Form 990-PF

### **Return of Private Foundation**

or Section 4947(a)(1) Trust Treated as Private Foundation

OMB No 1545-0047

Form 990-PF (2019)

	De	epartm	ent of the Treasury		▶ Do no	ot enter so	cial se	curity numbers o	on this form as	it may be m	ade pu	blıc.		<u> </u>	
			Revenue Service		▶ Go t	o www.irs.	gov/For	m990PF for inst	ructions and t	the latest inf	ormatio	n.	Оре	en to Public	Inspection
	_		lendar year 2019	or ta	x year be	ginning			, 2019	, and endi					, 20
			foundation								A	Employer ide	ntific	ation number	•
	_		SCOPE FOUNDA								46-4239579				
	Number and street (or P O box number if mail is not delivered to street address)  Room/suite								В	B Telephone number (see instructions)					
	_	FOU	NDATION SOUR	CE S	501 SIL	VERSIDE	RD			<u> </u>		(800)	839	9-1754	
	Cit	ty or to	own, state or province,	count	ry, and ZIP or	foreign posta	al code								
											C If exemption application is pending, check here.			. ▶□	
	_	WIL	MINGTON, DE	1980	09-1377							. •			
	G	Che	ck all that apply		Initial re	turn	L	Initial return	of a former	oublic char	ity D	1. Foreign orga	inizatio	ons, check here .	. ▶□
07					Final ret	urn		Amended re	eturn			2. Foreign organizations meeting the 85% test, check here and attach			_
02	_				Address		<u></u>	Name chang			<b>.</b>			re and allach	. ▶ 🔛
04	H		ck type of organiz		_					. 04	LE	If private found	lation :	status was termir	nated
	L		ection 4947(a)(1) n					Other taxable p	rivate founda	tion	T			1)(A), check here	- I I
45	1		market value of					method X C	Cash Acc	crual	F	If the foundation	วก เร เก	n a 60-month terr	nination
g n			of year (from Pa				-	pecify)				under section 5	07(ь)(	1)(B), check here	. ▶ 🛄
HCT G	_		*****		099.			(d), must be on o	ash basis )						
42 Received In Baiching Ogden	ŀ	art	Analysis of Rev				(0)	Revenue and	(b) Net inv	estment	(c) A	Adjusted net	-	(d) Disbur for chai	
త్వే			may not necessar	ılv eq	ual the amou		e	xpenses per books	incor			income	- 1	purpo	
32	_		column (a) (see in						<u> </u>			<del></del>		(cash bas	is only)
		1	Check ► X if the	s, etc , i	received (attach	schedule) .								*	
330		2						2,501	-	2,501.	·			<u> </u>	
0		3	Interest on savings ar		-			383,559	1P)	3,559.			-		
] 7		4	Dividends and inte					303,337	. 50	,3,337.			-		
7 2093	ĺ	5a	Gross rents						<del> </del>		•••••				'
33		ь	Net rental income or (				·	387,040				·····			· · · i
	Ž	6a b	Net gain or (loss) from Gross sales price for a assets on line 6a	n sale !I		on line 10 98,281.						<del></del>			
	evenue	7	Capital gain net inc		(from Part I)	/ line 2)				0.			$\neg +$		
	8	8	Net short-term cap			7. III 6 2 1 .							$\sim$		' · ·
	-	9	Income modificatio		Ú 🖟							0			
		10 a	Gross sales less return and allowances	s	Or v						1	100		•	
		b	Less Cost of goods so								1	1			
		С	Gross profit or (loss	) (atta	ach schedule	∍)									
		11	Other income (atta					202,567.	l .	5,909.			_		
	4	12	Total. Add lines 1 t	hroug	ıh 11			975,667.		1,969.		· · · · · · · · · · · · · · · · · · ·	_		•
21	<sub>s</sub>	13	Compensation of office	ers, dı	rectors, truste	es, etc		0.							
202	Se	14	Other employee sa		-			•					-		<del></del>
ဓာ	Je n	15	Pension plans, emp						<del> </del>	-					
0	X		Legal fees (attach s						-				-+		
മ	ē	b						123,778.	12	3,778.			+		
FEB	dministrative	.c	Other professional					120,110.		-,,,,,,,			$\dashv$	<del>- · · · · · · · · · · · · · · · · · · ·</del>	
$\circ$	štr	17	Interest					4,600.							
Щ	Ĕ	18	Taxes (attach sched						<del>                                     </del>				$\dashv$		
ξ	Ę	19	Depreciation (attac		-	-							$\dashv$		
SCANNED	al		Occupancy Travel, conferences						<del>†</del>	·····					
ပ္က	and/	22	Printing and public		-										
J	0	23	Other expenses (at					128,388.	11	4,199.			$\top$		12,525.
1	Operating	24	Total operating an		•								7		
1	era		Add lines 13 through			-	l	256,766.	23	7,977.					12,525.
1	ð	25	Contributions, gifts					867,000.					寸		<del>367,000</del> .
0		26	Total expenses and disb	-	•			1,123,766.	23	7,977.					379 <b>,</b> 525.
1-0bb	_	27	Subtract line 26 fro		L=				٠, ,		•	18 20 - 18 2	7	* 1 14	
5		а	Excess of revenue over	r expe	enses and dis	bursements		-148,099.							
Q	Ì	b	Net investment inc	ome	(if negative,	enter -0-)			34	3,992.					
f7		С	Adjusted net incom	ne (ıf	negative, en	ter -0-)				Ī					

Part II	Ralance Sheets	Attached schedules and amounts in the	Beginning of year	Fnd	of year
	Daidike Sileets	description column should be for end-of-year amounts only (See instructions )	(a) Book Value	(b) Book Value	(c) Fair Market Value
1	Cash - non-interest-bear	ing			,
2		cash investments	50,521.	443,740.	443,740.
3			7.00		
		ibtful accounts			
4	Pledges receivable				
1		ibtful accounts >			
5					
6		officers, directors, trustees, and other			
1		tach schedule) (see instructions)			
7	• • • • •	receivable (attach schedule)			
1		ibtful accounts ►		-	~
2 8		se			
8 9		deferred charges			
	•	te government obligations (attach schedule).			
100		e stock (attach schedule) ATCH 5	13,285,223.	12,773,413.	16,054,311.
		e bonds (attach schedule) ATCH 6	1,714,175.		I
11 <sup>C</sup>	Investments - land, building				,-
1	and equipment basis Less accumulated deprecia	ation			-
	(attach schedule)	· -			<del>                                     </del>
12	Investments - mortgage	loans	247,757.	1,129,700.	1,216,017.
13 14	Land, buildings, and	ach schedule)	247,137.	1,125,100.	1,210,017.
	equipment basis Less accumulated deprecia	ation >	-	-	-
1	(attach schedule)				
15		<b>&gt;</b> )			<del></del>
16	•	completed by all filers - see the	15,297,676.	15,149,577.	18 510 000 6
+-	instructions Also, see p	page 1, item I)	13,291,616.	15,149,577.	18,510,099.
17	• •	accrued expenses			
18	Grants payable				<u> </u>
19  يُ	Deferred revenue				,
20		ors, trustees, and other disqualified persons			<u> </u>
19 20 21 22					<u>'</u>
22	Other liabilities (describ	e ►)		<del></del>	
23	Total liabilities (add line	es 17 through 22)	0.	0.	
		w FASB ASC 958, check here			
3	and complete lines 24,	ı			
24	·	or restrictions			
5 25		estrictions			
3 23		follow FASB ASC 958, check here			,
5∤	and complete lines 26 thr				
25 25 26	·	1			1
0 27		cipal, or current funds		······································	<del>                                     </del>
20		r land, bldg , and equipment fund	15,297,676.	15,149,577.	
20	<del>-</del>	ulated income, endowment, or other funds	15,297,676.	15,149,577.	
27 28 29 30		d balances (see instructions)	13,231,010.	10,119,011.	,
			15,297,676.	15,149,577.	[
		nges in Net Assets or Fund Balar		13,143,377.	1,
				must narea with	
		palances at beginning of year - Part I			15 207 676
		ed on prior year's return)			15,297,676.
		, line 27a			-148,099.
		ded in line 2 (ıtemıze) ►			15 140 535
					15,149,577.
	reases not included in	• • • • • • • • • • • • • • • • • • • •			
6 Tota	al net assets or fund b	palances at end of year (line 4 minus	line 5) - Part II, column (t	b), line 29 6	15,149,577.

Page	3

Form 990-PF (2019)					Page 3
	and Losses for Tax on Inve	· · · · · · · · · · · · · · · · · · ·	76\ Haw		
• •	scribe the kind(s) of property sold (for e	·	(b) How acquired P - Purchase	(c) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )
CEE DADE THE COURT	rick warehouse, or common stock, 200	SIIS WILC CO )	D - Donation	(iiio , day, yi )	(110 , ddy, yr )
<del></del>	DOPE				<del></del>
_ <u>b</u>					
d			<del></del>		
e					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo: ((e) plus (f) minu	
a					
<b>b</b>				·	
c					
d					
e					
Complete only for assets si	howing gain in column (h) and owned	by the foundation on 12/31/69		Gains (Col (h) ga	
(ı) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	col	(k), but not less to Losses (from col	
а					
b					<del></del>
С					
d					
e		<u></u>			
2 Capital gain net income	or (net capital loss)	ain, also enter in Part I, line 7	2	_	866,776.
3 Net short-term capital o	ain or (loss) as defined in sections	oss), enter -0- in Part I, line 7	2		000,770.
	art I, line 8, column (c) See ins				
•	art i, line o, column (c) See ins		2		0.
		duced Tax on Net Investment li	come		
		outable amount of any year in the bi	ase perio	d?	Yes X No
		ar, see the instructions before maki	ng any en	tnes	
(a) Base penod years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of nonchantable-use assets		(d) Distribution ra (col (b) divided by	
2018	653,610.	17,565,209.		<del></del>	0.037210
2017	409,522.	13,119,703.			0.031214
2016	151,721.	8,124,569.			0.018674
2015	110,239.	3,746,624.			0.029424
2014	12,818.	1,628,569.			0.007871
	d)		2	<del></del>	0.124393
3 Average distribution ratio	o for the 5-year base period - divid	e the total on line 2 by 5 0, or by			
the number of years the	foundation has been in existence	If less than 5 years	3		0.024879
4 Enter the net value of no	oncharitable-use assets for 2019 f	rom Part X, line 5	4	17,	908,252.
5 Multiply line 4 by line 3.			5		445,539.
6 Enter 1% of net investm	ent income (1% of Part I, line 27b)		6		3,440.
7 Add lines 5 and 6			7		448,979.
8 Enter qualifying distribut	ions from Part XII, line 4	ın Part VI, line 1b, and complete	8 that part		879,525.

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Par	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see i	nstru	ctions	s)	
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		3,4	40.	
	here X and enter 1% of Part I, line 27b				
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-)				
3	Add lines 1 and 2		3,4	40.	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)			0.	
	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0		3,4	140.	
6	Credits/Payments				
а	2019 estimated tax payments and 2018 overpayment credited to 2019 6a 7,595.				
b	Exempt foreign organizations - tax withheld at source 6b				
С	Tax paid with application for extension of time to file (Form 8868) 6c				
d	Backup withholding erroneously withheld				
7	Total credits and payments Add lines 6a through 6d		7,5	95.	
8	Enter any penalty for underpayment of estimated tax. Check here X if Form 2220 is attached				
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed				
0	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		4,1	55.	
1	Enter the amount of line 10 to be Credited to 2020 estimated tax ▶ 4,155. Refunded ▶ 11				
	t 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	<del></del>	Yes	No	
	participate or intervene in any political campaign?	1a		Х	
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the	ı l			
	instructions for the definition	1b		X	
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials	i l			
	published or distributed by the foundation in connection with the activities			x	
	Did the foundation file Form 1120-POL for this year?	1c		<u> </u>	i
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	1 }			
•	on foundation managers   \$  Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		х	
2	If "Yes," attach a detailed description of the activities			<b> </b>	•
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles	[ ]		ı	,
J	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		x	
12	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a	Х		•
	If "Yes," has it filed a tax return on Form 990-T for this year?	4b	Х		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		Х	•
-	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	Х		_
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	Х	<u> </u>	_
	Enter the states to which the foundation reports or with which it is registered. See instructions.	.			
	DE,			ŀ	
ь	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 <sup>2</sup> If "No," attach explanation	8ь	Х	<u> </u>	-
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 2019 or the tax year beginning in 2019? See the instructions for Part XIV If "Yes,"	$ \cdot $		`	•
	complete Part XIV	9		X	_ 4
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their			U	
	names and addresses	10		X	

Pai	Statements Regarding Activities (continued)			
	•		Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			:
	meaning of section 512(b)(13)? If "Yes," attach schedule See instructions	11		Х
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified			
	person had advisory privileges? If "Yes," attach statement See instructions	12	X	
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address ► N/A			
14	The books are in care of ▶ FOUNDATION SOURCE Telephone no ▶ 800-839-	1754	4	
	Located at ▶501 SILVERSIDE ROAD, SUITE 123 WILMINGTON, DE ZIP+4 ▶ 19809-13	377		
15			▶	$\cdot \square$
	and enter the amount of tax-exempt interest received or accrued during the year			
16	At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority		Yes	
	over a bank, securities, or other financial account in a foreign country?	16		Х
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of			
_	the foreign country			
Pai	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required		I	١
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year, did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			
	disqualified person? Yes X No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X 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 X No			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the			
	foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, if terminating within 90 days)			
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in	4.	-	-
	Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance? See instructions	1b		
	Organizations relying on a current notice regarding disaster assistance, check here			
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that	اما	- 1	х
	were not corrected before the first day of the tax year beginning in 2019?	1c		
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			
	operating foundation defined in section 4942(j)(3) or 4942(j)(5))			,
а	At the end of tax year 2019, did the foundation have any undistributed income (Part XIII, lines  6d and 6e) for tax year(s) beginning before 2019?			
	of and definition described and definiting described and definition described and descr		l	
_	If "Yes," list the years ▶,,,,,,,,			
ь	• •			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement - see instructions)	2b		
_	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
·		.		
2-	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise		ŀ	
Ja	at any time during the year?			
<b>.</b>	If "Yes," did it have excess business holdings in 2019 as a result of (1) any purchase by the foundation or		İ	
5	disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the		į	
	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 Form 4720, Schedule C, to determine if the			
	foundation had excess business holdings in 2019)	3b	1	
42	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		Х
	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 2019?	4b		Х

Par	t VII-B Statements Regarding Activities	TOT WINCH FORM	4/20 May be Red	ulled (continued)			
5a	During the year, did the foundation pay or incur any an	nount to				Yes	No
	(1) Carry on propaganda, or otherwise attempt to influ	uence legislation (section	n 4945(e))?	. Yes X No	,	-	,
	(2) Influence the outcome of any specific public e	lection (see section 4	955), or to carry or	n,			
	directly or indirectly, any voter registration drive?	· • • • • • • • • • • • • • • • • • • •			• [		
	(3) Provide a grant to an individual for travel, study, or	other similar purposes?		. Yes X No	,	1	
	(4) Provide a grant to an organization other than	a charitable, etc., org	anization described i			1	•
	section 4945(d)(4)(A)? See instructions				•		ł
	(5) Provide for any purpose other than religious, of	charitable, scientific, I	iterary, or educations				
	purposes, or for the prevention of cruelty to children				1 1		
Ь	If any answer is "Yes" to 5a(1)-(5), did any of the				, ,		
	Regulations section 53 4945 or in a current notice rega				5b	-	
	Organizations relying on a current notice regarding dis-				니니		
С	If the answer is "Yes" to question 5a(4), does the		•				
	because it maintained expenditure responsibility for the			Yes No	'		i
_	If "Yes," attach the statement required by Regulations						
6a	Did the foundation, during the year, receive any fu			ns Yes X No		ļ	
b	on a personal benefit contract?  Did the foundation, during the year, pay premiums, di			. — —	6b		X,
D	If "Yes" to 6b, file Form 8870	rectly of munectly, on a	personal benefit contra	101.	00		
7a	At any time during the tax year, was the foundation a	narty to a prohibited tax	shelter transaction?	Yes X No	,		
b	If "Yes," did the foundation receive any proceeds or his			<del></del>	7b	•	
8	Is the foundation subject to the section 4960 tax on pa	<u>-</u>					
·	remuneration or excess parachute payment(s) during th	, , ,		. Yes X No	,	1	
Pai	Information About Officers, Director						
1	and Contractors List all officers, directors, trustees, and founda	tion managers and	their compensation	See instructions			
	List all officers, directors, trustees, and founda	(b) Title, and average	(c) Compensation	(d) Contributions to	4.55	0.00001	
			(-)		(e) Expens		
	(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	employee benefit plans and deferred compensation	(e) Expens other all	owance:	s
		hours per week	(If not paid,	employee benefit plans	other all	owance	s ———
ATC	(a) Name and address	hours per week	(If not paid,	employee benefit plans	other all	owance:	0 .
ATCI		hours per week	(If not paid, enter -0-)	employee benefit plans and deferred compensation	(e) Expens other allo	owance:	s
ATCI		hours per week	(If not paid, enter -0-)	employee benefit plans and deferred compensation	(e) Expens other allo	owance	s
ATCI		hours per week	(If not paid, enter -0-)	employee benefit plans and deferred compensation	(e) Expens	owance	s
ATCI		hours per week	(If not paid, enter -0-)	employee benefit plans and deferred compensation	(e) Expens other allo	owance	s
ATCI		hours per week	(If not paid, enter -0-)	employee benefit plans and deferred compensation	(e) Expens other allo	pwances	s
	H 10	hours per week devoted to position	(If not paid, enter -0-)	employee benefit plans and deferred compensation  0.	other all	owance	0.
ATCI	Compensation of five highest-paid employees	hours per week devoted to position	(If not paid, enter -0-)	employee benefit plans and deferred compensation  0.	other all	owance	0.
2	Compensation of five highest-paid employees	hours per week devoted to position	(If not paid, enter -0-)  0.	e 1 - see instruction	other allo	one, e	0.
2	Compensation of five highest-paid employees	hours per week devoted to position	(If not paid, enter -0-)	e 1 - see instruction  (d) Contributions to employee benefit plans and deferred	other all	one, e	0.
2	Compensation of five highest-paid employees	hours per week devoted to position  (other than those hours per week	(If not paid, enter -0-)  0.	e 1 - see instruction  (d) Contributions to employee benefit	other allo	one, e	0.
2 (a)	Compensation of five highest-paid employees "NONE."  Name and address of each employee paid more than \$50,000	hours per week devoted to position  (other than those hours per week	(If not paid, enter -0-)  0.	e 1 - see instruction  (d) Contributions to employee benefit plans and deferred	other allo	one, e	0.
2 (a)	Compensation of five highest-paid employees	hours per week devoted to position  (other than those hours per week	(If not paid, enter -0-)  0.	e 1 - see instruction  (d) Contributions to employee benefit plans and deferred	other allo	one, e	0.
2 (a)	Compensation of five highest-paid employees "NONE."  Name and address of each employee paid more than \$50,000	hours per week devoted to position  (other than those hours per week	(If not paid, enter -0-)  0.	e 1 - see instruction  (d) Contributions to employee benefit plans and deferred	other allo	one, e	0.
2 (a)	Compensation of five highest-paid employees "NONE."  Name and address of each employee paid more than \$50,000	hours per week devoted to position  (other than those hours per week	(If not paid, enter -0-)  0 .  e included on lin  (c) Compensation	e 1 - see instruction  (d) Contributions to employee benefit plans and deferred	other allo	one, e	0.
2 (a)	Compensation of five highest-paid employees "NONE."  Name and address of each employee paid more than \$50,000	hours per week devoted to position  (other than those hours per week	(If not paid, enter -0-)  0.	e 1 - see instruction  (d) Contributions to employee benefit plans and deferred	other allo	one, e	0.
2 (a)	Compensation of five highest-paid employees "NONE."  Name and address of each employee paid more than \$50,000	hours per week devoted to position  (other than those hours per week	(If not paid, enter -0-)  0 .  e included on lin  (c) Compensation	e 1 - see instruction  (d) Contributions to employee benefit plans and deferred	other allo	one, e	0.
2 (a)	Compensation of five highest-paid employees "NONE."  Name and address of each employee paid more than \$50,000	hours per week devoted to position  (other than those hours per week	enter -0-)  0 .  e included on lin  (c) Compensation	e 1 - see instruction  (d) Contributions to employee benefit plans and deferred	other allo	one, e	0.
2 (a)	Compensation of five highest-paid employees "NONE."  Name and address of each employee paid more than \$50,000	hours per week devoted to position  (other than those hours per week	enter -0-)  0 .  e included on lin  (c) Compensation	e 1 - see instruction  (d) Contributions to employee benefit plans and deferred	other allo	one, e	0.
2 (a)	Compensation of five highest-paid employees "NONE."  Name and address of each employee paid more than \$50,000	hours per week devoted to position  (other than those hours per week	enter -0-)  0 .  e included on lin  (c) Compensation	e 1 - see instruction  (d) Contributions to employee benefit plans and deferred	other allo	one, e	0.
(a)	Compensation of five highest-paid employees "NONE."  Name and address of each employee paid more than \$50,000	hours per week devoted to position  (b) Title, and average hours per week devoted to position	(If not paid, enter -0-)  0 .  e included on lin  (c) Compensation	e 1 - see instruction  (d) Contributions to employee benefit plans and deferred	other allo	one, e	o.

Form 990-PF (2019) Page 7 Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued) Five highest-paid independent contractors for professional services. See instructions. If none, enter "NONE." (a) Name and address of each person paid more than \$50,000 (b) Type of service (c) Compensation ATCH 11 121,336. **Summary of Direct Charitable Activities** Part IX-A List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of Expenses organizations and other beneficianes served, conferences convened, research papers produced, etc N/A 1 Summary of Program-Related Investments (see instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount. NONE

Form **990-PF** (2019)

NONE

All other program-related investments See instructions

Form 990-PF (2019) Page 8 Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes 16,734,106. 1a 345,612. 1b 1,101,248. 1c 1d 18,180,966. Reduction claimed for blockage or other factors reported on lines 1a and 2 18,180,966. 3 Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see 272,714. instructions)...... 17,908,252. Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V. line 4 5 895,413. Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations, check here ▶ and do not complete this part ) 895,413. 1 3,440. Tax on investment income for 2019 from Part VI, line 5 . . . . . . 2a Income tax for 2019. (This does not include the tax from Part VI.). . 2b 4,478. 890,935. Distributable amount before adjustments. Subtract line 2c from line 1. . . . . . 3 4 890,935. 5 5 6 Deduction from distributable amount (see instructions)............ Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, 890,935. Part XII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes 879,525. 1a 1b Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., Amounts set aside for specific charitable projects that satisfy the: 3b 879,525. Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4 4 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b. See instructions..... 3,440.

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 (2019)

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Ра	rt XIII Undistributed Income (see inst	ructions)			
1	Distributable amount for 2019 from Part XI,	(a) - Corpus	(b) Years prior to 2018	(c) 2018	(d) 2019
•	line 7				890,935.
2	Undistributed income, if any, as of the end of 2019	· ·= ·			
	Enter amount for 2018 only			862,071.	
	Total for pnor years 20 17 ,20 16 ,20 15			<u> </u>	
	Excess distributions carryover, if any, to 2019	** * , , , , , , , , , , , , , , , , ,		* ,	
	From 2014	1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1		, ,	****
	From 2015	1		' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '	
	From 2016	1		l	ĺ
	From 2017 !	Complete to the state of	A TO ARE STATE MANY		the first of the second
	From 2018	The first of the fair of the fair	The state of the s	Real Marie Co	
	Total of lines 3a through e		2 11 342 h	dame a reas est	chara the fit f
	Qualifying distributions for 2019 from Part XII,				
	line 4 ▶ \$ 879,525.			862,071.	
	Applied to 2018, but not more than line 2a			002,071.	
Ь	Applied to undistributed income of prior years (Election required - see instructions)	1			
Ć	Treated as distributions out of corpus (Election	•	<b>[</b>		migrate water managing of
_	required - see instructions)		- u 11 -		17,454.
	Applied to 2019 distributable amount				17,434.
	Remaining amount distributed out of corpus Excess distributions carryover applied to 2019 (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:			- 1	-  -  -
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5			r	1
b	Prior years' undistributed income Subtract				
	line 4h from line 2h,				• 1,
С	Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed				
d	Subtract line 6c from line 6b Taxable		•		
_	amount - see instructions				, 1
е	Undistributed income for 2018 Subtract line 4a from line 2a Taxable amount - see instructions			1	
f	Undistributed income for 2019 Subtract lines				
	4d and 5 from line 1. This amount must be				873,481.
	distributed in 2020,		, , t + <sub>16</sub> 1		7
7	Amounts treated as distributions out of corpus		,	**	
	to satisfy requirements imposed by Section 170(b)(1)(5) or 4042(c)(2) (blesting may be			1	
	170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions)	,			
	Excess distributions carryover from 2014 not			- ·- · · · · · · · · · · · · · · · · ·	<del></del>
0	applied on line 5 or line 7 (see instructions)		20 mg - 20 mg	a see a factor of	د په و ه د د د د د د د د د د د د د د د د د
9	Excess distributions carryover to 2020			1.00 mail, 1 . 191.	14 A . 14 A . 14 A . 15
•	Subtract lines 7 and 8 from line 6a	. 0.			dia .
U	Analysis of line 9	er er ihr der der der er	the state of the s	May 1997 A. The Control of the	the state of the s
	Excess from 2015	क्षित्र करण अंश देश प्राप्ता । क्षे	The program of the pr	And the state of t	the state of the state of the
b	Excess from 2010	State State State	1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	4 4 4 4 °C	
C	Excess from 2017	10 to	العلامية المسيد وما	ا والإنام	
ď	Excess from 2018	" despect to a second	n b in Mily praifegy gri		The same of the sa
0	Excess from 2019		<u>,</u>		1
					E 000-DE (0040)

Pa	rt XIV Private Op	erating Foundations	(see instructions a	nd Part VII-A, question	on 9)	NOT APPLICABLE
1 a	If the foundation has	received a ruling or d	etermination letter tha	t it is a private opera	iting	,
	foundation, and the ruling	g is effective for 2019, e	nter the date of the ruling		▶	,
ь	Check box to indicate v					(j)(3) or 4942(j)(5)
	Enter the lesser of the ad-	Tax year		Prior 3 years		1
	justed net income from Part		(b) 2018	<del>                                     </del>	(4) 2016	(e) Total
	I or the minimum investment	(a) 2019	<b>(b)</b> 2018	(c) 2017	(d) 2016	<del></del>
	return from Part X for each					
	year listed					
b	85% of line 2a					·
	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	}		1		
_	2d from line 2c					
3	Complete 3a, b, or c for the					
а	"Assets" alternative test - enter					
_						
	(1) Value of all assets (2) Value of assets qualifying		1		,	
	under section					
_	4942(j)(3)(B)(i)					
D	"Endowment" alternative test- enter 2/3 of minimum invest-					
	ment 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 secunties					
	loans (section 512(a)(5)),			'		
	or royalties)					<del></del>
	(2) Support from general public and 5 or more				,	
	exempt organizations as					
	provided in section 4942 (j)(3)(B)(iii)		1			
	(3) Largest amount of sup-					
	port from an exempt			]		_
	organization			<u> </u>		
Dэ		stant Information //	Complete this part	only if the founds	tion had \$5 000 a	or more in assets at
га		uring the year - see		only if the founda	tion had \$5,000 t	or more in assets at
_						
7	Information Regarding	-				
а	List any managers of					
	before the close of any	tax year (but only if th	ey have contributed r	more than \$5,000). (Se	e section 507(d)(2) )	
	BEN FISCHER				•	
b	List any managers of	the foundation who	own 10% or more o	f the stock of a corpo	oration (or an equal	ly large portion of the
	ownership of a partner					,g. p
		. ,,		J		
	NI / D					
_	N/A			<del></del>		
2	Information Regarding			· · · · · ·		
	Check here ► X If t	he foundation only i	makes contributions	to preselected charit	table organizations	and does not accept
	unsolicited requests for	or funds. If the found	ation makes gifts, gra	ants, etc., to individual	s or organizations u	inder other conditions,
	complete items 2a, b, d				-	•
а	The name, address, a	nd telephone number	or email address of the	ne person to whom app	lications should be ad	dressed:
_	-,			. ,		
_	The form in which appl	lications should be suit	muttad and informatio	an and materials that	should reducto	
D	The form in which app	iications should be sur	milled and information	on and materials they s	snoula include	
С	Any submission deadli	nes	<u> </u>			
			•		**	•
	Any restrictions or li	mitations on awards	such as by geogra	aphical areas charital	ble fields kinds of	institutions or other
-	factors			apour arous, oname	ala noido, kindo Of	

Page **11** 

Recipient a  Name and address (home or business)	ing the Year or App	roved for	Future Payment	T
Recipient 4	show any relationship to any foundation manager	status of	Purpose of grant or contribution	Amount
a Paid during the year	or substantial contributor	recipient		
a raid during the year				
ATCH 12				
<b>4.</b>				
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•			` <b>~</b>	
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			L	<u> </u>
Total			▶ 3a	867,000.
<b>b</b> Approved for future payment	-			
خوب				
* ·				
	<b>.</b>			
				-
•				
	4.00			
••				
-				
	-			
Total			▶ 3b	

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Form 990-PF (2019)

rt XVI-A Analysis of Income-Produ		ated business income	Excluded by	y section 512, 513, or 514	(e), , ;
er gross amounts unless otherwise indicated.	(a) Business code	(b) Amount	(c) Exclusion code	(d) . Amount	Related or exempt function income (See instructions)
Program service revenue	· · · · · · · · · · · · · · · · · · ·	<del>'-</del>			(See instructions )
·					
b			+		
·			<del>                                     </del>		
<sup>d</sup>					
·					
f					·
g Fees and contracts from government agencies			<del> </del>		
Membership dues and assessments			1.0	2 501	
nterest on savings and temporary cash investments .			14	2,501.	
Dividends and interest from securities			14	383,559.	
Net rental income or (loss) from real estate					
Debt-financed property					
Not debt-financed property					
Net rental income or (loss) from personal property					
Other investment income					
Gain or (loss) from sales of assets other than inventory	525990	-6.	18	387,046.	
Net income or (loss) from special events				<u>.</u>	
Sross profit or (loss) from special events • • • • • • • • • • • • • • • • • • •					
Other revenue a K-1 INC/LOSS	525990	6,658.	14	195,909.	
b					
c	· · · · · · · · · · · · · · · · · · ·	·			
		1			<del></del>
			1	1	
е		6,652	<u> </u>	969,015.	
e Subtotal Add columns (b), (d), and (e)		6,652.		969,015.	975,66
e	lations)			13	975,66
Subtotal Add columns (b), (d), and (e) [ Fotal. Add line 12, columns (b), (d), and (e)	ulations) <b>s to the A</b> y for whic	ccomplishment of E	xempt Pur	poses e) of Part XVI-A contribu	uted importantly to
Subtotal Add columns (b), (d), and (e)  Fotal. Add line 12, columns (b), (d), and (e)  worksheet in line 13 instructions to verify calculated at XVI-B Relationship of Activities  Relationship of Activities	ulations) <b>s to the A</b> y for whic	ccomplishment of E	xempt Pur	poses e) of Part XVI-A contribu	uted importantly to
Subtotal Add columns (b), (d), and (e)  Fotal. Add line 12, columns (b), (d), and (e)  worksheet in line 13 instructions to verify calculated at XVI-B Relationship of Activities  Relationship of Activities	ulations) <b>s to the A</b> y for whic	ccomplishment of E	xempt Pur	poses e) of Part XVI-A contribu	uted importantly to
Subtotal Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  Worksheet in line 13 instructions to verify calculated the color of the c	ulations) <b>s to the A</b> y for whic	ccomplishment of E	xempt Pur	poses e) of Part XVI-A contribu	uted importantly to s). (See instructions
iubtotal Add columns (b), (d), and (e)	ulations) <b>s to the A</b> y for whic	ccomplishment of E	xempt Pur	poses e) of Part XVI-A contribu	uted importantly to s). (See instructions
ubtotal Add columns (b), (d), and (e) otal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calcut XVI-B Relationship of Activities a No. Explain below how each activity	ulations) <b>s to the A</b> y for whic	ccomplishment of E	xempt Pur	poses e) of Part XVI-A contribu	ated importantly to s). (See instructions
ubtotal Add columns (b), (d), and (e) lotal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calcut XVI-B Relationship of Activities No. Explain below how each activity	ulations) <b>s to the A</b> y for whic	ccomplishment of E	xempt Pur	poses e) of Part XVI-A contribu	ated importantly to s). (See instructions
ubtotal Add columns (b), (d), and (e) otal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calcut XVI-B Relationship of Activities a No. Explain below how each activity	ulations) <b>s to the A</b> y for whic	ccomplishment of E	xempt Pur	poses e) of Part XVI-A contribu	ated importantly to s). (See instructions
ubtotal Add columns (b), (d), and (e) otal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calcut XVI-B Relationship of Activities a No. Explain below how each activity	ulations) <b>s to the A</b> y for whic	ccomplishment of E	xempt Pur	poses e) of Part XVI-A contribu	ated importantly to s). (See instructions
ubtotal Add columns (b), (d), and (e) otal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calcut XVI-B Relationship of Activities a No. Explain below how each activity	ulations) <b>s to the A</b> y for whic	ccomplishment of E	xempt Pur	poses e) of Part XVI-A contribu	ated importantly to s). (See instructions
otal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calcut XVI-B Relationship of Activities  No. Explain below how each activity	ulations) <b>s to the A</b> y for whic	ccomplishment of E	xempt Pur	poses e) of Part XVI-A contribu	uted importantly to s). (See instructions
ubtotal Add columns (b), (d), and (e) otal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calcut XVI-B Relationship of Activities a No. Explain below how each activity	ulations) <b>s to the A</b> y for whic	ccomplishment of E	xempt Pur	poses e) of Part XVI-A contribu	ated importantly to s). (See instructions
Subtotal Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  Worksheet in line 13 instructions to verify calculated the color of the c	ulations) <b>s to the A</b> y for whic	ccomplishment of E	xempt Pur	poses e) of Part XVI-A contribu	uted importantly to s). (See instructions

Part XVII	Information Roy Organizations	egarding Trans	fers to and Tran	sactions ar	nd Relationshi	ps With Noncha	ritable Ex	empt
ın se orgar	ne organization direct ection 501(c) (other nizations? sfers from the reportir	than section	501(c)(3) organizatı	ons) or in s	section 527, re		Yes	No
	ash						1a(1)	x
	ther assets							Х
<b>b</b> Other	transactions.							
	ales of assets to a no							X
	urchases of assets fro							X
	ental of facilities, equi eimbursement arrang							X
	oans or loan guarante							X
	erformance of service							х
	ng of facilities, equipm	-						X
value	answer to any of the of the goods, other in any transaction of (b) Amount involved	assets, or service r sharing arrange	es given by the repo	orting foundation (d) the va	tion. If the found	dation received less	than fair mervices rec	narket eived.
	N/A			N,	/A			
	***************************************							
					<del></del>			
			····					
						· · · · · · · · · · · · · · · · · · ·		
	foundation directly ibed in section 501(c) s," complete the follo	(other than sect					Yes X	 ] No
	(a) Name of organization	n	(b) Type of orga	nization		(c) Description of relations	hip	
					-			
		<u> </u>				<u>-</u>		
			***************************************					
	er penalties of penjury, I declared, and complete Declaration of			on of which preparer		May the IRS	discuss this	retum
Here Sig	mature of officer or trustee		Date	Title	ייניט ע עכיי	See instructions	. — –	below? No
Doid	Print/Type preparer's na	me	Preparer's signature		Date	Check if F	TIN	
Paid	JEFFREY D HASI		JEFFREY D HAS	SKELL	11/08/	<del>,</del>	0134577	0
Preparer	7 IIII S IIII III	UNDATION SO				Firm's EIN > 51039	8347	
Use Only	1	E HOLLOW LN KE SUCCESS,	, STE 212 NY		11042	800-93	9-1754	
		JUCCESS,	IA T		11072	1 110110 110	m <b>990-PF</b>	(2019)

### **Underpayment of Estimated Tax by Corporations**

OMB No 1545-0123

Department of the Treasury Internal Revenue Service

► Attach to the corporation's tax return.

► Go to www.irs.gov/Form2220 for instructions and the latest information

Employer identification number SONSCOPE FOUNDATION 46-4239579

Note: Generally, the corporation is not required to file Form 2220 (see Part II below for exceptions) because the IRS will figure any penalty owed and bill the corporation. However, the corporation may still use Form 2220 to figure the penalty. If so, enter the amount from page 2, line 38, on the estimated tax penalty line of the corporation's income tax return, but do not attach Form 2220

Par	t I	Required Annual Payment					
1	Tota	al tax (see instructions)		• • • • • • • • • • • • • • • • • • • •			3,440.
2a b	Look	ional holding company tax (Schedule PH (For -back interest included on line 1 under secti racts or section 167(g) for depreciation under	on 4	60(b)(2) for completed long	g-term		1
С	Cre	dit for federal tax paid on fuels (see instri	uctio	ns)	2c		
đ		al. Add lines 2a through 2c		•		2d	
3		tract line 2d from line 1 If the result is	_				
	doe	s not owe the penalty				3	3,440.
4		er the tax shown on the corporation's 20 tax year was for less than 12 months, sk				1.1	2,415.
5		uired annual payment. Enter the smalle					2 415
Dor	the	Reasons for Filing - Check the		voc holow that ann	ly If any haves are	shocked the sou	2,415.
raj		Form 2220 even if it does not				checked, the con	poration must me
6		The corporation is using the adjusted	seas	onal installment method			
7	X	The corporation is using the annualize					
8		The corporation is a "large corporation	" fig	juring its first required in	stallment based on the pro	or year's tax.	
Part	Ш	Figuring the Underpayment		(a)	(b)	(c)	(d)
9	Inct	allment due dates Enter in columns (a)		(a)	(6)	(0)	(u)
3	thro:	ugh (d) the 15th day of the 4th (Form 990-PF): Use 5th month), 6th, 9th, and 12th months e corporation's tax year	9	05/15/2019	06/17/2019	09/16/2019	12/16/2019
10		uired installments. If the box on line 6	İ				
		or line 7 above is checked, enter the unts from Schedule A, line 38 if the box on					
		8 (but not 6 or 7) is checked, see instructions	]		•	,	
	for t	he amounts to enter If none of these boxes					
		checked, enter 25% (0 25) of line 5 above in	10	379.	829.	604	604.
		column	"	3,7.	023.		004.
11		nated tax paid or credited for each period column (a) only, enter the amount from					
		* * *	11	2,995.	2,800.	1,800	).
		plete lines 12 through 18 of one column re going to the next column.				· ·	
12	Enter	amount if any from line 18 of the preceding column ,	12		2,616.	4,587	7. 5,783.
13	Add	lines 11 and 12	13		·''' 5,416.	"···6,387	7. 3° 5,783.
14	∧dd (	amounts on lines 16 and 17 of the preceding column	14				
15	Subt	ract line 14 from line 13 If zero or less, enter -0	15	2,995.	5,416.	6,387	7. 5 <b>,</b> 783.
16		e amount on line 15 is zero, subtract line 13 line 14 Otherwise, enter -0	16		•		
17	line line	erpayment. If line 15 is less than or equal to 10, subtract line 15 from line 10. Then go to 12 of the next column. Otherwise, go to 18	17	,		•	,
18	Over subt	payment. If line 10 is less than line 15, ract line 10 from line 15. Then go to line f the next column.	18	2,616.	4,587.	5,783	3.

Page 2

P	art IV Figuring the Penalty					
		Π	(a)	(b)	(c)	(d)
19	Enter the date of payment or the 15th day of the 4th month after					
	the close of the tax year, whichever is earlier (C corporations	1	•			}
	with tax years ending June 30 and S corporations: Use 3rd month	1				j
	instead of 4th month Form 990-PF and Form 990-T filers: Use	1				
20	5th month instead of 4th month ) See instructions Number of days from due date of installment on line 9 to the			<del></del>	ļ	
20	•					
	date shown on line 19	20			<del>                                     </del>	
21	Number of days on line 20 after 4/15/2019 and before 7/1/2019	21		· · · · · · · · · · · · · · · · · · ·	<del> </del>	<u> </u>
	Number of days on line 21					
22	Underpayment on line 17 x Number of days on line 21 x 6% (0 06)	22	\$	\$	\$	\$
	555					
23	Number of days on line 20 after 6/30/2019 and before 10/1/2019	23	ļ			
	Number of days on line 22					
24	Underpayment on line 17 x Number of days on line 23 x 5% (0 05)	24	\$	\$	\$	\$
	303		ł			
25	Number of days on line 20 after 9/30/2019 and before 1/1/2020	25				
	Number of days on the Of		[			
26	Underpayment on line 17 x Number of days on line 25 x 5% (0 05)	26	\$	\$	\$	\$
	305	1	}			
27	Number of days on line 20 after 12/31/2019 and before 4/1/2020	27				
	Number of days on line 27					
28	Underpayment on line 17 x Number of days on line 27 x 5% (0 05)	28	\$	\$	\$	\$
	300				1	
29	Number of days on line 20 after 3/31/2020 and before 7/1/2020	29				
	Number of days on line 20					
30	Underpayment on line 17 x Number of days on line 29 x *%	30	\$	\$	\$	\$
	300				•	
31	Number of days on line 20 after 6/30/2020 and before 10/1/2020	31				
32	Underpayment on line 17 x Number of days on line 31 x *% 366	32	\$	\$	\$ '	\$
	300					
33	Number of days on line 20 after 9/30/2020 and before 1/1/2021	33				
34	Underpayment on line 17 x Number of days on line 33 x *%	34	\$	\$	\$	\$
	366					
35	Number of days on line 20 after 12/31/2020 and before 3/16/2021	35				
	News have of days as her OF					. ′
36	Underpayment on line 17 x Number of days on line 35 x *% 365	36	\$	\$ ·	\$	\$
		Į		1		
37	Add lines 22, 24, 26, 28, 30, 32, 34, and 36	37	[\$	\$	\$	\$
38	Penalty Add columns (a) through (d) of line 37 Enter the to					
	line for other income tax returns					\$

\*Use the penalty interest rate for each calendar quarter, which the IRS will determine during the first month in the preceding quarter. These rates are published quarterly in an IRS News Release and in a revenue ruling in the Internal Revenue Bulletin. To obtain this information on the Internet, access the IRS website at www.irs.gov. You can also call 1-800-829-4933 to get interest rate information.

Form **2220** (2019)

Pa	rt    Annualized Income Installmen	it Me				
			(a)	(b)	(c)	(d)
	Annual control of the	20	First 2	First 3 months	First 6 months	First 9 months
20	Annualization periods (see instructions) Enter taxable income for each annualization period See instructions for the treatment of extraordinary items	21	19,377.	68,540.	154,205.	228,235
2	Annualization amounts (see instructions)	22	6.00000	4.00000	2.00000	1.3333
3a	Annualized taxable income Multiply line 21 by line 22	23a	116,262.	274,160.	308,410.	304,313
ь	Extraordinary items (see instructions)	23b	35,160.	33,011.	54,235.	12,250
		23c	151,422.	307,171.	362,645.	316,563
4	Figure the tax on the amount on line 23c using the instructions for Form 1120, Schedule J, line 2, or comparable line of corporation's return  Enter any alternative minimum tax (trusts)	24	1,514.	3,072.	3,626.	3,166
J	only) for each payment period (see instructions)	25				
26	Enter any other taxes for each payment period. See instructions	26				
27	Total tax. Add lines 24 through 26 For each penod, enter the same type of credits as	27	1,514.	3,072.	3,626.	3,166
_	allowed on Form 2220, lines 1 and 2c See instructions	28				
9	Total tax after credits Subtract line 28 from line 27 If zero or less, enter -0	29	1,514.	3,072.	3,626.	3,166
0	Applicable percentage	30	25%	50%	75%	100%
	Multiply line 29 by line 30	31	379.	1,536.	2,720.	3,166
Pa	art III Required Installments		4-4	2-4	3rd	4th
	Note: Complete lines 32 through 38 of one column before completing the next column	-	1st installment	2nd Installment	installment	installment
2	If only Part I or Part II is completed, enter the amount in each column from line 19 or line 31. If both parts are completed, enter the smaller of the		270	1 526	2,720.	3,166
3	, ,		379.	1,536.		
4	of line 38 See instructions	33		379.	1,208.	1,812
	installments. Subtract line 33 from line 32. If zero or less, enter -0	34	379.	1,157.	1,512.	1,354
5	Enter 25% (0 25) of line 5 on page 1 of Form 2220 in each column Note: "Large corporations," see the instructions for line 10 for the amounts to enter	35	604.	604.	604.	604
36	Subtract line 38 of the preceding column from line 37 of the preceding column	36		225.		<u>.</u>
37	Add lines 35 and 36	37	604.	829.	604.	604
38	Required installments. Enter the smaller of line 34 or line 37 here and on page 1 of					<b>.</b>
	Form 2220, line 10 See instructions	38	379.	829.	604.	604

Part I, Line 6a (990-PF) - Net Gain/(Loss) from Sales of Assets Not Included in Part IV

			•			
Name	Date Acquired	Acquisition Method	Date Sold	Gross Sales Price	Book Basis	Net Gain/(Loss)
Publicly-traded Securities Passthrough K-1 Capital Gain/(Loss) - non UBI		. ;		\$ 2,598,281	\$ 2,221,380	\$ 376,901 \$ 10,145
Total included in Part IV				\$ 2,598,281	\$ 2,221,380	\$ 387,046
Passthrough K-1 Capital Gain/(Loss) - UBI	, _					(9)
Part I, Line 6a Total:						\$ 387.040

ATTACHMENT 1

46-4239579

# FORM 990PF, PART I - OTHER INCOME

. 202	TOTALS		
	SOVEREIGN'S CAPITAL III, LP	K-1 INC/LOSS	K-1
113	RESOLUTE CAPITAL PARTNERS F	INC/LOSS	K-1
96	ICAPITAL PRIVATE CREDIT ACC	INC/LOSS	K-1
PER BOOK		DESCRIPTION	DESC
EXPENSES			

NET	INVESTMENT	INCOME		201. 106,543.		
AND	EXPENSES	PER BOOKS	06	113,201.	ī	
			ACC	S F	LP	

REVENUE AND

SONSCOPE FOUNDATION

## - OTHER PROFESSIONAL FEES FORM 990PF, PART I

	REVENUE	•
	AND	NET
	EXPENSES	INVESTMEN
DESCRIPTION	PER BOOKS	INCOME
THIST THEMS WANT AND SECTION OF THE	077 501	7 001
INVESTIGAT FRANKGEITENI SENVICES	.011,021	1621

INVESTMENT INCOME	123,778.	123,778.
EXPENSES PER BOOKS	123,778.	123,778.
	NAGEMENT SERVICES	TOTALS
	N	

٠.

ATTACHMENT 3

### FORM 990PF, PART I - TAXES

REVENUE AND EXPENSES PER BOOKS

DESCRIPTION

990-PF ESTIMATED TAX FOR 2019

4,600.

TOTALS

4,600.

SONSCOPE FOUNDATION

ATTACHMENT 4

### OTHER EXPENSES FORM 990PF, PART I

		CHARITABLE	PURPOSES	12,500.				-	25.	L	12, 323.
			INCOME			20,583.				000	114,139.
REVENUE	AND	EXPENSES	PER BOOKS	12,500.	100.	20,583.	58,741.	36,439.	25.	0000000	120,300.
			DESCRIPTION	ADMINISTRATIVE FEES	BANK CHARGES	K-1 EXP ICAPITAL PRIVATE CREDI	K-1 EXP RESOLUTE CAPITAL PARTN	K-1 EXP SOVEREIGN'S CAPITAL	STATE OR LOCAL FILING FEES	C F KECE	CTALO.

ATTACHMENT 5

FORM 990PF, PART II - CORPORATE STOCK

ENDING	472,312. 168,407. 592,010. 704,760. 206,655. 495,478. 342,079. 342,079. 342,079. 342,079. 342,079. 342,079. 342,041. 333,7441. 333,525. 505,448. 117,386. 686,757.
ENDING BOOK VALUE	389,712. 146,731. 335,925. 204,815. 251,428. 343,739. 231,739. 271,959. 332,272. 332,279. 333,257. 356,312. 356,312. 356,312. 356,312. 356,312. 356,312. 356,312. 356,312. 315,992. 315,992. 315,300. 104,989. 215,356.
DESCRIPTION	ADVANCE AUTO PARTS INC ALIBABA GROUP HOLDING LTD ALPHABET INC CL A APPLE INC BANK NEW YORK MELLON CORP COM BANK OF AMERICA CORP CITIGROUP INC COMCAST CORP DIAMOND HILL LONG SHORT FUND C DOLLAR TREE INC HONEYWELL INTL ISHARES BARCLAYS CMBS BOND ISHARES BARCLAYS WS AGGREGATE ISHARES BARCLAYS US AGGREGATE ISHARES BARCLAYS US AGGREGATE ISHARES BARCLAYS US AGGREGATE ISHARES LEHMAN INTERMDTE CREDI ISHARES LEHMAN INTERMDTE CREDI ISHARES S&P U.S. PREFERRED STO ISHARES S&P U.S. PREFERRED STO ISHARES SUSSELL 2000 ISHARES SHORT TERM CORPORATE B ISHARES TRUST MSCI EAFE INDEX ISHARES TRUST MSCI EAFE INDEX ISHARES TRUST RUSSELL 2000 VAL ISHARES TRUST RUSSELL 2000 VAL ISHARES TRUST RUSSELL 2000 VAL ISHARES LEHMAN 7-10YR JD.COM, INC MCDONALD'S CORP MICROSOFT CORP

ATTACHMENT 5

SONSCOPE FOUNDATION

## ATTACHMENT 5 (CONT'D)

TOCK
CORPORATE S
- II
PART
990PF,
FORM

ENDING BOOK VALUE FMV	3. 562, 2. 458,	87,976. 102,21	81,276. 57,955. 354,14	28,162. 328,62 67,270. 280,01	26,914. 467,37 82,258. 306,24	7,645. 133,5 4,499. 471,8	,773,413.
. ENOR							12
DESCRIPTION	-	ALTO NETWORKS INC		SPDR BLOOMBERG BARCLAYS HYB ET SPDR NUVEEN BARCLAYS CAPITAL M	SPDR S&P BIOTECH ETF UNDISCOVERED MANAGERS BEHAVIOR	UNITED TECHNOLOGIES CORP YUM CHINA HOLDINGS INC	TOTALS

ATTACHMENT 6

BONDS	
CORPORATE	
ı	1
ĭ	ŀ
PART	
<b>C</b>	$\ $
990PF	

ENDING BOOK VALUE	130,845. 140,560. 134,168. 127,550. 131,373.	
DESCRIPTION	BANK OF NOVA SCOTIA BOND - 2.8 BEST BUY INC NT - 5.500% - 03/ BLOCK FINANCIAL - 4.125% - 10/ HEWLETT-PACKARD CO - 4.650% - ORACLE CORP NOTE CALL - 1.900% TOTAL FINA ELF S.A - 2.750% -	

ATTACHMENT 6

INVESTMENTS
OTHER
F
- II
H

ENDING BOOK VALUE	513,759. 453,209. 162,732.
	CCESS FUND - LP
	ATE CREDIT AC FAL PARTNERS APITAL III, 1
DESCRIPTION	ICAPITAL PRIVATE CREDIT ACCESS RESOLUTE CAPITAL PARTNERS FUND SOVEREIGN'S CAPITAL III, LP

TOTALS

546,359. / 503,983. 165,675.	1,216,017.
513,759. 453,209. 162,732.	1,129,700.

ENDING

ATTACHMENT 7

SONSCOPE FOUNDATION

FORM 990-PF - PART IV
CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

Kınd of F		NS AND LO	Descr			P 00 C	Date acquired	Date sold
Gross sale price less expenses of sale	Depreciation allowed/ allowable	Cost or other basis	FMV as of 12/31/69	Adj. basis as of 12/31/69	Excess of FMV over adj basis		Gain or (loss)	
2,598,281.	allowable	PUBLICLY-TRA 3,475,202.	ADED SECURIT	TIES			-876,921.	
		PASSTINOGII	KI CALITAD	CAIN, (BOSS)	,		10,145.	
OTAL GAIN(L	oss)				••••		-866,776.	•
								-
							• • •	
-								
								•
								-
•							,	
•		,		,	•	-		
							,	
						-		•
•								

2019 FORM 990-PF 46-4239579 ATTACHMENT 8

FORM 990PF, PART VII-A -DISTRIBUTION TO A DONOR ADVISED FUND FOR QUALIFYING DISTRIBUTION

DONOR ADVISED FUND STMT

DURING THE TAXABLE YEAR ENDING DECEMBER 31, 2019, THE FOUNDATION TREATED A DISTRIBUTION TO A DONOR ADVISED FUND OVER WHICH THE FOUNDATION (OR DISQUALIFIED PERSON) HAD ADVISORY PRIVILEGES AS A OUALIFYING DISTRIBUTION.

FORM 990PF, PART VII-A -DISTRIBUTION TO A DONOR ADVISED FUND FOR SECTION 170 C 2B

DONOR ADVISED FUND STMT

DONOR ADVISED FUNDS ARE EXEMPT UNDER INTERNAL REVENUE CODE SECTION

501 (C) (3), MUST BE ORGANIZED AND OPERATED EXCLUSIVELY FOR ONE OR MORE

OF THE CHARITABLE PURPOSES DESCRIBED IN INTERNAL REVENUE CODE SECTION

170 (C) (2) (B), AND HAVE SOLE DISCRETION OVER THE FUNDS DISTRIBUTED TO

THEM. CONSEQUENTLY, ALTHOUGH THE FOUNDATION IS NOT IN A POSITION TO

EXPLAIN PRECISELY HOW THE FUNDS WILL BE EXPENDED, THE FUNDS ARE

REQUIRED TO BE USED TO ACCOMPLISH A PURPOSE DESCRIBED IN SECTION

170 (C) (2) (B), AS DETERMINED AT THE DISCRETION OF THE DONOR ADVISED

FUND.

.	•		
ATTACHMENT 10	EXPENSE ACCT AND OTHER ALLOWANCES		0
ATTACI	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	Ö	0.
	COMPENSATION	·	0
ERS, DIRECTORS, AND TRUSTEES	TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	PRES, DIR, SEC, TREAS 1.00	GRAND TOTALS
FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES	NAME AND ADDRESS	BEN FISCHER FOUNDATION SOURCE 501 SILVERSIDE RD WILMINGTON, DE 19809-1377	

ÁTTACHMENT 10

2019 FORM 990-PF SONSCOPE FOUNDATION 46-4239579 '

### 990PF, PART VIII- COMPENSATION OF THE FIVE HIGHEST PAID PROFESSIONALS

	ATTACH	IMENT 11
NAME AND ADDRESS	TYPE OF SERVICE	COMPENSATION
UBS FINANCIAL SERVICES 7700 WISCONSIN AVE., SUITE 300 BETHESDA, MD 20814	INVESTMENT MGMT	121,336.
TOTAL	COMPENSATION	121,336.

ATTACHMENT 12

SONSCOPE FOUNDATION

FORM 990PE, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

SONSCOPE FOUNDATION

ATTACHMENT 12 (CONT'D)

FORM 990PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

FERIAN OF THE VAIL VALLEY MINISTRIES INC PRINGS LN STE 1923 AST INC 37403 37403 S, CO 80920 FANOOGA PREP INC	FOUNDATION STATUS OF RECIPIENT	GENERAL & UNRESTRICTED  GENERAL & UNRESTRICTED  GENERAL & UNRESTRICTED  GENERAL & UNRESTRICTED  GENERAL & UNRESTRICTED	12,000 10,000 10,000 13,000
1802 BAILEY AVE  CHATTANOOGA, TN 37404  HIINGA  971 COPPERSTONE LN  FORT MILL, SC 29708  . PC		GENERAL & UNRESTRICTED	10,000

46-4239579

FORM 990PE, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

ATTACHMENT 12 (CONT'D)

	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR		•
	AND		
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
HOPE INTERNATIONAL	N/A	GENERAL & UNRESTRICTED	180,000.
227 GRANITE RUN DR STE 250	PC		
LANCASTER, PA 17601			
IMPACT AFRICA INC	N/A	GENERAL & UNRESTRICTED	4,500
PO BOX 702511	PC		
SAINT CLOUD, FL 34770			
LIFEWATER INC	N/A	GENERAL & UNRESTRICTED	15,000
P O BOX 3131	P.C.		
SAN LUIS OBISPO, CA 93403			
OUTFITTERS FOR CHRIST	Z/A	GENERAL & UNRESTRICTED	5,000.
PO BOX 140	೭		
YAMPA, CO 80483			
SIGNAL MOUNTAIN CHRISTIAN SCHOOL INC	N/A	GENERAL & UNRESTRICTED	9,000
808 KEY HULSE RD	PC		
SIGNAL MIN, TN 37377			
SIGNAL MOUNTAIN PRESBYTERIAN CHURCH	«/z	GENERAL & UNRESTRICTED	55,000
612 JAMES BLVD	. D		
SIGNAL MTN, TN 37377	•		
· · · · · · · · · · · · · · · · · · ·			

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46-4239579

SONSCOPE FOUNDATION

10,000 31,500 250,000 30,000 ATTACHMENT 12 (CONT'D) AMOUNT PURPOSE OF GRANT OR CONTRIBUTION GENERAL & UNRESTRICTED GENERAL & UNRESTRICTED GENERAL & UNRESTRICTED THE BAYLOR FUND RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR FOUNDATION STATUS OF RECIPIENT FORM 990PE, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR N/A PC N/A PC N/A PC N/A S. TRUSTBRIDGE GLOBAL FOUNDATION USA INC RECIPIENT NAME AND ADDRESS 1901 ULMERTON RD STE 400 CHATTANOOGA, TN 37405 CLEARWATER, FL 33762 171 BAYLOR SCHOOL RD PRESCOTT, AZ 86304 WHEATON, IL 60189 THE BAYLOR SCHOOL SINAPIS GROUP PO BOX 70065 PO BOX 5414 YOUNG LIFE

TOTAL CONTRIBUTIONS PAID

867,000

ATTACHMENT 12

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