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990-PF

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

OMB No 1545-0052

C	pepartifient of the Treasury					2009			
<u>!</u>	nterna	al Reve	evenue Service Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements						
<u> </u>				tax year beginning 05/15/09 ,	·····				
₹ (3 C	heck a	all that apply		eturn of a former public	-		Final return	
?Ö-	Amended return Address change Name change							 -	
ENVELOPE		the IR	S Name of found	dation	A Employer identification number 27-0187051				
i		erwise	THE SO	OONER FOUNDATION				phone number (see page 1	(0 of the instructions)
		rint	· ——	street (or P O box number if mail is not delivere	ed to street address)	Room/suite	4 '	4-977-4420	io di aid mondonono,
≥	•	type.		VERCREST, 614 E. HIG				emption application is pend	ding, check here
 9		Specif		state, and ZIP code			1	oreign organizations, chec	· —
		uction	s. CHARLO	OTTESVILLE VA	22902			oreign organizations meeti	
20	1 C	heck t	vpe of organization	on X Section 501(c)(3) exempt privat	e foundation		1	5% test, check here and at	-
5	_				ole private foundation		E If priv	vate foundation status was	terminated under
Ī			ket value of all as			rual	1	on 507(b)(1)(A), check her	- L I
	of	year (1	from Part II, col (I ()			F If the	foundation is in a 60-mon	th termination
		e 16) i		797,857 (Part I, column (d) must	t be on cash basis)		unde	r section 507(b)(1)(B), che	eck here
-	Pa	rt I	Analysis of	Revenue and Expenses (The	(a) Revenue and				(d) Disbursements
			total of amounts in co	olumns (b), (c), and (d) may not necessarily equal	expenses per	(b) Net in		(c) Adjusted net	for charitable
			the amounts in colum	nn (a) (see page 11 of the instructions))	books	l inco	ome	ıncome	purposes (cash basis only)
_		1	Contributions, gifts	s, grants, etc , received (attach schedule)	818,827				
		2	Check ▶ ☐ If t	the foundation is not required to attach Sch B					
		3	Interest on savir	ngs and temporary cash investments	9		9		
		4	Dividends and in	nterest from securities	2,872		2,872		
		5a	Gross rents						
	<u>و</u>	b	Net rental incom	ne or (loss)					
	<u>r</u>	6a	Net gain or (loss) from	n sale of assets not on line 10	-243				
	Revenue	b	Gross sales price for a	all assets on line 6a 138,186					
	ጃ	7	Capital gain net	t income (from Part IV, line 2)			0		
		8	Net short-term of	capital gain RECEIVED				0	
		9	Income modifica	Carrier of		ļ			
		10a				<u> </u>			
		b		oods sold NOV 1 8 ZUID 16					
	م	C		(loss) (attach schedule)					
	දු	11	Other income (a	attach schedule)	021 465		2 001	0	
-	ZS	12		of officers, directors, trustees, etc	821,465		2,881		
		13	•	e salaries and wages					
Ţ	Su	14 15		e salaries and wages employee benefits		 	· · · · · ·		-
	tpé	16a		ich schedule) See Stmt 1	500				500
ć	Ġ	b		s (attach schedule)		<u> </u>		• • • • • • • • • • • • • • • • • • • •	
<	₹9	c	_	il fees (attach schedule)					
6	ati	17	Interest	rices (allasir soriesale)					
<u>د</u>	:E	18		le) (see page 14 of the instructions) Stmt 2	850				850
Š		19	,	ch schedule) and depletion				 	
C	ŧ	20	Occupancy						
	₹	21		nces, and meetings					
	Ę.	22	Printing and pub	-					
	g	23	Other expenses (att. so		65		65		
	Operating and Adftlf/fisffative≀EXpéhse	24		g and administrative expenses.					
	ra		Add lines 13 thre	-	1,415		65	<u></u>	1,350
	ا بق	25	Contributions, g	-	19,300	*******			19,300
	ا ت	26	-	and disbursements. Add lines 24 and 25	20,715		65	0	20,650
_		27	Subtract line 26						
		а	Excess of revenu	ue over expenses and disbursements	800,750				
		ь	Net investment	t income (if negative, enter -0-)			2,816		
		С	Adjusted net in	ncome (if 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	E	nd o	year
	- 414 11	should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value		(c) Fair Market Value
- 1	1	Cash—non-interest-bearing				
-	2	Savings and temporary cash investments		150,	L66	150,166
	3	Accounts receivable ▶				
		Less: allowance for doubtful accounts ▶				
-	4	Pledges receivable ▶				
- 1		Less allowance for doubtful accounts ▶	[[Ì	
	5	Grants receivable			$\neg \uparrow$	· · · · · · · · · · · · · · · · · · ·
	6	Receivables due from officers, directors, trustees, and other		· · · · · · · · · · · · · · · · · · ·		
	Ĭ	disqualified persons (attach schedule) (see page 16 of the				
		instructions)				
	_	,				
	7	Other notes and loans receivable (att schedule)			Ī	
		Less: allowance for doubtful accounts ▶				
ssets	8	Inventones for sale or use			\dashv	
SS	9	Prepaid expenses and deferred charges				
⋖	10a	Investments—U S and state government obligations (attach schedule) Stmt 4		289,3	_	289,062
	b	Investments—corporate stock (attach schedule) See Stmt 5		320,0	558	318,833
	С	Investments—corporate bonds (attach schedule)				
	11	Investments—land, buildings, and equipment basis				
		Less accumulated depreciation (attach sch.)				
-	12	Investments—mortgage loans				
-	13	Investments—other (attach schedule) See Statement 6		39,	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				
1		instructions. Also, see page 1, item I)	0	799,	746	797,857
٦	17	Accounts payable and accrued expenses				
	18	Grants payable			\Box	
<u>ĕ</u>	19	Deferred revenue				
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			\neg	
a	21	Mortgages and other notes payable (attach schedule)				
	22	Other liabilities (describe ►)				
	23	Total liabilities (add lines 17 through 22)	o		0	
┪	23	Foundations that follow SFAS 117, check here ▶	<u> </u>		⊣	
S		and complete lines 24 through 26 and lines 30 and 31.				
ces	24					
an	24	Unrestricted				
<u>3a</u>	25	Temporarily restricted				
P	26	Permanently restricted				
Net Assets or Fund Balan		Foundations that do not follow SFAS 117, check here ▶ X and complete lines 27 through 31.				
Ē		-				
ō	27	Capital stock, trust principal, or current funds		799,	/46	
şį	28	Paid-in or capital surplus, or land, bldg , and equipment fund	-			
SS	29	Retained earnings, accumulated income, endowment, or other funds				
ğ	30	Total net assets or fund balances (see page 17 of the	j			
<u>e</u>		instructions)	0	799,	746	
~	31	Total liabilities and net assets/fund balances (see page 17				
		of the instructions)	0	799,	746	
	Part I	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 (mu	st agree with			
	end-o	f-year figure reported on pnor year's return)		L	1	
2	Enter	amount from Part I, line 27a			2	800,750
3	Other	increases not included in line 2 (itemize) ► See Statement 7			3	631
		nes 1, 2, and 3		Γ	4	801,381
5	Decre	eases not included in line 2 (itemize) See Statement 8		Γ	5	1,635
		net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30		6	799,746
		·				

Part IV Capital Gains a	nd Losses for Tax on Investme	ent Income					
	be the kind(s) of property sold (e.g., real estate, ehouse, or common stock, 200 shs MLC Co.)	,	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo, day, yr)	(d) Date sold (mo , day, yr)		
1a STATE STREET #6	64		D	Various	Various		
b BRANDYTRUST SPJ	, LLC		D	Various	Various		
С			_				
<u>d</u>							
_e							
(e) Gross sales price	(f) Depreciation allowed (or allowable)	107	other basis nse of sale 138,326		(h) Gain or (loss) (e) plus (f) minus (g) -140 -103 (I) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h)) -140 -103		
a 138,186		-140					
<u>b</u>		·	103		-103		
_ c							
d							
e Consoliste and information and allower			20				
Complete only for assets snowing	g gain in column (h) and owned by the fo						
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	, , ,	s of col (ı) (ı), ıf any				
a					-140		
b					-103		
С							
d							
е							
2 Capital gain net income or (net c	lf gain, also enter in If (loss), enter -0- in	•		2	-243		
3 Net short-term capital gain or (los	ss) as defined in sections 1222(5) and (6	6).					
· · · · · ·	, column (c) (see pages 13 and 17 of the	e instructions)		İ			
If (loss), enter -0- in Part I, line 8				3			
	nder Section 4940(e) for Reduc			me			
(For optional use by domestic private	e foundations subject to the section 4940	O(a) tax on net invest	ment income)				
If section 4940(d)(2) applies, leave the	ns part blank				37/3		
Was the foundation liable for the sec	tion 4942 tax on the distributable amoun	nt of any vear in the b	pase period? Ye	es 🗌 No	N/A		
	lify under section 4940(e) Do not compl	* *					
1 Enter the appropriate amount in	each column for each year; see page 18	of the instructions b	efore making any en	tnes			
(a)	(b)	1	(c)				
Base period years Calendar year (or tax year beginning	Advision availabing distribution	ns Net value	of noncharitable-use ass				
2008				, , , ,	· · · · · · · · · · · · · · · · · · ·		
2007				•			
2006							
2005							
2004							
O. Takal affirm 4. polymen (d)							
2 Total of line 1, column (d) 3 Average distribution ratio for the	E year has a pared - duide the total and	lina 2 hu 5 ar hu tha		2			
•	5-year base period—divide the total on I has been in existence if less than 5 years						
number of years the foundation r	las been in existence il less than 5 years	5		3			
4. Enter the net value of poncharita	able-use assets for 2009 from Part X, line	a 5		4			
- Litter the flet value of floricharita	bie-use assets for 2005 from Fart A, life	3 0		-7 			
5 Multiply line 4 by line 3				5			
5 Manapiy and 4 by and 0							
6 Enter 1% of net investment incor	me (1% of Part Lline 27b)			6			
2 2 75 of flot infooting intool							
7 Add lines 5 and 6				7			
					-		
8 Enter qualifying distributions from	n Part XII, line 4			8			
If line 8 is equal to or greater tha	in line 7, check the box in Part VI, line 1b	o, and complete that	part using a 1% tax r	ate See the			
Part VI instructions on page 18							

	1 990-PF (2009) THE SOONER FOUNDATION 27-0187051			Р	age 4
Pa	ert VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the instr	ructions)			
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	ļ			56
	here ▶				
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of				
	Part I, line 12, col. (b)				
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)				0
3	Add lines 1 and 2				56
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)				0
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-				56
6	Credits/Payments				
а	2009 estimated tax payments and 2008 overpayment credited to 2009 6a				
b	Exempt foreign organizations—tax withheld at source 6b				
C	Tax paid with application for extension of time to file (Form 8868) 6c 250				
d	Backup withholding erroneously withheld 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				194
11	Enter the amount of line 10 to be Credited to 2010 estimated tax ▶ 0 Refunded ▶ 11				194
Pa	art 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		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 ▶ \$				
е	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	İ	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?	N/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	X	
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	
0~					
8a	Enter the states to which the foundation reports or with which it is registered (see page 19 of the		1		
oa	Enter the states to which the foundation reports or with which it is registered (see page 19 of the instructions) ▶ VA				
8a b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General				
	instructions) ▶ VA		8b	x	
	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General		8b	x	
b	Instructions) VA 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		8b	x	
b	Instructions) VA 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 is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or		8b 9	x	x
b	Instructions) ▶ VA 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 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			x	X

Part VII-A Statements Regarding Activities (continued) 11 At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see page 20 of the instructions) 12 Did the foundation acquire a direct or indirect interest in any applicable insurance contract before	11 12 13	X	x
meaning of section 512(b)(13)? If "Yes," attach schedule (see page 20 of the instructions)	12 13	X	
the state of the s	12 13	X	
12 Did the foundation acquire a direct or indirect interest in any applicable insurance contract before	13	X	
	13	X	
August 17, 2008?		X	X
13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application?			
Website address ► N/A			
14 The books are in care of ▶ SILVERCREST ASSET MANAGEMENT GROUP Telephone no ▶ 43	4-977	-442	20
614 E. HIGH ST.			
Located at ► CHARLOTTESVILLE, VA ZIP+4 ► 22	2902		
15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—Check here			>
and enter the amount of tax-exempt interest received or accrued during the year			
Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required	F		т
File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
During the year did the foundation (either directly or indirectly)			
	No		
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			
disqualified person?	No		
	No		
	No		
(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? Yes	No		
(6) Agree to pay money or property to a government official? (Exception. Check "No" if the	NO		
foundation agreed to make a grant to or to employ the official for a period after			
termination of government service, if terminating within 90 days) Yes	No		
b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	140		
	Γ/ A	Ì	ĺ
Organizations relying on a current notice regarding disaster assistance check here		†	
c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that			
	[∕A 1c	1	
2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			\top
operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
a At the end of tax year 2009, did the foundation have any undistributed income (lines 6d and			
6e, Part XIII) for tax year(s) beginning before 2009?	No		
If "Yes," list the years ▶ 20 , 20 , 20 , 20			
b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			
(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to			
	[/A 2b	-	┼
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
▶ 20 , 20 , 20 , 20			
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?			
	No		
b If "Yes," did it have excess business holdings in 2009 as a result of (1) any purchase by the foundation or			
disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the			
Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the			
	I/A 3b	1	
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	+	x
b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	-+a	1	†
charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2009?	4b	1	x

orm	990-PF (2009) THE SOONER F			118/021			<u>Р</u>	age 6
Pa	rt VII-B Statements Regardi	ng Activities for Which Form	4720 May Be R	Required (con	tinued)			·······
5a	During the year did the foundation pay or	incur any amount to:			_			
	(1) Carry on propaganda, or otherwise at	ttempt to influence legislation (section	4945(e))?	□ ,	res 🛚 X No			ĺ
	(2) Influence the outcome of any specific	public election (see section 4955); or	to carry on,					ĺ
	directly or indirectly, any voter registr	ation drive?		□,	res 🔀 No			
	(3) Provide a grant to an individual for tra	avel, study, or other similar purposes?		Ų,	res 🏻 No			
	(4) Provide a grant to an organization of	ner than a charitable, etc , organization	n described in		_			
	section 509(a)(1), (2), or (3), or section	on 4940(d)(2)? (see page 22 of the ins	tructions)	□ ,	res 🗓 No			
	(5) Provide for any purpose other than re	eligious, charitable, scientific, literary,	or educational		_			
	purposes, or for the prevention of cru	=			Yes 🗓 No		,	
b	If any answer is "Yes" to 5a(1)-(5), did an						,	
	Regulations section 53 4945 or in a curre	ent notice regarding disaster assistanc	e (see page 22 of th	ne instructions)?	_N/A	5b		
	Organizations relying on a current notice	regarding disaster assistance check h	nere		▶ 📙		,	
С	If the answer is "Yes" to question 5a(4), of	does the foundation claim exemption f	rom the tax	4- 🗆				
	because it maintained expenditure respon	nsibility for the grant?		N/A 📙 🔻	Ƴes ∐ No			
	If "Yes," attach the statement required by	• , ,						
6a	Did the foundation, during the year, received	ve any funds, directly or indirectly, to p	pay premiums					
	on a personal benefit contract?			Yes X No				
b	Did the foundation, during the year, pay p	premiums, directly or indirectly, on a p	ersonal benefit conti	ract?	ļ	6b		X
	If "Yes" to 6b, file Form 8870					.]		
	At any time during the tax year, was the f	• • •			Yes X No	\rightarrow		<u> </u>
	If yes, did the foundation receive any pro-				N/A	7b		<u></u>
Pa		ficers, Directors, Trustees, F	oundation Man	agers, Highly	Paid Employe	es,		
	and Contractors	14		. 6 46 - 1 4 41				
<u> </u>	ist all officers, directors, trustees, found	pation managers and their compens	ation (see page 22	of the instruction	T			
			(b) Title, and average	(c) Compensation	(d) Contributions to employee benefit	(e) Ex	pense a	eccount.
	(a) Name and a	ddress	hours per week devoted to position	(If not paid, enter -0-)	plans and deferred		r allowa	
			<u> </u>	<u> </u>	compensation			
	EILA RAUCH KENNEDY	CHARLOTTESVILLE	CHAIRMAN		_			_
	SILVERCREST, 614 E. HIGH ST.	VA 22902	1.00	0	0	-		0
	TTHEW R. KENNEDY	CHARLOTTESVILLE	VICE PRES.					_
	SILVERCREST, 614 E. HIGH ST.	VA 22902	1.00	0		 		0
	SEPH P. KENNEDY III	CHARLOTTESVILLE	VICE PRES.			1		
	SILVERCREST, 614 E. HIGH ST.	VA 22902	1.00	0	0			0
	DAVID HAMAR, JR., JD, CPA	CHARLOTTESVILLE	TREASURER			İ		_
	SILVERCREST, 614 E. HIGH ST.	VA 22902	1.00	22 - 6 4 h = i = - 4 = 1 = 1 = 1 = 1 = 1 = 1 = 1 = 1 = 1 =		<u> </u>		0
4	Compensation of five highest-paid emplif none, enter "NONE."	Doyees (other than those included o	m me i—see page	23 OI ME INSTRUC	uons).			
	mione, enter None.		Т	T	(d) Contributions to			
	(a) Name and address of each emplo	ovee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	employee benefit		pense a	
	(4)	,	devoted to position	(0,000,000	plans and deferred compensation	othe	er allowa	nces
NO	NE -		1					
								
								—
					1			
Tota	number of other employees paid over \$50	0,000	_	•		•	T	
	· · · · · · · · · · · · · · · · · · ·				Foi	m 99	0-PF	(2009)

Form 990-PF (20	09) THE SOONER FOUNDATION	27-0187051	Page 7
Part VIII	Information About Officers, Directors, Trustees, Foundand Contractors (continued)	ndation Managers, Highly Paid Em	ployees,
3 Five highe	st-paid independent contractors for professional services (see page	23 of the instructions). If none, enter "NO	NE."
	(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE			
Total number of	others receiving over \$50,000 for professional services		•
Part IX-A	Summary of Direct Charitable Activities		
	n's four largest direct chantable activities during the tax year. Include relevant statis d other beneficiaries served, conferences convened, research papers produced, etc.		Expenses
RETUR	OUNDATION WILL INVEST CONTRIBUTED AN WHICH WILL FUND ANNUAL DISTRIBUTED TED 501(C)(3) CHARITIES.		
2			
3			
4			
Part IX-B	Summary of Program-Related Investments (see pa	ge 24 of the instructions)	
	largest program-related investments made by the foundation during the tax year or		Amount
1 N/A			,
2			
All other program	n-related investments. See page 24 of the instructions		
Total. Add lines	1 through 3	>	

Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation

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

Form **990-PF** (2009)

Pa	ert XIII Undistributed Income	(see page 26 of	the instructions)			
			(a)	(b)	(c)	(d)
1	Distributable amount for 2009 from Part 2	xı,	Corpus	Years prior to 2008	2008	2009
	line 7					4,007
2	Undistributed income, if any, as of the en	nd of 2009				
а	Enter amount for 2008 only					
b	Total for prior years 20 , 20	, 20				
3	Excess distributions carryover, if any, to					
а	From 2004					
b	From 2005	_				
С	From 2006					
d	From 2007					
е	From 2008					
f	Total of lines 3a through e					
4	Qualifying distributions for 2009 from Par	rt XII,				
	line 4 > \$ 20,650					
а	Applied to 2008, but not more than line 2	a				
	Applied to undistributed income of prior y					
	(Election required—see page 26 of the in					
С	Treated as distributions out of corpus (El	ection				
	required—see page 26 of the instructions	s)				
d	Applied to 2009 distributable amount					4,007
е	Remaining amount distributed out of corp	ous	16,643			
5	Excess distributions carryover applied to		·			
	(If an amount appears in column (d), the	same				
	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. Subtract	ct line 5	16,643			
b	Prior years' undistributed income Subtra	ct				
	line 4b from line 2b					
C	Enter the amount of prior years' undistrib	uted				
	income for which a notice of deficiency h					
	been issued, or on which the section 494	l2(a)		•		
	tax has been previously assessed					
d	Subtract line 6c from line 6b Taxable			·		
	amount—see page 27 of the instructions	i				
е	Undistributed income for 2008 Subtract	line				
	4a from line 2a Taxable amount—see pa	age				
	27 of the instructions					
f	Undistributed income for 2009. Subtract	lines				
	4d and 5 from line 1 This amount must b	oe				
	distributed in 2010					0
7	Amounts treated as distributions out of c	orpus		,		
	to satisfy requirements imposed by secti	on				
	170(b)(1)(F) or 4942(g)(3) (see page 27	of the				
	instructions)					
8	Excess distributions carryover from 2004					
	applied on line 5 or line 7 (see page 27 of	of the				
	instructions)					
9	Excess distributions carryover to 2010).				
	Subtract lines 7 and 8 from line 6a		16,643			
10	Analysis of line 9	,				
а	Excess from 2005	0		`		
b	Excess from 2006	0				
С	Excess from 2007	0				
d	Excess from 2008	1,251				
е	Excess from 2009	16,643				

Pa	Part XIV Private Operating Foundations (see page 27 of the instructions and Part VII-A, question 9)							
1a								
	foundation, and the ruling is effective for 2009, enter the date of the ruling							
b	Check box to indicate whether the found			ibed in section 4	942(j)(3) or 4942	2(j)(5)		
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		(e) Total		
	income from Part I or the minimum	(a) 2009	(b) 2008	(c) 2007	(d) 2006	(e) Total		
	investment return from Part X for							
	each year listed							
b	85% of line 2a							
С	Qualifying distributions from Part XII,							
	line 4 for each year listed	_						
d	Amounts included in line 2c not used directly		-					
	for active conduct of exempt activities					<u> </u>		
e	Qualifying distributions made directly							
	for active conduct of exempt activities							
	Subtract line 2d from line 2c				· · · · · · · · · · · · · · · · · · ·			
3	Complete 3a, b, or c for the							
	alternative test relied upon							
а	"Assets" alternative test—enter							
	(1) Value of all assets			ļ				
	(2) Value of assets qualifying under							
	section 4942(j)(3)(B)(i)							
b	"Endowment" alternative test—enter 2/3							
	of minimum investment return shown in							
	Part X, line 6 for each year listed							
С	"Support" alternative test—enter							
	(1) Total support other than gross							
	investment income (interest, dividends, rents, payments on				1			
	securities loans (section							
	512(a)(5)), or royalties)	<u> </u>						
	(2) Support from general public							
	and 5 or more exempt							
	organizations as provided in							
	section 4942(j)(3)(B)(iii) (3) Largest amount of support from							
	an exempt organization							
	(4) Gross investment income				-			
Pa	ert XV Supplementary Inform	nation (Complete	this part only if	the foundation h	ad \$5,000 or more	e in assets at		
	any time during the y	• •	•		. ,			
1	Information Regarding Foundation Ma							
а	List any managers of the foundation who	have contributed mor	e than 2% of the total	contributions received	by the foundation			
	before the close of any tax year (but only	, if they have contribut	ed 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	y) of which the foundat	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			28 of the instructions) to	o individuals or			
	organizations under other conditions, co							
а	The name, address, and telephone num	ber of the person to wi	nom applications shot	uid be addressed				
	N/A					•		
	The form in which applications about the	a cultimitted and info	ation and materials "	nov should include				
b	The form in which applications should be N/A	e submitted and inform	iauon and materials tr	ey snoula include				
								
С	Any submission deadlines N/A							
	Any restrictions or limitations on awards	such as by geograph	ical areas, chantable	fields, kinds of institute	ons or other factors			
u	N/A	, such as by geograph	icai areas, Giantable	noids, ninus di misulull	one, or other factors			
	,	-				- 000 DE		

Part XV Supplementary Information (continued)			
3 Grants and Contributions Paid During t	ne Year or Approved for I	Future Payment		
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	19,300
				`
Total			▶ 3a	19,30
b Approved for future payment	T	T	Ja Ja	
N/A				
				•
Total	<u> </u>		▶ 3b	

<u>. ~</u>	000 (20	00, =10 00000000000000000000000000000000					1 ugc 12
		Analysis of Income-Producing Ac		d business income	T Cueludes	hu cochoo 512 513 or 514	(0)
⊨n	ter gross amo	unts unless otherwise indicated	(a)	d business income	(c)	(d)	(e) Related or exempt function income
1	Program ser	vice revenue	Business code	Amount	code	Amount	(See page 28 of the instructions)
•					1 1		
				<u> </u>			
			-				
			-				
	f				1 1		
	g Fees and	d contracts from government agencies					
2	Membership	dues and assessments					
3	Interest on s	avings and temporary cash investments			14	9	
4	Dividends ar	nd interest from securities			14	2,872	
5	Net rental in	come or (loss) from real estate					
	a Debt-fina	anced property					
	b Not debt	-financed property					
6	Net rental in	come or (loss) from personal property			11		
7	Other invest	ment income				-	
8	Gain or (loss	s) from sales of assets other than inventory			18	-243	
		or (loss) from special events					
10	Gross profit	or (loss) from sales of inventory			1		
11	Other revenu				1 1		
			-			-	
	_		-		1		
	d		-		1		
	e	4 - 1 (1) (1) 1(1)	-		+	2 630	
		d columns (b), (d), and (e)	L	C	<u>' </u>	2,638	2,638
		ne 12, columns (b), (d), and (e)				13	2,638
	Part XVI-B	In line 13 instructions on page 28 to verify calculate Relationship of Activities to the A		ent of Evernet P	urnoso	<u> </u>	
?	Line No.	Explain below how each activity for which incom					`
	Tille No.	accomplishment of the foundation's exempt purp					
	,	instructions)	2000 (00	. by promoning rando re	. осо. ра	poodo, (edo pago 1	, o, a.o
_	8	INCOME IS FROM CAPITAL	TRANSACT	IONS RELATE	D TO	PORTFOLIO	
		INVESTMENTS THAT FUND T					G
						-	
							·
							
						·	
_							
				<u> </u>			
						·····	
				-			
_							
_							
_				-			
_							

P	IIVA TIE	Exempt Organization	•	ers to and transa	ctions a	na Relat	ionsnips with	Noncharitable		
1	Did the o	organization directly or ind		any of the following with	any other c		doscribed		Yes	No
•		n 501(c) of the Code (other	-	-	•	_			1.03	110
	organiza		si tilali section so	r(c)(3) organizations) or	iii section i	JZ7, relating	g to political			
2	_	s from the reporting found	ation to a noncha	ritable evemnt organizat	on of					
u	(1) Cash		ation to a noncha	mable exempt organizat	011 01			1a(1		х
	(2) Othe							1a(2		X
h	Other tra							14(2	4	-
		s of assets to a noncharit	able evempt organ	uzation				1b(-	,	x
		hases of assets from a no						1b(2		X
		al of facilities, equipment,		prorganization				1b(;		X
	• •	bursement arrangements						1b(4		X
		is or loan guarantees	,					1b(5		X
		ormance of services or me	embership or fund	raising solicitations				1b(6		X
c		of facilities, equipment, m			s			1c	1	X
	-	swer to any of the above	-) should alv	vavs show the fair			
_		the goods, other assets, o				=	-			
		any transaction or sharing	_	·						
	(a) Line no	(b) Amount involved		chantable exempt organizati				actions, and sharing arrar	gements	
<u>\</u> /	<u> </u>									
								·		
								_		
				· · · · · · · · · · · · · · · · · · ·						
		_								
		<u></u>								
2a		indation directly or indirec				-	ations		-	3
		d in section 501(c) of the		section 501(c)(3)) or in s	ection 527	7			res 🛚	No
b	It "Yes,"	complete the following sc	hedule	/h) T / /			(-) (-)	<u> </u>		
	N/A	(a) Name of organization		(b) Type of organization			(c) Description	of relationship		
	N/A				_					
					+					
	Under non	unition of nominal declare the	t I have avamined the	a ratura unaludusa sesseres				-		
	belief, it is	ialties of perjury, I declare that true, correct, and complete. I	Declaration of prepare	s return, including accompa er (other than taxpayer or fjd	iying schedu (ciary <u>)</u> is b a:	sed on all info	ements, and to the be- ormation of which pre	st of my knowledge and parer has any knowledge		
				<i> 11</i>	115 11	0	N 1/	سعر ۱۹۶		
ا بم	Signa	ture of officer or trustee		Dat	}'	_	Title		·	
ᅙ		Δ_	A			Date		Preparer's ide		
=	σ_	Preparer's				Duto	Check if	number (see \$ page 30 of the		
Sign Here	말했	signature G.DAV	D PHELPS H	AMAR, JD, CPA		11/1	5/10 self-employ	P0054		•
	Paid Preparer's Use Only	Firm's name (or yours if		est Financia	l Ser	vices,				
	<u></u>	self-employed), address,		igh Street		,	, · 	EIN ▶ 11-24	6166	9
_		and ZIP code		tesville, VA	229	02		Phone no 434-9		
									90-PF	

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

Department of the Treasury Internal Revenue Service Name of the organization

Schedule of Contributors

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

OMB No 1545-0047

2009

Employer identification number

THE SOONER FOUNDATION 27-0187051

Organization type (check one)
Filers of:	Section:
Form 990 or 990-EZ	501(c)() (enter number) organization
	4947(a)(1) nonexempt charitable trust not treated as a private foundation
	527 political organization
Form 990-PF	501(c)(3) exempt private foundation
	4947(a)(1) nonexempt charitable trust treated as a private foundation
	501(c)(3) taxable private foundation
	overed by the General Rule or a Special Rule . , (8), or (10) organization can check boxes for both the General Rule and a Special Rule See
General Rule	
	ng Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or contributor. Complete Parts I and II
Special Rules	
sections 509(a)(1) and) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under I 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1 Complete Parts I and
the year, aggregate co), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during ontributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or or the prevention of cruelty to children or animals Complete Parts I, II, and III.
the year, contributions aggregate to more tha year for an exclusively), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during for use exclusively for religious, charitable, etc., purposes, but these contributions did not in \$1,000. If this box is checked, enter here the total contributions that were received during the religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule attorn because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more.
_	is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, st answer "No" on Part IV, line 2 of its Form 990, or check the box in the heading of its Form

990-EZ, or on line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ,

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)

or 990-PF)

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

Page 1 of 1 of Part I Employer identification number Name of organization THE SOONER FOUNDATION 27-0187051

Part I	Contributors (see instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	THE PATCHWORK CHARITABLE FOUNDATION 201 KING OF PRUSSIA ROAD, SUITE 100 RADNOR PA 19087	\$ 817,477	Person X Payroll Noncash X (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
No.	Hamo, address, and En 1 4	\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
	rams, address, and <u>a</u> n	\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c)	(d)
NO.	ivaine, audiess, and ∠IF + 4	Aggregate contributions	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)

Page 1 of 1 of Part II Schedule B (Form 990, 990-EZ, or 990-PF) (2009) **Employer identification number** Name of organization THE SOONER FOUNDATION 27-0187051 Part II Noncash Property (see instructions) (a) No. (c) (d) (b) from FMV (or estimate) Description of noncash property given **Date received** Part I (see instructions) U.S. TREASURIES 1 426,421 11/27/09 \$ (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 05/15/09 \$ (a) No. (c) (d) from FMV (or estimate) Description of noncash property given Date received Part I (see instructions) OVERDISTRIBUTION FROM DONER PF 1 19,300 05/15/09 \$ (a) No. (c) (b) (d) FMV (or estimate) from Description of noncash property given Date received Part I (see instructions) \$ (a) No. (c) (b) (d) from FMV (or estimate) Description of noncash property given Date received Part I (see instructions) \$

DF5036 THE SOONER FOUNDATION

Federal Statements

FYE: 12/31/2009

27-0187051

11/15/2010 11:46 AM

Form 990-PF - General Footnote

Description

THE SOONER 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 SOONER 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 SOONER HAS BEEN RECOGNIZED IN PART XIII ON LINE 10D; THE 2009 OVERDISTRIBUTION ALLOCABLE TO SOONER HAS BEEN RECOGNIZED AS GRANTS PAID CURRENTLY IN PART XV ON LINE 3A. SOONER ALSO RECOGNIZED A NON-CASH CONTRIBUTION FROM PATCHWORK DURING 2009 FOR THE 2009 OVERDISTRIBUTION AMOUNT ALLOCABLE TO SOONER THAT WAS TREATED AS GRANTS PAID DURING 2009 BY SOONER.

DF5036 THE SOONER FOUNDATION 27-0187051 FYE: 12/31/2009	Federal 9	Federal Statements		11/15/2010 11:46 AM
15	Statement 1 - Form 990-PF, Part I, Line 16a - Legal Fees	:, Part I, Line 16a - Lega	Fees	•
Description Total	Total \$ 500	Net Investment	Adjusted Net	Charitable Purpose \$ 500
	Statement 2 - Form 990	Form 990-PF, Part I, Line 18 - Taxes	es	
Description VA SCC IRS EXEMPTION APPLICATION Total	\$ 100 750 \$ 850	Net Investment	Adjusted Net	Charitable Purpose \$ 100 750 750 \$ 850
Stat	Statement 3 - Form 990-PF,	990-PF, Part I, Line 23 - Other Expenses	penses	
Description	Total	Net Investment	Adjusted Net	Charitable Purpose
Expenses BRANDYTRUST SPJ, LLC Total	\$ \$ \$	8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8		
		·		1-3

11/15/2010 11:46 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		\$ <u></u>	289,062
Statement 5 - Form 99	0-PF, Part II, Line 1	0b - C	orporate Stoc	k Investme	nts	
Description				•		
	Beginning of Year		End of Year	Basis of Valuation	_	Fair Market Value
COMMON STOCK & MUTUAL FUNDS	\$	\$	320,658	Cost	\$	318,833
Total		\$	320,658	COSC	\$ =	318,833
Statement 6 - Fo	orm 990-PF, Part II,	Line 1	3 - 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	Ÿ	•		Ą	·
Total	ş () \$	4,743 39,796	Market	\$_ =	4,743 39,796
	·					_
Statement 7 - F	Form 990-PF, Part II	I, Line	e 3 - Other Inc	reases		
Statement 7 - I	Form 990-PF, Part I	I, Line	e 3 - Other Inc	reases Amount	_	
	l .	II, Line	• 3 - Other Inc			
Description	l .	II, Line		Amount	_	
Description UNREALIZED GAIN/LOSS ON PARTN Total	l .		\$ \$	Amount 63	_	
UNREALIZED GAIN/LOSS ON PARTN Total	ERSHIPS Form 990-PF, Part II		\$ \$	Amount 63	_	
Description UNREALIZED GAIN/LOSS ON PARTN Total Statement 8 - F	ERSHIPS Form 990-PF, Part II		\$ \$	Amount 63 63	<u>1</u>	

SILVERCREST ASSET MANAGEMENT GROUP LLC REALIZED GAINS AND LOSSES

The Sooner Foundation Port# soonfdn

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

							GAIN O	R Loss
OPEN Date	DATE	QUANTITY	SECURITY	Cost Basis	AMORT. OR	PROCEEDS	SHORT TERM	LONG TERM
12-03-09	12-10-09	40	GREIF INC CL A	2,326		2,186	-140	
08-08-88	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						-140	0
TOTALR	EALIZED (GAIN/LOSS	-140	100,104	-1,778	98,186	-140	0

Formi **8868**(Rev April 2009)

Application for Extension of Time To File an Exempt Organization Return

OMB No 1545-1709

Department of the Treasury

► File a separate application for each return.

nternal Revenue	Service	Prie a separate application for each return.			
If you are	filing for an Au	tomatic 3-Month Extension, complete only Part I and check this box	<u>-</u>		▶ X
=	-	ditional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form	1).		
Do not compl	ete Part II uni	ess you have already been granted an automatic 3-month extension on a previously filed Fo	rm 8868	3.	
Part I		c 3-Month Extension of Time. Only submit original (no copies needed)			
A		Con Total and the property of the second of			
	required to file	Form 990-T and requesting an automatic 6-month extension—check this box and complete	1		. □
Part I only				•	▶ []
	orations (includ ome tax return	ling 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extens. s.	ension o	f	
Electronic Fil	ing (e-file). G	enerally, you can electronically file Form 8868 if you want a 3-month automatic extension of	time to f	ile	
one of the retu	urns noted bel	ow (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8	868		
electronically	ıf (1) you want	the additional (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 887	0, group)	
returns, or a c	omposite or c	onsolidated Form 990-T. Instead, you must submit the fully completed and signed page 2 (P	art II) of	Form	
8868. For moi	re details on th	e electronic filing of this form, visit www.irs gov/efile and click on e-file for Charities & Nonpr	ofits.		
Type or	Name of Ex	empt Organization	Employ	er identific	ation number
print			, -		
File by the	THE SO	OONER FOUNDATION	<u> 27-0</u>	<u> 18705:</u>	<u>L</u>
due date for filing your		eet, and room or suite no. If a P O. box, see instructions. VERCREST, 614 E. HIGH ST.			
return See instructions.		r post office, state, and ZIP code. For a foreign address, see instructions.		·	
		OTTESVILLE VA 22902			
Check type o	f return to be	filed (file a separate application for each return):			
Form 99	90	Form 990-T (corporation)		☐ Fo	rm 4720
Form 99	90-BL	Form 990-T (sec. 401(a) or 408(a) trust)		Fo	rm 5227
Form 99	90-EZ	Form 990-T (trust other than above)		∏ Fo	rm 6069
X Form 99	90-PF	Form 1041-A		∏ Fo	rm 8870
The books	s are in the ca	re of ▶ SILVERCREST ASSET MANAGEMENT GROUP			
Tolophon	o No ト 43	4-977-4420 FAX No. ▶ 434-977-3944			
= -	•	not have an office or place of business in the United States, check this box			▶ □
		•••	 f this is		🗀
	group, check t				
		Ns of all members the extension will cover.	lacii		
		: 3-month (6 months for a corporation required to file Form 990-T) extension of time			 -
		, to file the exempt organization return for the organization named above. The extension is	3		
	organization's	<u>.</u>			
▶ □	calendar year	or			
▶ 🗵		ining 05/15/09, and ending 12/31/09.			
_		<u> </u>			
2 If this ta	ax year is for le	ess than 12 months, check reason [.] 🗶 In _i tial return 📗 Final return 🔲 Change in	accoun	ting period	
3a If this a	pplication is fo	r Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax,			····
less an	y nonrefundab	e credits. See instructions.	3a	\$	250
b If this a	pplication is fo	r Form 990-PF or 990-T, enter any refundable credits and estimated tax			_
		ide any prior year overpayment allowed as a credit.	3b	\$	0
		ct line 3b from line 3a. Include your payment with this form, or, if required,			
		oon or, if required, by using EFTPS (Electronic Federal Tax Payment			<u></u> -
) See instruct		3c	\$	250
		make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879	9-EO		
for payment ii					
For Privacy A	Act and Paper	work Reduction Act Notice, see Instructions.		Form	8868 (Rev 4-2009)

Form 8868 (F	Rev 4-2009)			Page 2
	filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II and check this bo	х		▶ X
-	omplete Part II if you have already been granted an automatic 3-month extension on a previously filed f		368.	_
• 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	(no c	opies nee	ded).
Type or	Name of Exempt Organization	mploy	er identificat	ion number
print				
File by the	THE SOONER FOUNDATION 2	7 - 0	L87051	
extended		or IRS	use only	
due date for 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	of return to be filed (File a separate application for each return).		_	
Form 9	hand hand		☐ For	m 6069
Form 9	90-BL Form 990-T (sec. 401(a) or 408(a) trust) Form 4720		For	m 8870
Form 9				
	t complete Part II If you were not already granted an automatic 3-month extension on a previous	ly filed	Form 8868.	
	s are in the care of SILVERCREST ASSET MANAGEMENT GROUP			
•	e No ▶ 434-977-4420 FAX No ▶ 434-977-3944			_
If the orga	anization does not have an office or place of business in the United States, check this box			▶ [_]
If this is f	or a Group Return, enter the organization's four digit Group Exemption Number (GEN) . If this	IS		
for the whole	group, check this box	d attach	a	
	ames and EINs of all members the extension is for.			
	st an additional 3-month extension of time until1/15/10.			
	endar year or other tax year beginning 05/15/09, and ending 12/31/09			
6 If this to	ix year is for less than 12 months, check reason 🔀 Initial return 🔲 Final return 📗 Change in	accoun	ting period	
	detail why you need the extension		•	_
	ttional time is requested to gather information to	pre	pare a	complete
and	accurate return.			
				
	pplication is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax,			
	y nonrefundable credits. See instructions.	8a	\$	<u> 58</u>
	pplication is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and	1		
	ed tax payments made. Include any prior year overpayment allowed as a credit and any			
	paid previously with Form 8868.	8b	\$	250
	e Due. Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit			
with FT	D coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	8c	\$	0
	Signature and Verification			
Under penalties	of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the bes t, and complete, and that I am authorized to prepare this form	t of my k	nowledge and	belief,
it is illus, comec	V-4 1 hu			
Signature >	FA. WILL Title > CAT			08/02/10
	•		Form 88	68 (Rev 4-2009)