    |
|--|-----------|----|----|
| <b>3a</b> If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.                                   | <b>3a</b> | \$ | 0. |
| <b>b</b> If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit. | <b>3b</b> | \$ | 0. |
| <b>c Balance due.</b> Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System) See instructions.              | <b>3c</b> | \$ | 0. |

**Caution.** If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

LHA For Privacy Act and Paperwork Reduction Act Notice, see Instructions.

Form 8868 (Rev. 1-2012)