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50m 990-PF

Department of the Treasury Internal Revenue Service

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

Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements

OMB No 1545-0052

2009

2	For c	alenda	r year 2009, or tax year beginning $05/12/09$, a	and ending 12/3	1/09					
ISC	က္လြ ေ Ch	neck al	I that apply: X Initial return Initial re	turn of a former public	charity	L	Final r	return		
			Amended return Add	ress change	Name	change				
*	Se use u		r year 2009, or tax year beginning 05/12/09, at that apply: Initial return				oyer ident		n num	ber
MAIR	¦ m la ∙ Othe	bel. erwise,	THE CROSSWOLS FOUNDATION		B Telephone number (see page 10 of the instructions)					
		rint	Number and street (or P O box number if mail is not delivere	d to street address)	Room/suite	-	1-977			·
Č		type.	% SILVERCREST, 614 E. HIGH	H ST.		C If exe	mption app	lication	s pend	ing, check here
	See S	Specific	only or commy one of and an obod			D 1. Fo	reign organ	uzations	, check	here •
•	lnstru ಲಾ		·	22902		2. Fo	reign organ	nzations	meetir	ng the
	H CI		pe of organization X Section 501(c)(3) exempt private	foundation		85	% test, che	ck here	and att	ach computation
	<u>Ş</u> Ls	ection		e private foundation		- '				terminated under
			et value of all assets at end J Accounting method	X Cash	rual		n 507(b)(1)			
		•	om Part II, col (c), Uther (specify)			1	foundation section 50			h termination
		2 16) ▶				under	Section 50	7(0)(1)(1 J, Crie	
	Pa	rt I	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal	(a) Revenue and expenses per	(b) Net in	vestment	(c) Ad	justed r	net	(d) Disbursements for chantable
			total or amounts in columns (o), (c), and (o) may not necessarily equal the amounts in column (a) (see page 11 of the instructions))	books		ome		come		purposes
		4	Contributions, gifts, grants, etc , received (attach schedule)	818,739					RE	CEIVEL ()
			Check ► fithe foundation is not required to attach Sch B	010,.33				1	-	Ø
l			Interest on savings and temporary cash investments	9		9		0	NON	1 8 2010
			Dividends and interest from securities	2,901		2,901		003	INO A	192
		-	Gross rents	, , , , , , , , , , , , , , , , , , ,						
	a	ь	Net rental income or (loss)						OG	DEN, UT
	ŽΙ	6a	Net gain or (loss) from sale of assets not on line 10	-208				Terrer -		
	Revenue	b	Gross sales price for all assets on line 6a 97,640							
	8	7	Capital gain net income (from Part IV, line 2)			0				
		8	Net short-term capital gain						0	
		9	Income modifications							
		10a	Gross sales less returns & allowances							
		b	Less: Cost of goods sold							
			Gross profit or (loss) (attach schedule)							
			Other income (attach schedule)	001 441		0.010				
i			Total. Add lines 1 through 11	821,441		2,910	<u> </u>		0	
İ	နွ		Compensation of officers, directors, trustees, etc.		-					
	oenses		Other employee salaries and wages			-				
	be		Pension plans, employee benefits Legal fees (attach schedule) See Stmt 1	500						500
	Ex		Accounting fees (attach schedule)	300						
	Š.		Other professional fees (attach schedule)							-
1	20 rati		Interest							
l	હ્ર્ું. <u>ફ</u>		Taxes (attach schedule) (see page 14 of the instructions) Stmt 2	850						850
	<i>&</i> .₽		Depreciation (attach schedule) and depletion							
	₹ 5	20	Occupancy							
	≥ P	21	Travel, conferences, and meetings							
	an 🗇	22	Printing and publications							
	<u> </u>	ſ	Other expenses (att sch) Stmt 3	65		65				
	atir	24	Total operating and administrative expenses.							1 250
	er;		Add lines 13 through 23	1,415		65				1,350
	SCANINFD NOV 28 2016 Operating and Administrative		Contributions, gifts, grants paid	19,297					0	19,297
			Total expenses and disbursements. Add lines 24 and 25	20,712		65				20,647
		27	Subtract line 26 from line 12. Excess of revenue over expenses and disbursements	800,729						
1		a b	Net investment income (if negative, enter -0-)	300,723	<u> </u>	2,845	 	·	·····	
			Het mrestment meeme (in negative, enter -0-)						0	

Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions) Beginning of year (a) Book Value (b) Book V	alue	(c) Fair Market Value
		(0)
1 Cash—non-interest-bearing		
2 Savings and temporary cash investments 14	3,933	148,933
3 Accounts receivable ▶		
Less allowance for doubtful accounts ▶		
4 Pledges receivable ▶		
Less allowance for doubtful accounts ▶		
5 Grants receivable		
6 Receivables due from officers, directors, trustees, and other		
disqualified persons (attach schedule) (see page 16 of the		
Instructions)		
7 Other notes and loans receivable (att. schedule) ▶		
Less. allowance for doubtful accounts ▶		
8 Inventones for sale or use		
8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Investments—US and state government obligations (attach schedule) Stmt 4 28		
	9,126	289,062
	1,931	320,193
c Investments—corporate bonds (attach schedule)		
11 Investments—land, buildings, and equipment basis		
Less accumulated depreciation (attach sch.)		
12 Investments—mortgage loans	0 706	20 706
	9,796	39,796
14 Land, buildings, and equipment basis		
Less accumulated depreciation (attach sch.)		
15 Other assets (describe ►)		
16 Total assets (to be completed by all filers—see the	0.706	707 004
	9,786	797,984
17 Accounts payable and accrued expenses		
18 Grants payable		
19 Deferred revenue 20 Loans from officers, directors, trustees, and other disqualified persons 21 Mortgages and other notes payable (attach schedule)		
20 Loans from officers, directors, trustees, and other disqualified persons		
Mortgages and other notes payable (attach schedule)		
22 Other habilities (describe) 23 Total liabilities (add lines 17 through 22)	0	
23 Total liabilities (add lines 17 through 22) 0 Foundations that follow SFAS 117, check here ▶		
U 24 Uprostreted		
24 Unrestricted 25 Temporarily restricted		,
25 Temporarily restricted 26 Permanently restricted		
and complete lines 24 through 26 and lines 30 and 31. Unrestricted Temporarily restricted Permanently restricted Foundations that do not follow SFAS 117, check here ▶ and complete lines 27 through 31. Capital stock, trust principal, or current funds Paid-in or capital surplus, or land, bldg, and equipment fund Retained earnings, accumulated income, endowment, or other funds Total net assets or fund balances (see page 17 of the instructions) Total liabilities and net assets/fund balances (see page 17		
and complete lines 27 through 31.		
27 Capital stock, trust principal, or current funds	9,786	
28 Paid-in or capital surplus, or land, bldg , and equipment fund	<u> </u>	
29 Retained earnings, accumulated income, endowment, or other funds		
30 Total net assets or fund balances (see page 17 of the		
instructions) 0 79	9,786	
31 Total liabilities and net assets/fund balances (see page 17		
	9,786	
Part III Analysis of Changes in Net Assets or Fund Balances		
1 Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with		
end-of-year figure reported on prior year's return)	1_1_	
2 Enter amount from Part I, line 27a	2	800,729
3 Other increases not included in line 2 (itemize) ▶ See Statement 7	3	631
4 Add lines 1, 2, and 3	4	801,360
5 Decreases not included in line 2 (itemize) ▶ See Statement 8	5	1,574
6 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30	6	799,786

	ind Losses for Tax on Investr		(b) How acquired	4.10	(4) 5 : ::
(a) List and descril 2-story brick ware	be the kind(s) of property sold (e.g., real esta ehouse, or common stock, 200 shs MLC Co	P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)	
1a STATE STREET #6	566		D—Donation	Various	Various
b BRANDYTRUST SP			D	Various	Various
c					
d					
e		- 	1		<u> </u>
(e) Gross sales price	(f) Depreciation allowed (or allowable)		or other basis pense of sale		n or (loss) f) minus (g)
a 97,640			97,745		-105
b			103		-103
<u>c</u>				-	
d					
e Complete and for a sector shows	 	foundation on 12/21	1/60		
Complete only for assets snown	ng gain in column (h) and owned by the				(h) gain minus less than -0-) or
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	, , ,	ess of col (ı) ol (ı), ıf any		rom col (h))
a					-105
b					-103
c					··· -
d					
е					
2 Capital gain net income or (net	capital loss) If gain, also enter			2	-208
3 Net short-term capital gain or (lo	oss) as defined in sections 1222(5) and				
, ,	B, column (c) (see pages 13 and 17 of				
If (loss), enter -0- in Part I, line 8				3	
Part V Qualification U	nder Section 4940(e) for Red	uced Tax on Ne	t Investment Inco	me	
(For optional use by domestic privat	e foundations subject to the section 49	940(a) tax on net inve	stment income.)		
If section 4940(d)(2) applies, leave t	his part blank.				37 / 3
Was the foundation liable for the ser	ction 4942 tax on the distributable amo	ount of any year in the	e base period? Y	es 🗌 No	N/A
	alify under section 4940(e). Do not con				
	each column for each year, see page		s before making any er	itries	
(a)	(b)		(c)		(d)
Base period years Calendar year (or tax year beginning		utions Net valu	ue of nonchantable-use as:		tribution ratio divided by col_(c))
2008					
2007					
2006					
2005					
2004					
2 Total of line 1, column (d)				2	
-	e 5-year base period—divide the total of		ne		
number of years the foundation	has been in existence if less than 5 years	ears		3	
4. Enter the net value of penchant	able-use assets for 2009 from Part X,	lino 5		4	
4 Enter the net value of nonchant	able-use assets for 2009 from Part A,	iine 5		-	
5 Multiply line 4 by line 3				5	
3 Muluply line 4 by line 3					
6 Enter 1% of net investment inco	ome (1% of Part I, line 27b)			6	
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
7 Add lines 5 and 6				7	
8 Enter qualifying distributions fro	m Part XII, line 4			8	
	an line 7, check the box in Part VI, line	e 1b, and complete th	at part using a 1% tax	rate See the	
Part VI instructions on page 18	· · · · · · · · · · · · · · · · · · ·			·	5 . 000 PE (000

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	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the instruction	<u>1S)</u>		
1a	Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ and enter "N/A" on line 1			
	Date of ruling or determination letter: (attach copy of letter if necessary—see instructions)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check			<u>57</u>
	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, col (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			57
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)			<u> </u>
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	····		57
6	Credits/Payments			
а	2009 estimated tax payments and 2008 overpayment credited to 2009 6a			
b	Exempt foreign organizations—tax withheld at source 6b			
С	Tax paid with application for extension of time to file (Form 8868) 6c 250			
d	Backup withholding erroneously withheld 6d 6d			
7	Total credits and payments. Add lines 6a through 6d			<u> 250</u>
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	•		193
11	Enter the amount of line 10 to be Credited to 2010 estimated tax ▶ 0 Refunded ▶ 11			193
Pa	rt VII-A Statements Regarding Activities			
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?	1a	<u> </u>	X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19			
	of the instructions for definition)?	1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials			
	published or distributed by the foundation in connection with the activities			
С	Did the foundation file Form 1120-POL for this year?	1c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year.			
	(1) On the foundation ▶ \$ (2) On foundation managers ▶ \$			
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			
	on foundation managers \$			
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.			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles 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?	A 4b		
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			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:			
	By language in the governing instrument, or			
	By state legislation that effectively amends the governing instrument so that no mandatory directions that			
	conflict with the state law remain in the governing instrument?	6		
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	7	X	
8a	Enter the states to which the foundation reports or with which it is registered (see page 19 of the			
	instructions) ▶ VA			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General			
	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8t	X	1
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or			
	4942(j)(5) for calendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV on page			
	27)? If "Yes," complete Part XIV	9	<u> </u>	X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their			
	names and addresses	10		
			~~ ~	_

Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?

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)

Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

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?

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X

3b

4a

X No

N/A

| Yes

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_Pa	art VII-B S	tatem	ents Regard	ding	Activities for Which Fo	orm 4720 May Be F	Required (cor	<u>itinue</u>	ed)		
5a	During the year	did the	foundation pay	or inc	ur any amount to						
	(1) Carry on pro	pagand	da, or otherwise	attem	pt to influence legislation (sec	ction 4945(e))?		Yes	X No		
					blic election (see section 4955				_	- 1	
			, any voter regi			,		Yes	X No		
					, study, or other similar purpos	ses?	П	Yes	X No	- 1	
	-				than a chantable, etc, organiz						
			-		.940(d)(2)? (see page 22 of the			Yes	X No	1	
	-				ous, charitable, scientific, litera			163	110		
						ary, or educational		V	X No	1	
	• •		•	•	to children or animals?			Yes	X No	.	
b	-			_	f the transactions fail to qualify				N/A		
	_				notice regarding disaster assis		ne instructions)?		IN/A	5b	
	•			_	arding disaster assistance che			•	· 🗆 🔰		
С					s the foundation claim exempti	ion from the tax	/				
	because it maint	tained e	expenditure res	ponsib	olity for the grant?		N/A 📙	Yes	∐ No		
	If "Yes," attach t	the state	ement required	by Re	gulations section 53 4945-5(d).					
6a	Did the foundation	on, duri	ing the year, red	ceive a	any funds, directly or indirectly	, to pay premiums					
	on a personal be	enefit co	ontract?					Yes	X No		
b	Did the foundation	on, duri	ing the year, pa	y pren	niums, directly or indirectly, on	a personal benefit cont	tract?			6b	X
	If "Yes" to 6b, file	e Form	8870								
7a	At any time durir	ng the t	tax year, was th	e foun	idation a party to a prohibited t	tax shelter transaction?		Yes	X No		
b	=	_	=		ds or have any net income atti		ion?		N/A	7b	
P					ers, Directors, Trustees			v Pai	d Employ	ees,	
		_	tractors		•	•	0 , 0 .	•		•	
1				undati	on managers and their comp	pensation (see page 22	of the instruction	ns).			
	•		<u> </u>		<u> </u>		T	T	Contributions to		
			(a) Name an	d addre	255	(b) Title, and average hours per week	(c) Compensation (If not paid, enter	ì e	mployee benefit		pense account,
			(2)			devoted to position	-0-)	, pia	ans and deferred compensation	othe	r allowances
	LEANOR CROSBY				CHARLOTTESVILLE	CHAIRMAN		1	•		
		614 12	UTCU CM			1.00	}	ا	0		0
	SILVERCREST,				VA 22902	TREASURER		┪		 	
	DAVID HAMAR,	-			CHARLOTTESVILLE			ړ			•
	SILVERCREST,	614 E	. HIGH ST.		VA 22902	1.00		<u> </u>	0	 	0
								1		İ	
								+			
							<u> </u>				
2	•			mploy	ees (other than those includ	led on line 1—see page	23 of the instru	ctions	s).		
	If none, enter "I	NONE."	•				,	-			
						(b) Title, and average			Contributions to imployee benefit	/0\ Ev	pense account,
	(a) Nam	e and ad	ddress of each em	ployee	paid more than \$50,000	hours per week devoted to position	(c) Compensation		ans and deferred		r allowances
						devoted to position			compensation		
N	ONE						1				
_							<u> </u>				
										Ī	
				•							
										†	-
							1				
							 	+		 	
										1	
T-4-	l number of other-	omale:	uoon nord ores	¢60.00			.1	——			_
1018	I number of other	employ	yees paid over	φου,υι	JU						
									Fo	rm 99(0-PF (2009)

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Part VIII Information About Officers, Directors, and Contractors (continued)	Trustees, Foundation Managers, Highly Paid Emp	oloyees,						
3 Five highest-paid independent contractors for professional services (see page 23 of the instructions). If none, enter "NONE."								
(a) Name and address of each person paid more that	an \$50,000 (b) Type of service	(c) Compensation						
NONE								
	· ·							
Total number of others receiving over \$50,000 for professional service	es	<u> </u>						
Part IX-A Summary of Direct Charitable Activit								
List the foundation's four largest direct charitable activities during the tax year organizations and other beneficianes served, conferences convened, research		Expenses						
1 THE FOUNDATION WILL INVEST CONT RETURN WHICH WILL FUND ANNUAL I SELECTED 501(C)(3) CHARITIES.								
2								
3								
4								
Part IX-B Summary of Program-Related Investi	ments (see page 24 of the instructions)							
Describe the two largest program-related investments made by the foundation	during the tax year on lines 1 and 2	Amount						
1 N/A								
2								
All other program-related investments See page 24 of the instructions								
3								

Total. Add lines 1 through 3

qualifies for the section 4940(e) reduction of tax in those years.

	rt X Minimum Investment Return (All domestic foundations must complete this part. Fore	eian f	oundations
Гd	see page 24 of the instructions.)	oigii i	oundations,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
•	purposes.		
а	Average monthly fair market value of securities	1a	34,111
b	Average of monthly cash balances	1b	48,865
C	Fair market value of all other assets (see page 24 of the instructions)	1c	0
d	Total (add lines 1a, b, and c)	1d	82,976
	Reduction claimed for blockage or other factors reported on lines 1a and	<u>'</u>	02/0.0
е	1c (attach detailed explanation) 1e 0		
2		2	0
2	Acquisition indebtedness applicable to line 1 assets	3	82,976
3	Subtract line 2 from line 1d	-3-	62,310
4	Cash deemed held for chantable activities. Enter 1½ % of line 3 (for greater amount, see page 25 of	١. ا	1,245
_	the instructions)	4	81,731
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	2,620
6	Minimum investment return. Enter 5% of line 5	6	
Pa	art XI Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) private of	operatii	ng
	foundations and certain foreign organizations check here ▶ and do not complete this part)	·	2,620
1	Minimum investment return from Part X, line 6	1	2,620
2a	Tax on investment income for 2009 from Part VI, line 5	-	
þ	Income tax for 2009 (This does not include the tax from Part VI)	┨. │	
С	Add lines 2a and 2b	2c	57 2,563
3	Distributable amount before adjustments Subtract line 2c from line 1	3	2,563
4	Recoveries of amounts treated as qualifying distributions	4	0 500
5	Add lines 3 and 4	5_	2,563
6	Deduction from distributable amount (see page 25 of the instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII,		0.560
	line 1	7	2,563
Pa	art XII Qualifying Distributions (see page 25 of the instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	1a	20,647
b	Program-related investments—total from Part IX-B	1b	· · · · · · · · · · · · · · · · · · ·
2	Amounts paid to acquire assets used (or held for use) directly in carrying out chantable, etc.,		
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	20,647
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income		_
	Enter 1% of Part I, line 27b (see page 26 of the instructions)	5	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	20,647
	Note. The amount on line 6 will be used in Part V. column (b), in subsequent years when calculating whether the found	ation	

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Pa	ert XIII Undistributed Income	e (see page 26 of	the instructions)	T		
4	Distributable amount for 2000 from Bort	VI	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
1	Distributable amount for 2009 from Part	ΛI,	Corpus	rears prior to 2000	2000	2,563
2	line 7 Undistributed income, if any, as of the e	nd of 2000				2,303
	Enter amount for 2008 only	110 01 2009				
	Total for pnor years 20 , 20	20			·	, ,
3	Excess distributions carryover, if any, to	— — ;				
	From 2004	2009				
	From 2005					
	From 2006					
	From 2007					
	From 2008					
f	Total of lines 3a through e					
4	Qualifying distributions for 2009 from Pa	ort XII				
•	line 4 ▶ \$ 20 , 647					
а	Applied to 2008, but not more than line:	2a				
	Applied to undistributed income of prior					
_	(Election required—see page 26 of the i	-				
c	Treated as distributions out of corpus (E	·				
Ū	required—see page 26 of the instruction			`		
d	Applied to 2009 distributable amount	,				2,563
	Remaining amount distributed out of coi	rous	18,084			
5	Excess distributions carryover applied to	·				
•	(If an amount appears in column (d), the		······································		···········	
	amount must be shown in column (a))					
6	Enter the net total of each column as					
	indicated below:			·		
а	Corpus Add lines 3f, 4c, and 4e Subtra	ect line 5	18,084			
	Prior years' undistributed income Subtr					
	line 4b from line 2b					
С	Enter the amount of prior years' undistri	buted	· · · · · · · · · · · · · · · · · · ·			
	income for which a notice of deficiency	has				
	been issued, or on which the section 49	42(a)				
	tax has been previously assessed	, ,			1	
d	Subtract line 6c from line 6b Taxable					
	amount—see page 27 of the instruction	s				
е	Undistributed income for 2008. Subtract	line				
	4a from line 2a Taxable amount—see p	page				
	27 of the instructions					
f	Undistributed income for 2009 Subtract	lines				
	4d and 5 from line 1 This amount must	be				
	distributed in 2010					0
7	Amounts treated as distributions out of	corpus				
	to satisfy requirements imposed by sect	tion				
	170(b)(1)(F) or 4942(g)(3) (see page 27	of the				
	instructions)	ļ				
8	Excess distributions carryover from 200	4 not				
	applied on line 5 or line 7 (see page 27	of the				
	instructions)					
9	Excess distributions carryover to 201	0.				
	Subtract lines 7 and 8 from line 6a		18,084			
10	Analysis of line 9:	,				
а	Excess from 2005	0				-
b	Excess from 2006	0				1
C	Excess from 2007	0				
d	Excess from 2008	1,251				
е	Excess from 2009	18,084				

Pá	rt XIV Private Operating Fou	indations (see pa	age 27 of the inst	ructions and Part	VII-A, question 9)					
1a	If the foundation has received a ruling or										
	foundation, and the ruling is effective for 2009, enter the date of the ruling										
b	Check box to indicate whether the foundation is a private operating foundation described in section 4942(j)(3) or 4942(j)(5)										
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years							
	income from Part I or the minimum	(a) 2009	(b) 2008	(c) 2007	(d) 2006	(e) Total					
	investment return from Part X for	(4) -011									
	each year listed										
_	85% of line 2a										
b						_					
¢	Qualifying distributions from Part XII,										
	line 4 for each year listed				 						
d	Amounts included in line 2c not used directly										
	for active conduct of exempt activities										
е	Qualifying distributions made directly										
	for active conduct of exempt activities.				!						
	Subtract line 2d from line 2c		-		 						
3	Complete 3a, b, or c for the		İ								
	alternative test relied upon:										
а	"Assets" alternative test—enter										
	(1) Value of all assets										
	(2) Value of assets qualifying under										
	section 4942(j)(3)(B)(i)			<u> </u>							
b	"Endowment" alternative test—enter 2/3										
	of minimum investment return shown in										
	Part X, line 6 for each year listed										
С	"Support" alternative test—enter.										
	(1) Total support other than gross										
	investment income (interest,										
	dividends, rents, payments on										
	securities loans (section										
	512(a)(5)), or royalties)										
	(2) Support from general public and 5 or more exempt										
	organizations as provided in										
	section 4942(j)(3)(B)(III)										
	(3) Largest amount of support from		1								
	an exempt organization	·									
	(4) Gross investment income				ļ						
Pa	art XV Supplementary Inform		-		ad \$5,000 or moi	re in assets at					
	any time during the y	ear—see page 2	8 of the instruction	ons.)							
1	Information Regarding Foundation Ma	-									
а	List any managers of the foundation who										
	before the close of any tax year (but only	rif they have contribut	ted more than \$5,000)	(See section 507(d)(2	2))						
	N/A	·									
b	List any managers of the foundation who		· ·		e portion of the						
	ownership of a partnership or other entity	of which the founda	tion has a 10% or great	ater interest.							
	N/A										
2	Information Regarding Contribution, G										
	Check here ► X if the foundation only		•								
	unsolicited requests for funds. If the four	ndation makes gifts, gi	rants, etc (see page 2	28 of the instructions) to	o individuals or						
	organizations under other conditions, co	mplete items 2a, b, c,	and d		·						
а	The name, address, and telephone num	ber of the person to w	hom applications sho	uld be addressed							
	N/A										
b	The form in which applications should be	e submitted and inforn	nation and materials th	ney should include							
	N/A	·									
С	Any submission deadlines										
	N/A	to	and and the state	Calda Inc. de eff. 14.1		<u> </u>					
d	Any restrictions or limitations on awards	, such as by geograph	iicai areas, charitable	neias, kinas of institutio	ons, or other factors						
	N/A	 -				50m 990-PF (2000					

Part XV Supplementary Information (co				
3 Grants and Contributions Paid During the		Future Payment	1 · · · · · · · · · · · · · · · · · · ·	
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year SEE ATTACHED SEE ATTACHED SEE ATTACHED PA SEE ATTAC	NONE	PUBL CHARITY	GENERAL	19,297
			<u> </u>	
Total	T		▶ 3a	19,297
b Approved for future paymentN/A				
Total			▶ 3b	

Form 990-PF (2009) THE CROSSWOLS FOUNDATION

F	art XVI-A	Analysis of Income-Producing Ac	tivities								
Ent	er gross amo	unts unless otherwise indicated	Unrelate	d business income	Excluded 1	by section 512, 513, or 514	(e)				
			(a)	(b)	(c)	(d)	Related or exempt function income				
			Business code	Amount	Exclusion code	Amount	(See page 28 of the instructions)				
1	Program ser				 		the instructions)				
					+	-					
					 						
					+						
	d				+ +						
					+						
	f				+ +						
_	_	d contracts from government agencies	-		++		<u> </u>				
	•	dues and assessments			14	9					
_		avings and temporary cash investments			14	2,901					
4		nd interest from securities			1 2	2,301					
5		come or (loss) from real estate			+						
		anced property			++						
_		t-financed property			+-+						
		come or (loss) from personal property			+ +						
-	Other invest				18	-208					
	-	s) from sales of assets other than inventory			1 2 1	-208	<u> </u>				
		or (loss) from special events			+						
	•	or (loss) from sales of inventory			+						
11	Other revenu				+						
					++						
					+						
					+ +						
40	Cubastal Ad	ld cellurase (b) (d) and (c)			0	2,702	0				
		d columns (b), (d), and (e)	L	1	<u> </u>		2,702				
		ne 12, columns (b), (d), and (e)	۰			13 _	2,102				
_	Part XVI-B	in line 13 instructions on page 28 to verify calculate Relationship of Activities to the A		ent of Exempt	Piirnose						
	Line No.	Explain below how each activity for which income									
	Line No. ▼	accomplishment of the foundation's exempt purp					of the				
	Ť	instructions.)	.0000 (011101 11101	Toy promaing famous	o. oao pa	. p. c. c. , . (- c. p. g. a.					
	8	INCOME IS FROM CAPITAL TRANSACTIONS RELATED TO PORTFOLIO									
_		INCOME IS FROM CAPITAL TRANSACTIONS RELATED TO PORTFOLIO INVESTMENTS THAT FUND THE ORGANIZATION'S CHARITABLE GIVING									
_											
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DA	Α		•				Form 990-PF (2009				

Form 990-PF (2009) THE CROSSWOLS FOUNDATION

1111 990-FF (20	us) III	CICCOSONODO	LOCHDRITON		0100721		
Part XVII	Informat	ion Regarding	Transfers To and	Transactions and Rela	ationships With Nonchar	itable	
	Exempt (Organizations					

1	Did the o	rganization directly or indi	rectly engag	e in any of the following with any	other organization described		Yes	No
	ın sectior	501(c) of the Code (other	r than sectio	n 501(c)(3) organizations) or in	section 527, relating to political			
	organizat	ions?				<u> </u>		
а	Transfers	from the reporting found	ation to a no	nchantable exempt organization	of·	į		
	(1) Cash					1a(ı)	X
	(2) Othe	r assets				1a(X
b	Other tra	nsactions						
	(1) Sales	s of assets to a nonchanta	able exempt	organization		1b(1)	X
		nases of assets from a no				1b(2)	X
	(3) Rent	al of facilities, equipment,	or other ass	ets		1b(3)	X
	(4) Reim	bursement arrangements	}			1b(4)	X _
	(5) Loan	s or loan guarantees				1b(5)	X
	(6) Perfo	ormance of services or me	embership or	fundraising solicitations		1b(6)	X
С	Sharing of	of facilities, equipment, m	ailing lists, of	ther assets, or paid employees		10		X
d	If the ans	wer to any of the above is	s "Yes," com	plete the following schedule. Co	lumn (b) should always show the fair r	market		
	value of	he goods, other assets, o	r services gi	ven by the reporting foundation.	If the foundation received less than fa	ır market		
	value in a	any transaction or sharing	arrangemer	it, show in column (d) the value	of the goods, other assets, or services	received.		
	(a) Line no	(b) Amount involved	(c) Name o	of noncharitable exempt organization	(d) Description of transfers, transa	ctions, and sharing arra	ngements	<u> </u>
<u> </u>	<u> </u>							
					ļ			
			<u> </u>			 -		
								
								
		-		<u> </u>				
					- · · · · · . · · · · · · · · · · · ·			
		 ., 						
	la tha fai	undation dispatilities indispa	the officer of	with a related to ano ar more	To your and a reconstructions			
∠a		•	•	with, or related to, one or more than section 501(c)(3)) or in sec	· •		Yes 🔀	el No
h		complete the following so		man section 50 Ne)(5)) of in sec	don 327		103 =	9 110
	11 103,	(a) Name of organization	rieduie.	(b) Type of organization	(c) Description	of relationship	-	
	N/A	(.,,		(-)	· · · · · · · · · · · · · · · · · · ·			_
			•					
					ng schedules and statements, and to the bes			
	belief, it is	true, correct, and complete.	Declaration of p	oreparer (other than taxpayer or fiduc	ary) is based on all information of which prej)	
	_	1		111	15110 1/2	asster		
<u>e</u>	Signa	ture of officer or trustee		Date	Title	<u> </u>		
Sign Here					Date Check if	Preparer's id number (see		on
돑	ج » <u>-</u>	Preparer's			self-employ	ed ▶ page 30 of th	e instructio	ns)
ij	Paid Preparer's Use Only	signature G.DAV		S HAMAR, JD, CPA	11/15/10	P005	1440	5
	Pa rep: Ise	Firm's name (or yours if		crest Financial	Services, Inc.			
	<u>-</u> -	self-employed), address,		High Street		EIN ► 11-24		
		and ZIP code	Charl	ottesville, VA	22902	Phone no 434 -9		
						Form	990-PF	(2009)

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

Employer identification number

THE CROSSWOLS	FOUNDATION	27-0186921
Organization type (check or	ne)·	
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organization	
	4947(a)(1) nonexempt chantable trust not treated as a private foundation	1
	527 political organization	
Form 990-PF	501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundation	
	501(c)(3) taxable private foundation	
· ·	s covered by the General Rule or a Special Rule . (7), (8), or (10) organization can check boxes for both the General Rule and a Spe	ecial Rule See
General Rule		
	filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more one contributor. Complete Parts I and II	e (in money or
Special Rules		
sections 509(a)(1) a	o(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the ind 170(b)(1)(A)(vi), and received from any one contributor, during the year, a con 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1 Co	ntribution of the greater
the year, aggregate	0(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributions of more than \$1,000 for use exclusively for religious, charitable, scies, or the prevention of cruelty to children or animals. Complete Parts I, II, and III	
the year, contributio aggregate to more t year for an exclusive	n(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one ins for use exclusively for religious, chantable, etc., purposes, but these contribution \$1,000. If this box is checked, enter here the total contributions that were receively religious, chantable, etc., purpose Do not complete any of the parts unless the inization because it received nonexclusively religious, chantable, etc., contributions	ons did not ceived during the ne General Rule
990-EZ, or 990-PF), but it m	at is not covered by the General Rule and/or the Special Rules does not file Sche nust answer "No" on Part IV, line 2 of its Form 990, or check the box in the headin orm 990-PF, to certify that it does not meet the filing requirements of Schedule B	ng of its Form

For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF.

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

Schedule B (Form 990, 990-EZ, or 990-PF) (2009) of 1 of Part I **Employer identification number** Name of organization THE CROSSWOLS FOUNDATION 27-0186921 Part I Contributors (see instructions) (a) (b) (c) (d) No. Name, address, and ZIP + 4 Aggregate contributions Type of contribution 1 THE PATCHWORK CHARITABLE FOUNDATION Person 201 KING OF PRUSSIA ROAD, SUITE 100 **Payroll** 817,389 X Noncash PA 19087 RADNOR (Complete Part II if there is a noncash contribution.) (a) (c) (d) No. Name, address, and ZIP + 4 **Aggregate contributions** Type of contribution Person **Payroll** \$ Noncash (Complete Part II if there is a noncash contribution) (a) (c) (d) Type of contribution No. Name, address, and ZIP + 4 **Aggregate contributions** Person **Payroll** Noncash (Complete Part II if there is a noncash contribution.) (b) (d) (a) (c) No. Name, address, and ZIP + 4 **Aggregate contributions** Type of contribution Person **Payroll** \$ Noncash (Complete Part II if there is a noncash contribution) (a) (b) (c) (d) No. Name, address, and ZIP + 4 Aggregate contributions Type of contribution Person Payroll Noncash (Complete Part II if there is a noncash contribution) (a) (b) (c) (d) No. Name, address, and ZIP + 4 Aggregate contributions Type of contribution Person Payroll \$ Noncash

(Complete Part II if there is a noncash contribution.)

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

Name of organization **Employer identification number** THE CROSSWOLS FOUNDATION 27-0186921 Part II Noncash Property (see instructions) (a) No. (c) (b) (d) FMV (or estimate) from Description of noncash property given Date received Part I (see instructions) U.S. TREASURIES 1 426,336 12/01/09 \$ (a) No. (c) (b) (d) from FMV (or estimate) Description of noncash property given Date received Part I (see instructions) BRANDYWINE INVESTMENT FUNDS 1 35,053 12/07/09 \$ (a) No. (c) (b) (d) FMV (or estimate) from Description of noncash property given Date received Part I (see instructions) BRANDYTRUST SPJ, LLC 1 4,278 05/12/09 \$ (a) No. (c) (b) (d) FMV (or estimate) from Description of noncash property given **Date received** Part I (see instructions) OVERDISTRIBUTION FROM DONER PF 1 05/12/09 \$ 19,297 (a) No. (c) (b) (d) from FMV (or estimate) Description of noncash property given Date received Part I (see instructions) \$ (a) No. (c) (d) (b) from FMV (or estimate) Description of noncash property given Date received (see instructions) Part I \$

Page 1 of 1 of Part II

DF5038 THE CROSSWOLS FOUNDATION 11/15/2010 11:37 AM

FYE: 12/31/2009

27-0186921

Federal Statements

Form 990-PF - General Footnote

Description

THE CROSSWOLS FOUNDATION IS ONE OF FIVE PRIVATE FOUNDATIONS CREATED DURING 2009 AS A SUCCESSOR FOUNDATION TO PATCHWORK CHARITABLE FOUNDATION (ANOTHER PRIVATE FOUNDATION, EIN 23-3023071).

DURING 2008 AND 2009, PATCHWORK, BEFORE DISTRIBUTING ITS ASSETS TO EACH OF ITS SUCCESSOR FOUNDATIONS, MADE QUALIFYING DISTRIBUTIONS IN EXCESS OF ITS MINIMUM DISTRIBUTION AMOUNTS (\$6,178 AND \$95,281, RESPECTIVELY).

AS A SUCCESSOR FOUNDATION, THE CROSSWOLS FOUNDATION HAS RECOGNIZED ITS PRO-RATA SHARE OF THESE OVER-DISTRIBUTED AMOUNTS ON ITS 2009 IRS FORM 990-PF IN THE FOLLOWING MANNER: THE 2008 OVERDISTRIBUTION ALLOCABLE TO CROSSWOLS HAS BEEN RECOGNIZED IN PART XIII ON LINE 10D; THE 2009 OVERDISTRIBUTION ALLOCABLE TO CROSSWOLS HAS BEEN RECOGNIZED AS GRANTS PAID CURRENTLY IN PART XV ON LINE 3A. CROSSWOLS ALSO RECOGNIZED A NON-CASH CONTRIBUTION FROM PATCHWORK DURING 2009 FOR THE 2009 OVERDISTRIBUTION AMOUNT ALLOCABLE TO CROSSWOLS THAT WAS TREATED AS GRANTS PAID DURING 2009 BY CROSSWOLS.

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DF5038 THE CROSSWOLS FOUNDATION

Federal Statements

FYE: 12/31/2009 27-0186921

	Charitable Purpose	\$ 500	\$ 200
	Adjusted Net		0
al Fees	Adj	တ	٠ «
int 1 - Form 990-PF, Part I, Line 16a - Legal Fees	Net Investment		0
PF, Part I, Li	\ulder \u	\$	S.
- Form 990-	Total	500	500
Statement 1		\ &	S
	Description		Total

	Statemen	it 2 - Form 990	ment 2 - Form 990-PF, Part I, Line 18 - Taxes	xes		
Description		Total	Net Investment	Adjusted Net	Ω	Charitable Purpose
VA SCC - FILING FEES IRS EXEMPTION APPLICATION	<i>ه</i>	100 750	ડ >		ω	100
Total	w.	850	\$	0 \$	ς,	850

Description Expenses BRANDYTRUST SPJ, LLC	Statement 3 - Form 990-PF, Total	3 - Form 990-PF, Part I, Line 23 - Other Expenses Net Total \$ s \$	Adjusted Net	Charitable Purpose \$
Total	\$ 65	\$	\$	ر م

1-3

11/15/2010 11:37 AM

FYE: 12/31/2009

Description						
	Beginning of Year		End of Year	Basis of Valuation	_	Fair Market Value
U.S. TREASURIES	\$	\$	289,126	Cost	\$	289,062
Total	\$ () \$	289,126		\$_	289,062
Statement 5 - Form 99	0-PF, Part II, Line 1	0b - C	Corporate Stoc	k Investme	nts	
Description						
	Beginning of Year		End of Year	Basis of Valuation	_	Fair Market Value
COMMON STOCK & MUTUAL FUNDS	\$	\$	321,931	Cost	\$	320,193
Total	-	\$ \$	321,931	0000	\$_ =	320,193
Statement 6 - Fo	orm 990-PF, Part II,	Line 1	13 - Other Inve	stments		
Description						
	Beginning of Year		End of Year	Basis of Valuation	_	Fair Market Value
BRANDYWINE INVESTMENT FUNDS R	ECEIVAB \$	\$	35,053	Cost	\$	35,053
BRANDYTRUST SPJ, LLC	Ÿ	Ą	•		Ą	•
Total	\$() \$	39,796	Market	\$_	4,743 39,796
Statement 7 - I	Form 990-PF, Part II	II. Lin	e 3 - Other Inc	reases		
Description		_		Amount	_	
UNREALIZED GAIN/LOSS ON PARTN	ERSHIPS		\$	63	1	
Total			\$	63	<u>1</u>	
	·	Llin	e 5 - Other Dec	creases		
Statement 8 - F	orm 990-PF, Part II	<u> </u>		<u></u>		
Statement 8 - F Description		11 P=111		Amount	_	
	1	i <u>i</u> 151111	\$		_	

SILVERCREST ASSET MANAGEMENT GROUP LLC REALIZED GAINS AND LOSSES

The Crosswols Foundation

Port# crossfdn

From 01-01-09 Through 12-31-09

							GAIN O	R Loss
OPEN Date	CLOSE DATE	QUANTITY	SECURITY	Cost Basis	AMORT. OR ACCRETION	PROCEEDS	SHORT TERM	LONG TERM
12-03-09	12-10-09	30	GREIF INC CL A	1,745		1,640	-105	
12-01-09	12-31-09	96,000	UNITED STATES TREAS NTS	97,778	-1,778	96,000	0	
			3 25% due 12-31-2009, (eff. ma	t 12-31-2009)				
TOTAL C	GAINS						0	0
TOTAL L	OSSES						-105	0
				99,522	-1,778	97,640	-105	0
TOTALR	EALIZED (GAIN/LOSS	-105					

Fdrm **8868**

(Rev April 2009)

Department of the Treasury

Application for Extension of Time To File an Exempt Organization Return

► File a separate application for each return.

OMB No 1545-1709

internal Revenu	s Service		
 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 comp	ete Part II unless you have already been granted an automatic 3-month extension on a previously filed Fo	rm 8868	3.
Part I	Automatic 3-Month Extension of Time. Only submit original (no copies needed).		
A corporation Part I only	required to file Form 990-T and requesting an automatic 6-month extension—check this box and complete		▶ □
•			• 🗀
•	prations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an exte ome tax returns.	ension o	ī
Electronic Fi	ing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension of t	ime to f	île
one of the ret	ums noted below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8	868	
electronically	if (1) you want the additional (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870), group)
returns, or a c	composite or consolidated Form 990-T. Instead, you must submit the fully completed and signed page 2 (Page 2)	art II) of	Form
8868. For mo	re details on the electronic filing of this form, visit www.irs.gov/efile and click on e-file for Charities & Nonpro	ofits.	
Type or	Name of Exempt Organization	Employ	er identification number
print			
File by the '	THE CROSSWOLS FOUNDATION	<u> 27-0</u>	186921
due date for filing your	Number, street, and room or suite no. If a P.O. box, see instructions.		
return See	% SILVERCREST, 614 E. HIGH ST.		
instructions	City, town or post office, state, and ZIP code. For a foreign address, see instructions. CHARLOTTESVILLE VA 22902		
Check type o	f return to be filed (file a separate application for each return):		
Form 9	Form 990-T (corporation)		Form 4720
Form 9	90-BL Form 990-T (sec. 401(a) or 408(a) trust)		Form 5227
Form 9	90-EZ Form 990-T (trust other than above)		Form 6069
X Form 9	90-PF		
● If the orga ● If this is for the whole a list with the 1 I requeuntil Control for the ■ □	group, check this box If it is for part of the group, check this box and attended a serious part of the group, check this box If it is for part of this group, check this box If it is for part of this group, check this	<u> </u>	▶□
2 If this to	ex year is for less than 12 months, check reason: X Initial return Final return Change in	accoun	ting penod
	pplication is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax,		
	y nonrefundable credits. See instructions.	3a	\$ 250
	pplication is for Form 990-PF or 990-T, enter any refundable credits and estimated tax		
	nts made. Include any prior year overpayment allowed as a credit	3b	\$
	e 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		0.5
) See instructions.	3c	\$ 250
-	u are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879	9-EO	
for payment i			- 0000 -
For Privacy A	Act and Paperwork Reduction Act Notice, see Instructions.		Form 8868 (Rev 4-2009

Form 8868 (F	Rev. 4-2009)			Page 2
If you are	filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II and check this b	юх		▶ X
Note. Only co	omplete Part II if you have already been granted an automatic 3-month extension on a previously filed	8 Form 8	868.	_
If you are	filing for an Automatic 3-Month Extension, complete only Part I (on page 1).			
Part II	Additional (Not Automatic) 3-Month Extension of Time. Only file the original	al (no c	opies ne	eeded).
Type or	Name of Exempt Organization	Employ	er identifi	cation number
print				
File by the	THE CROSSWOLS FOUNDATION	<u> 27-0</u>	<u> 18692</u>	1
extended due date for	Number, street, and room or suite no. If a P O. box, see instructions.	For IRS	use only	
filing the	% SILVERCREST, 614 E. HIGH ST.			
return See	City, town or post office, state, and ZIP code. For a foreign address, see instructions.			
instructions	CHARLOTTESVILLE VA 22902			
Check type o	of return to be filed (File a separate application for each return):			
Form 99				orm 6069
Form 99			∐ F	orm 8870
Form 9				
	ot complete Part II if you were not already granted an automatic 3-month extension on a previou	isly filed	Form 886	8
	s are in the care of SILVERCREST ASSET MANAGEMENT GROUP			•
•	e No▶ 434-977-4420 FAX No.▶ 434-977-3944			. 🗀
_	anization does not have an office or place of business in the United States, check this box			▶ 📙
	or a Group Return, enter the organization's four digit Group Exemption Number (GEN)			
		ind attacl	n a	
	ames and EINs of all members the extension is for.			
	st an additional 3-month extension of time until 1/15/10.	^		
	endar year , or other tax year beginning 05/12/09, and ending 12/31/09			
	ex year is for less than 12 months, check reason X Initial return Final return Change	in accoui	nung period	1
	detail why you need the extension	·		
	itional time is requested to gather information to accurate return.	o pre	epare	a complet
and	accurate return.			•
8a If this a	pplication is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax,	\top		
	y nonrefundable credits. See instructions.	8a	s	58
	pplication is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and		—	
	ed tax payments made. Include any prior year overpayment allowed as a credit and any	i		•
	paid previously with Form 8868.	8b	s	250
	e Due. Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit	 "		
	D coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions	s. 8c	\$	0
	Signature and Verification	<u>., </u>		
Under penalties	of perfury. I declare that I have examined this form, including accompanying schedules and statements, and to the b	est of my l	knowledge a	nd belief,
it is true, correct	t, and complete, and that I am authorized to prepare this form			• - • - •
Signature >	KA. Will Title > CAT		Date	▶ 08/02/10
				8868 (Rev 4-2009)