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, (n	a	17		
Form	J	y	U	-	F

Return of Private Foundation

or Section 4947(a)(1) Nonexempt Charitable Trust
Treated as a Private Foundation
tion may be able to use a copy of this return to satisfy state ref

OMB No 1545-0052 2005

_		evenue Se						inis return to satisfy sta					
_				or tax year begi			լօ/	1	5, ar	nd ending		<u>)9/30/</u>	
G	Che	ck all t	hat apply	Initial retur	n	Final return	<u> </u>	Amended return		Address	change		Name change
			Name of org	ganızatıon							A Employe	r identific	ation number
ι	Jse th	e IRS											
	lab	el.	THE BRUN	NS FOUNDATION	ON						13-7	22524	13
(Other	wise,				er if mail is not deliver	red to	o street address)	Roo	m/suite	B Telephor	ne numbe	r (see page 10 of
	pro	nt		S ASSOCIATE				,			the instri	uctions)	
	or ty	•			э, ш				11	דכו זות	/21/		0000
		pecific		L STREET , state, and ZIP co					11	TH FL.	nption applicat		0-0800
ŀ	nstruc	ctions.	City or town	, state, and zir co	ue					pendii	ng, check here	• • • •	· · · · []
			ł								eign organizati		• —
_				K, NY 10005							eign organizati 6 test, check he		
ዞ	_					(c)(3) exempt priva					nputation		
\perp	<u>s</u>	ection 4	4947(a)(1) no	nexempt charitable	trust	Other taxable	e pri	vate foundation		J E If DEN	ate foundation	status was	terminated
1	Fair	marke	et value of al	l assets at end	J Acco	unting method 🔀	<u>د</u> ا Ca	ash Accrual			section 507(b)		
	of y	ear (fro	m Part II, co	l (c), line		Other (specify))			F If the	foundation is i	n a 60-mon	th termination
	16)	▶ \$	94	48,400.	(Part I,	, column (d) must b	e or	n cash basis)			section 507(b)		1 1
P	art l	Analy		nue and Expens	ses		.		T			(d) Di	sbursements
		The t	otal of amoun	ts in columns (b), (c), and	(a)-Revenue-and expenses per		·····(b)-Net-investment-	_	~(c)~Adjust			charitable
				arily equal the amo ge 11 of the instruc		books		income		incor	ne //A	•	urposes
7							$\frac{1}{2}$		+		VICT	(casi	n basis only)
-	1		If the f	etc , received (attach sch foundation is not regi		2,70	ا. سر	· · · · · · · · · · · · · · · · · · ·					
1	2	Check	attach	Sch B									
- {	3		-	temporary cash inve					_		-		
	4	Divide	nds and intere	est from securities		32,81	LO.	32,810					STMT 1
	5 a	Gross	rents						4_				
	b	Net ren	tal income or (lo	oss)									
ē				sale of assets not on	line 10	Non	ıε						-,
Revenue	Ö		sales price for all on line 6a										
ě	7	Capita	l gain net inco	ome (from Part IV,	line 2).			NONE	-				
~	8	Net sh	ort-term capit	algaın									-
	9	Income	e modification	ıs • • • • • • •					T			,`	r
	10 a	Gross sa	ales less returns swances	: 1				•:	. 177	redressed to f	w : ~ .	12	,
	b		ost of goods sole										
			•) (attach schedule)							4 4 5 2	1	• .
ı	11			h schedule)				* * , * ,, ,,			Acres 100		
	12			rough 11			10	32,810			4		
	13			ers, directors, trustees		1	ONE			- N0	V 1 0 2 (1 10	
	14			aries and wages .			2111		1			- Color	•
es	15			loyee benefits					+	***	AL KEVENUE S MANTICARE	KALL	<u> </u>
su:									+		N . 662 e		
Expenses				chedule)					\dashv				
				tach schedule)				`	+		- : - : - : - : - : - : - : - : - : - :	• • •	
Ę				ees (attach schedu			-		+			-	· · · · · · · · · · · · · · · · · · ·
Administrative	17					J			_			<u>-</u>	
nis	18	•	•) (see page 14 of the insi	•	5,20	. برر	NON	E				
Ē	19	•	,	n schedule) and de	•								
Ad	20										_		
and /	21			, and meetings					\bot				
a	22	Printin	g and publica	itions									
Operating	23	Other	expenses (atta	ach schedule)									
rat	24	Total	perating and	d administrative ex	penses		ļ						
þ		Add lir	nes 13 throug	h 23		5,20	<u>oo</u> .	NONNON	ΙE				
0	25			grants paid		82,72							82,725
	26			rsements Add lines 2		87,92	1	NON	ΙE				82,725
	27		ct line 26 from						\neg				,_,,,,,,
				xpenses and disbursem	ents	-52,41	15						
	1			ome (if negative, e				32,810	, [
				e (if negative, ente	-						-0-		

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

**STMT 2

Form 990-PF (2005)

5E1410 2 000

P	art II	Attached schedules and amounts in the description column should be for	Beginning of year	<u>E</u>	nd of	year
		end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value		(c) Fair Market Value
	1	Cash - non-interest-bearing				23,341.
	2		NONE	2,86	2.	2,862.
	3	Accounts receivable				
		Less allowance for doubtful accounts ▶				· · · · · · · · · · · · · · · · · · ·
	4	Pledges receivable ▶				
		Less allowance for doubtful accounts ▶				
	5	Grants receivable				
	6	Receivables due from officers, directors, trustees, and other				
		disqualified persons (attach schedule) (see page 15 of the instructions)				
	7	Other notes and loans receivable (attach schedule)				
		Less allowance for doubtful accounts ▶			ŀ	
اي	8	Inventories for sale or use				· · · · · · · · · · · · · · · · · · ·
ssets	9	Prepaid expenses and deferred charges				
Ass	10 a	Investments - U S and state government obligations (attach schedule)				
		Investments - corporate stock (attach schedule), STMT, 3.	1.002.238	948.19	R	922 197
		Investments - corporate bonds (attach schedule)		310,13	- 	<u> </u>
	11 Ĭ				-	
		Investments - land, buildings, and equipment basis Less accumulated depreciation (attach schedule)				
	4.0	(attach schedule)			\dashv	
- 1	12 13	Investments - mortgage loans			\dashv	
	14	Investments - other (attach schedule)				
		equipment basis Less accumulated depreciation	-			
		Land, buildings, and equipment basis Less accumulated depreciation (attach schedule)				
- 1	15	Other assets (describe >/			\dashv	
	16	Total assets (to be completed by all filers - see page 16 of				
\dashv		the instructions Also, see page 1, item I)		974,40	1.↓	948,400.
- 1	17	Accounts payable and accrued expenses			_	
	18	Grants payable				
.≝∣	19	Deferred revenue				
ij.	20	Loans from officers, directors, trustees, and other disqualified persons .			_	
ja	21	Mortgages and other notes payable (attach schedule)				
_	22	Other liabilities (describe	·		_	
_	23	Total liabilities (add lines 17 through 22) · · · · · · · ·		··· · · · · · · · · · · · · · · · · ·	_	
l		Organizations that follow SFAS 117, check here ▶			İ	
اي		and complete lines 24 through 26 and lines 30 and 31.				
ő	24	Unrestricted				
盲	25	Temporarily restricted				
Fund Balanc	26	Permanently restricted · · · · · · · · · · · · · · · · · · ·				
밀		Organizations that do not follow SFAS 117,				
리		check here and complete lines 27 through 31. $\blacktriangleright x$				
	27	Capital stock, trust principal, or current funds	1,026,816.	974,40	1.	
ş	28	Paid-in or capital surplus, or land, bldg, and equipment fund				
Assets	29	Retained earnings, accumulated income, endowment, or other funds	NONE	NC	NE	
Z	30	Total net assets or fund balances (see page 17 of the				
Net		instructions)	1,026,816.	974,40	1.	
	31	Total liabilities and net assets/fund balances(see page 17 of				
		the instructions)	1,026,816.	974,40)1.	
E	art l				<u></u>	
_	Tota	I not accept or fund belonged at harmonic of the Color		4 a a a a a u u u u		
1		Il net assets or fund balances at beginning of year - Part II,				
		of-year figure reported on prior year's return)			1	1,026,816.
2	Ente	er amount from Part I, line 27a		· · · · · ·	2	-52,415.
3	Othe	er increases not included in line 2 (itemize)			3	
4	Add	lines 1, 2, and 3			4	974,401.
5	Dec	reases not included in line 2 (itemize) ▶			5	
6_	Tota	I net assets or fund balances at end of year (line 4 minus l	ine 5) - Part II, column (b),	line 30	6	974,401.

Form 990-PF (2005)

Part IV Capital Gains	s and Losses for Tax on Inve	estment Income			
(a) List an 2-story b	d describe the kind(s) of property sold (irick warehouse, or common stock, 200	e g,real estate, shs MLC Co)	(b) How acquired P-Purchase D-Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1a NONE					
b					
С					
d					
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) mini	
a					
b					
c					
d					
e					
Complete only for assets s	showing gain in column (h) and own	ed by the foundation on 12/31/69		Gains (Col (h) g	
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (ı) over col (j), ıf any	col	(k), but not less Losses (from co	•
.a					
b					
C					
d	_				
e					
2 Capital gain net income of		gain, also enter in Part I, line 7 (loss), enter -0- in Part I, line 7	2		NA
	n or (loss) as defined in sections 12	• •			1 1
	, line 8, column (c) (see pages 13	1]		1.
•			3		V
Part V Qualification II	nder Section 4940(e) for Redu	iced Tax on Net Investment Inc	come		
	, leave this part blank or the section 4942 tax on the distr es not qualify under section 4940(e		base pe	rıod?	Yes X N
1 Enter the appropriate am	nount in each column for each year	, see page 18 of the instructions b	efore ma	king any entrie	s
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of nonchantable-use assets		(d) Distribution i (col (b) divided b	
2004	79,000.	1,024,148.			713728875
2003	127,500.	1,030,433.			373439127
2002	53,015.	962,731.			06730333
2001	197,015.	1,043,793.			374911022
2000	91,030.	961,929.			163276396
2 Total of line 1, column (d	1)		2	0.539	932085753
· · · · · · · · · · · · · · · · · · ·	o for the 5-year base period - divide			3.00	
_	foundation has been in existence if		3	0.10	786417151
the number of years the	Touridation has been in existence in	rest traine yours	 	- 0.10	, 00117101
4 Enter the net value of no	ncharitable-use assets for 2005 fro	om Part X, line 5	4	.	979,849
5 Multiply line 4 by line 3			5		105,691
6 Enter 1% of net investme	ent income (1% of Part I, line 27b)		6		328
7 Add lines 5 and 6			7		106,019
	ons from Part XII, line 4			····	82,725
	t 7	d complete that part using a 1% tax rate. See	the Part VI	instructions on pag	e 18

Par	t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see	page 18 of	he ins	tructio	ns)
1 a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1				
	Date of ruling letter (attach copy of ruling letter if necessary - see instructions)	1			
b	Domestic organizations that meet the section 4940(e) requirements in Part V, check	1		(<u>656</u> .
	here and enter 1% of Part I, line 27b				
С	All other domestic organizations 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-)	2			
3	Add lines 1 and 2	3			<u>656</u> .
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	4]	<u>NONE</u>
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5			<u>656.</u>
6	Credits/Payments	:			
a	2005 estimated tax payments and 2004 overpayment credited to 2005 6a 5,203.				
ь	Exempt foreign organizations - tax withheld at source 6b NONE				
С	Tax paid with application for extension of time to file (Form 8868) 6c NONE				
d	Backup withholding erroneously withheld				
7	Total credits and payments Add lines 6a through 6d	7		5,	203.
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, enteramount owed	9			
10	Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10		4,	547.
11	Enter the amount of line 10 to be Credited to 2006 estimated tax ► 4,547. Refunded ►				
Par	t VII-A Statements Regarding Activities				
1 a	During the tax year, did the organization attempt to influence any national, state, or local legislation or did			Yes	No
	It participate or intervene in any political campaign?		1a		<u> </u>
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page				l
	19 of the instructions for definition)?		1b		<u> </u>
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials				Į
	published or distributed by the organization in connection with the activities				į
С	Did the organization file Form 1120-POL for this year?	. .	1c		<u> x</u>
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year				ĺ
	(1) On the organization ►\$ NONE (2) On organization managers ►\$ NO	NE_			
е	Enter the reimbursement (if any) paid by the organization during the year for political expenditure tax imposed				
	on organization managers \$ NONE				
2	Has the organization engaged in any activities that have not previously been reported to the IRS?		2		<u>x</u>
	If "Yes," attach a detailed description of the activities				
3	Has the organization made any changes, not previously reported to the IRS, in its governing instrument, articles				ĺ
	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	. .	3		X
4 a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		4 a		<u>X</u>
ь	If "Yes," has it filed a tax return onForm 990-T for this year?		4b	N	/A_
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?				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				l
	By language in the governing instrument, or				1
	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 organization have at least \$5,000 in assets at any time during the year If "Yes," complete Part II, col (c), a	and Part XV	. 7	Х	L
8 a	Enter the states to which the foundation reports or with which it is registered (see page 19 of the				
	instructions) ▶ IL ₁		_		
b	If the answer is "Yes" to line 7, has the organization furnished a copy of Form 990-PF to the Attorney				1
	General (or designate) of each state as required by General Instruction G? If "No," attach explanation		. 8ь	Х	
9	Is the organization claiming status as a private operating foundation within the meaning of section 4942(j)(3)				
	or 4942(j)(5) for calendar year 2005 or the taxable year beginning in 2005 (see instructions for Part XIV on				
	page 26)? If "Yes," complete Part XIV		. 9		X
10	Did any persons become substantial contributors during the tax year?If "Yes," attach a schedule listing their names and				X
11	Did the organization comply with the public inspection requirements for its annual returns and exemption applic	ation?	11	х	
	Web site address ►N/A				
12	The books are in care of ▶ BCRS_ASSOCIATES, LLC Telephone no ▶	212 440-	0800		
	Located at ▶ 100 WALL STREET, 11TH FL. NEW YORK, NY ZIP+4 ▶ 100	05			
13	Located at ▶ 100 WALL STREET, 11TH FL. NEW YORK, NY ZIP+4 ▶ 100 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here	N/A)	▶ []
	and enter the amount of tax-exempt interest received or accrued during the year		-orm 99		
			00	A DE	100051

Par	1 VIES Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year did the organization (either directly or indirectly)	1		
	(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)			İ
	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?			
	(5) Transfer any income or assets to a disqualified person (or make any of either available			ļ
	for the benefit or use of a disqualified person)?		l	ĺ
	(6) Agree to pay money or property to a government official? Exception. Check "No"			
	If the organization 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), didany of the acts fail to qualify under the exceptions described in Regulations			
þ	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)? • • • • • • • • • • • • • • • • • • •	1ь	N	Α
		1	 	
_	Organizations relying on a current notice regarding disaster assistance check here			l
С	Did the organization engage in a prior year in any of the acts described in 1a, other than excepted acts,	1c	N/	Δ
^	that were not corrected before the first day of the tax year beginning in 2005?	1.5	 	
2	Taxes on failure to distribute income (section 4942) (does not apply for years the organization was a private			
	operating-foundation defined in section 4942(j)(3) or 4942(j)(5))—————————————————————————————————			,, <u>.</u>
а	At the end of tax year 2005, did the organization have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2005?			i
	If "Yes," list the years As the second of the day 22 for which the appropriate year to be a second of the day (0.42(a)(2))			
b	Are there any years listed in 2a for which the organization isnot applying the provisions of section 4942(a)(2)			1
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2)	2 b	N/	7
_	to all years listed, answer "No" and attach statement - see page 20 of the instructions)		 " /	^
С	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 organization hold more than a 2% direct or indirect interest in any business	į		
Ja	· · · · · · · · · · · · · · · · · · ·	i		
.	enterprise at any time during the year?			
ь				
	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, o(3)	1		
	the lapse of the 10-, 15-, or 20-year first phase holding period?(Use Schedule C, Form 4720, to determine If the organization had excess business holdings in 2005)	3 Ь	N	Δ
4a	Did the organization invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	"1	x
b	Did the organization make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable	· · · · ·		
b	purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2005?	4b		x
5 2	During the year did the organization pay or incur any amount to			
va	(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? Yes X No			1
	(2) Influence the outcome of any specific public election (see section 4955), or to carry			
	on, directly or indirectly, any voter registration drive?			
	(3) Provide a grant to an individual for travel, study, or other similar purposes?			İ
	(4) Provide a grant to an organization other than a charitable, etc., organization described			
	in section 509(a)(1), (2), or (3), or section 4940(d)(2)?	1		
	(5) Provide for any purpose other than religious, charitable, scientific, literary, or			}
	educational purposes, or for the prevention of cruelty to children or animals?			
ь	If any answer is "Yes" to 5a(1)-(5), didany of the transactions fail to qualify under the exceptions described in		'	
	Regulations section 53 4945 or in a current notice regarding disaster assistance (see page 20 of the instructions)?	5 b	N/	Į _Α
	Organizations relying on a current notice regarding disaster assistance check here		T	
С	If the answer is "Yes" to question 5a(4), does the organization claim exemption from the			
-	tax because it maintained expenditure responsibility for the grant?			
	If "Yes," attach the statement required by Regulations section 53 4945-5(d)			
6 a	Did the organization, during the year, receive any funds, directly or indirectly, to pay			
	premiums on a personal benefit contract?		1	
b	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	6 b	1	х
	If you answered "Yes" to 6b. also file Form 8870.		T	1

Form 990-PF (2005)		13-72		Page 6
Part VIII Information About Officers, Directors and Contractors	s, Trustees, Foun	dation Managers,	Highly Paid Emplo	yees,
1 List all officers, directors, trustees, foundation n	nanagers and their	compensation (see	page 21 of the instr	uctions).
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (if not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
SEE STATEMENT 4		NONE	NONE	NONE
	-			
	-			
2 Compensation of five highest-paid employees (or If none, enter "NONE."	ther than those inc	luded on line 1 - se	e page 21 of the ins	tructions).
(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE	<u> </u>	NONE	NONE	NONE
Total number of other employees paid over \$50,000 .				▶ NONE
3 Five highest-paid independent contractors for pr				
"NONE." (a) Name and address of each person paid more that	n \$50,000	(b) Tvr	pe of service	(c) Compensation
NONE		(-),,,		(e) componential
				NON1
			·	
Total number of others receiving over \$50,000 for profe	essional services	<u> </u>		▶ NONE
Part IX-A Summary of Direct Charitable Activity	ties			
List the foundation's four largest direct charitable activities during the of organizations and other beneficiaries served, conferences convened.			uch as the number	Expenses
1 PLEASE NOTE, THE FOUNDATION IS NOT CHARITABLE ACTIVITIES. ITS PRIMARY				
CONTRIBUTIONS OTHER ORGANIZATIONS				NON
2 REVENUE CODE SECTION 501(C)(3).				
3				
*				
				5 900 PE (0005)

526W.

	990-PF (2005) 13-7225243		Page 7
Par	t IX-B Summary of Program-Related Investments (see page 22 of the instructions)		
Des	scribe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2		Amount
1 _	N/A		
_			
_			NONE
2	N/A		
_			
-			NONE
All	other program-related investments. See page 22 of the instructions		NONE
3	N/A		
		I	
			NONE
Tota	I. Add lines 1 through 3	. ▶	NONE
Par	Minimum Investment Return (All domestic foundations must complete this part. Forei	an found	ations
	see page 22 of the instructions.)	giriodila	auono,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.		
	purposes		
		1a	075 504
h	Average of monthly cash balances	1b	975,584.
_ <u></u>	Average of monthly cash balances Fair market value of all other assets (see page 23 of the instructions)		19,187
ا س	Tatel (add lines 10 b, and a)	1c	NONE
u	Total (add lines 1a, b, and c) Reduction claimed for blockage or other factors reported on lines 1a and	1 d	994,771.
	· · · · · · · · · · · · · · · · · · ·		
2	1c (attach detailed explanation) 1e		
3	Acquisition indebtedness applicable to line 1 assets	2	NONE
3 4	Subtract line 2 from line 1d Cash deemed held for charitable activities. Enter 11/2 % of line 3 (for greater amount, see page 23	3	994,771.
_	of the instructions)	4	14,922.
	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	979,849.
6	Minimum investment return. Enter 5% of line 5	6	48,992.
Par	Distributable Amount (see page 23 of the instructions) (Section 4942(j)(3) and (j)(5) private the section of the page 23 of the instructions) (Section 4942(j)(3) and (j)(5) private the section of the page 23 of the instructions) (Section 4942(j)(3) and (j)(5) private the section of the page 23 of the instructions) (Section 4942(j)(3) and (j)(5) private the section of the page 23 of the instructions) (Section 4942(j)(3) and (j)(5) private the section of the page 23 of the instructions) (Section 4942(j)(3) and (j)(5) private the section of the page 23 of the instructions) (Section 4942(j)(3) and (j)(5) private the section of the page 23 of the instructions) (Section 4942(j)(3) and (j)(5) private the section of the page 23 of the instructions) (Section 4942(j)(3) and (j)(5) private the section of the page 23 of the instructions) (Section 4942(j)(3) and (j)(5) private the section of the page 23 of	ate operati	ng
	and do not complete this	oaπ)	
	Minimum investment return from Part X, line 6	1	48,992.
2 a	Tax on investment income for 2005 from Part VI, line 5		
	Income tax for 2005 (This does not include the tax from Part VI) 2b		
	Add lines 2a and 2b	2c	656.
	Distributable amount before adjustments Subtract line 2c from line 1	3	48,336.
	Recoveries of amounts treated as qualifying distributions	4	· · · · · · · · · · · · · · · · · · ·
5	Add lines 3 and 4	5	48,336.
6	Deduction from distributable amount (see page 24 of the instructions)	6	
	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1	7	48,336.
Pai	t XII Qualifying Distributions (see page 24 of the instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
а	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	82,725.
b	Program-related investments - total from Part IX-B	1b	NONE
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc ,	1 1	
	purposes	2	NONE
3	Amounts set aside for specific charitable projects that satisfy the		
a	Suitability test (prior IRS approval required)	3 a	NONE
b	Cash distribution test (attach the required schedule)	3 b	NONE
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	82,725.
5	Organizations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	income Enter 1% of Part I, line 27b (see page 24 of the instructions)	5	N/A
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	82,725.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating wi	ether the	foundation
	qualifies for the section 4940(e) reduction of tax in those years		

Part XIII Undistributed Income (see page 24 of the instructions)

1	Distributable amount for 2005 from Part XI,	(a) Corpus	(b) Years prior to 2004	(c) 2004	(d) 2005
•	line 7		, , , , , , , , , , , , , , , , , , ,	2004	48,336
2	Undistributed income, if any, as of the end of 2004				40,330
_	Enter amount for 2004 only			NONE	
	Total for prior years		·	700100	
3	Excess distributions carryover, if any, to 2005				
	From 2000				
- Ь				Ì	
-	From 2002 6,096.				
d	From 2003				
_	From 2004				
	Total of lines 3a through e	321,400.			
4	Qualifying distributions for 2005 from Part	321,400.			
•	XII, line 4 ▶\$ 82,725.				
а	Applied to 2004, but not more than line 2a				
0-	-Applied-to-undistributed-income-of-prior-years (Election required - see page 25 of the instructions)	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
	Treated as distributions out of corpus (Election required - see page 25 of the instructions)				
	Applied to 2005 distributable amount				48,336
	Remaining amount distributed out of corpus	34,389.			
5	Excess distributions carryover applied to 2005 (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 line 5	355,789.			
b	Prior years' undistributed income Subtract				
	line 4b from line 2b				
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 page 25 of the instructions				
e	Undistributed income for 2004 Subtract line 4a from line 2a Taxable amount - see page				
	25 of the instructions			NONE	· · · · · · · · · · · · · · · · · · ·
f	Undistributed income for 2005 Subtract		ļ		
	lines 4d and 5 from line 1. This amount must				_
7	be distributed in 2006 Amounts treated as distributions out of				NONE
•	corpus to satisfy requirements imposed by		ļ		
	section 170(b)(1)(E) or 4942(g)(3) (see page	.,			
8	25 of the instructions)	NONE			··- · ·
•	applied on line 5 or line 7 (see page 25 of				
	the instructions)	59,812.			
9	Excess distributions carryover to 2006.	005 055	,	į	
	Subtract lines 7 and 8 from line 6a	295,977.			
	Analysis of line 9		Į	į	
	Excess from 2001			j	
	Excess from 2002 6, 096.				
	Excess from 2003				
	Excess from 2004 32, 692 . Excess from 2005 34, 389 .		İ		
	Excess from 2005	<u> </u>			5 000 DE

Form **990-PF** (2005)

	n 990-PF (2005)			13-7	225243	Page 9
Pa	rt XIV' Private Oper	rating Foundations	(see page 26 of the	instructions and Pa	rt VII-A, question 9)	NOT APPLICABLE
1 a	If the foundation has rec	eived a ruling or determi	nation letter that it is a pr	ıvate operatıng		
	foundation, and the ruling	g is effective for 2005, e	nter the date of the ruling		. •	
b	Check box to indicate wh	ether the organization is	a private operating four	dation described in section	on 4942(j)(3) or	4942(j)(5)
2 -	5-1 the leave of the	Tax year		Prior 3 years		
2 a	Enter the lesser of the adjusted net income from	(a) 2005	(b) 2004	(c) 2003	(d) 2002	(e) Total
	Part I or the minimum			<u> </u>		
	investment return from Part X for each year listed					
ь	85% of line 2a					
c	Qualifying distributions from Part					
·	XII, line 4 for each year listed					
d	Amounts included in line 2c not used directly for active conduct					
е	of exempt activities					
_	directly for active conduct of					
	exempt activities Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the			<u> </u>		
_	alternative test relied upon			1		
а	"Assets" alternative test - enter					
	(1) Value of all assets (2) Value of assets qualifying					
	under section		-	-		
b	4942(j)(3)(B)(i)			,		
_	enter 2/3 of minimum invest-					
	ment return shown in Part X,					
_	line 6 for each year listed		<u> </u>			
С	"Support" alternative test - enter (1) Total support other than					
	gross investment income			•		
	(interest, dividends, rents, payments on securities			•		
	loans (section 512(a)(5)),					
	or royalties)					
	(2) Support from general public and 5 or more					
	exempt organizations as provided in section 4942					
	(j)(3)(B)(III)				 	
	(3) Largest amount of sup- port from an exempt					
	organization					
	(4) Gross investment income	1 1 10	• 4 4 .			<u> </u>
Рa			omplete this part o /ear - see page 26 o		ion had \$5,000 or n	nore in
	Information Regarding			i die ilistiactions.		
' a	List any managers of	•		than 20% of the total	Looptributions room	rad by the farmulation
а	before the close of any	y tax year (but only if t	hey have contributed	more than \$5.000) (S	see section 507(d)(2)	red by the foundation
			,	, , , , , , , , , , , , , ,	, as assume, vo. (-)/ - //	•
-	SEE STATEM					
b	List any managers of					/ large portion of the
	ownership of a partner	sinp of other entity) o	i which the foundation	nas a 10% or greater	interest	
	NONE					
2	Information Regarding	Contribution Grant	Gift Loan Scholarsh	in etc Programs:		
-						
	Check here ► X If the unsolicited requests for	ne organization only or funds. If the organ	makes contributions	to preselected char	itable organizations a	and does not accept
	organizations under ot	her conditions, comple	ete items 2a. b. c. and	d	20 of the manach	ons) to individuals of
_						
а	The name, address, a		·	n applications should t	oe addressed	
	The form in which appl	EMENT ATTACK		and materials they	should include	
J	The form in which appr	neadona should be Sul	omitted and inioimallo	m and materials they	snoulu include	
	ር ድድ የመ ለመመኑ	45MW VWWVGTED				
	Any submission deadli	MENT ATTACHED		· · · · · · · · · · · · · · · · · · ·		
·	Any subinission deadin	nes				
	CEE CMAMEN	ACNO AMMACION				
	Any restrictions or li	MENT ATTACHED	such as by sacco	unhical areas sharits	ble fields kinds of	motitutions as -44
•	factors	initations on awaids	, such as by geogra	ipilical aleas, chaffa	DIE HEIUS, KINGS 01	maduuons, or other
	<u> </u>	MENT ATTACHED				
164	OUT DIVIE	I ALIACHED		 		

	ng the Year or Appr	1 1		
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	Contribution	
a Paid during the year		•		
FURNISHED UPON REQUEST				82,725
			_	
		i l		
•				
		1 1		
T-4-1		<u> </u>		
Total	T	 	▶ 3a	82,72
b Approved for future payment				
NONE				NO
		1		
	1	1		
			ĺ	
	·		▶ 3 b	NO

Form 990-PF (2005)

er gross amounts unless otherwise indicated		ated business income	Excluded by	section 512, 513, or 514	(e) Related or exempt	
Program service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income (See page 26 o the instructions	
Fees and contracts from government agencies						
embership dues and assessments						
terest on savings and temporary cash investments						
ividends and interest from securities			14	32,810.		
et rental income or (loss) from real estate						
Debt-financed property						
Not debt-financed property						
et rental income or (loss) from personal property			 			
ther investment income						
ain or (loss) from sales of assets other than inventory						
et income or (loss) from special events						
ross profit or (loss) from sales of inventory.						
her revenue a						
			-			
			 			
			 		- 	
			- 			
ubtotal Add columns (b), (d), and (e)				32,810.		
No Explain below how each activity the accomplishment of the organization.						
page 27 of the instructions.)				, , ,	, , , , , , , , , , , , , , , , , , , ,	
	_					
					 	
		_				
					· · · · · · · · · · · · · · · · · · ·	
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		·				

For	n 990-PF						3-722524					ge 12
Pa	art XVI	Information Exempt Orga		Transfers To and	Transa	ctions a	nd Relati	onships	With N	onch	arit	able
1	Dld th	e organization directly o	or indirectly eng	age in any of the following	with any o	other organ	ization descr	ibed in section	on ¦		Yes	No
	501(c) of the Code (other tha	n section 501(c)(3) organizations) or in s	ection 527,	relating to	political organ	nzations?		1	· (į
	a Trans	fers from the reporting	organization to a	a noncharitable exempt org	ganization c	of:				ļ	ļ	
	(1) C	ash , , , , , , , , , , , , ,								1a(1)		X
	(2) 0	ther assets								1a(2)	i	<u> </u>
1	b Other	transactions.							1	i	i	1
				l crganization						16(1)		<u> </u>
				e exempt organization						16(2)		Х_
				sets						16(3)		X
									L	15(4)		<u> </u>
									· · · · · · · · · · · · · · · · · · ·	15(5)		Σ
				or fundraising solicitations						16(6)		Σ.
				other assets, or paid emplo						1c		_X
•				mplete the following sched		• -	-					
		-		given by the reporting orga		_						
	receiv	·	on or snaming an	rangement, show in column	M(a) me vai	ue or the g	oogs, omer a	ssets, or ser	AICER			
(a)	Lire no	(b) Amount involved	(c) Name o	f noncharitable exempt organi	zation	(d) Desci	iption of transf	ers transactio	ns. and share	no arran	oemei	
_5=/		N/A	197113			N/A		.,	1	3	9	
_						_N/-N						
_				····								
												
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2 a		-	-	ed with, or related to, one r than section 501(c)(3)) o		•	-		۲	Yes	Γv	1
.		" complete the following	•	i ilibii secilari sorici(s)) o	i ili secuon	3211				_, 165	٠ لــ	j 140
		(a) Name of organization		(b) Type of orga	nization			c) Description	of relationsh	12		
				N/A			······································					
		· · · · · · · · · · · · · · · · · · ·		<u></u>								
	Under p	penalties of portury, I deal is trust correct, appropri	aro that I have e plete Declaration.	xamined this return, includin of preparer (other than taxpa)	g accompar ver or fiducia	nying schedu rv) is based o	des and stater on all informatio	ne∩ts, and to n of which ore	the best of oarer has am	my Kni Knowte	owiedę dau	ge and
1		1/1/1/2	. (0	<i>}</i>	,	12/50	A					
	Pa		ver je	fall		1901	100	TRUSTEE	<u></u> _			
era	7 713	nature of officer or trustee	/ 		-1	Date /		Title		011	DT(1)	
Ť	U	/ (\	12		Date		Check if		Preparer's S See Signatur	e on pa	PTIN ige 28	
Sign Here	arer's Only	Preparer's	\sim		10-1	5-2010	self-employ	ed Pij à	the instruct	ions)	_	~
S	~ c	Signature		A COOKER TO THE	1		·	EIN 5 7 7			7	
	a S	Firm's name (or yours if self-employed), address	\	ASSOCIATES, LLC	TU PT CO			EIN ▶ 13	<u>-40/81</u>	4 /		
!		and ZIP code	WEW YOU WA	ALL STREET - 117 ORK, NY	TH EFOC) N 1000	16	Phone no.	212 44	n^0	an	
			As DM T	OINIA NE		1000	, , , , , ,	, none no.		m 990		120051

13-7225243

THE BRUNS FOUNDATION

SUPPLEMENTARY STATEMENTS

PART: XV

LINE: 2

SUPPLEMENTAL INFORMATION

THE ORGANIZATION'S PRIMARY ACTIVITY IS TO SUPPORT, BY CONTRIBUTIONS, OTHER ORGANIZATIONS QUALIFYING FOR EXEMPTION UNDER SECTION 501(c)(3) OF THE INTERNAL REVENUE CODE THE TRUSTEES CHOOSE THESE ORGANIZATIONS BASED UPON THEIR KNOWLEDGE OF THE ORGANIZATIONS' ACTIVITIES NO CONTRIBUTIONS, GRANTS, GIFTS, LOANS OR SCHOLARSHIPS ARE MADE TO INDIVIDUALS THE ORGANIZATION DOES NOT PRESENTLY RECEIVE APPLICATIONS OR CONDUCT PROGRAMS FOR DONATIONS IN ITS ACTIVITIES

ITIES
SECUR
FROM
INTEREST
AND
DIVIDENDS
1
PART I
FORM 990PF,

 NET INVESTMENT	INCOME		32,810.	32,810.	
REVENUE AND EXPENSES				32,810.	
				TOTAL	
	DESCRIPTION	111111111111111111111111111111111111111	DIVIDENDS		

V05-8.1 15074001

STATEMENT

0

STATEMENT

13-7225243

V05-8.1 15074001

		<u>.</u>	
	NET INVESTMENT INCOME	NONE	NONE
	REVENUE AND EXPENSES PER BOOKS	1,200.	5,200.
FORM 990PF, PART I - TAXES	DESCRIPTION	FEDERAL TAX PAID: -BAL DUE W/ EXT FYE 9/30/05 -ESTIMATE FYE 9/30/06	TOTALS

FORM 990PF, PART II - CORPORATE STOCK

	 ' 	
ENDING BOOK VALUE	948,198	948
DESCRIPTION	SEE LONG POSITION ATTACHED	TOTALS

ENDING	FMV	1 1	922,197.	922,197	
ENDING	BOOK VALUE	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		948,198.	

V05-8.1 15074001

STATEMENT 3

FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

NAME AND ADDRESS	TITLE AND TIME DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT ' AND OTHER ALLOWANCES
JOHN C. RYAN C/O BCRS ASSOCIATES, LLC 100 WALL STREET, 11TH FLOOR NEW YORK, NY 10005	TRUSTEE/PART-TIME NONE	NONE	NONE	NONE
HELEN BRUNS RYAN C/O BCRS ASSOCIATES, LLC 100 WALL STREET, 11TH FLOOR NEW YORK, NY 10005	TRUSTEE/PART-TIME NONE	NONE		NONE
	GRAND TOTALS	NONE	NONE	NONE

V05-8.1

STATEMENT

18

FORM 990PF, PART XV - INFORMATION REGARDING FOUNDATION MANAGERS

JOHN C. RYAN; C/O BCRS ASSOCIATES, LLC 100 WALL STREET, 11TH FLOOR, NEW YORK, NY 10005

19

THE BRUNS FOUNDATION CHARITABLE CONTRIBUTIONS FYE 9/30/06

EIN: 13-7225243

DATE	CHECK NUMBER	CONTRIBUTION/CITY, STATE	AMOUNT
- 2/13/2008	1141	Josephinium High School	\$25,000,00.
4/4/2006	1142	Hales Franciscan High School Chicago, IL	50,000.00
5/12/2006	1143	American Committee for Shaare Zedek Medical New York, NY	1,000.00
5/24/2006	1144	Archdiocese of Los Angeles Los Angeles, CA	225.00
6/5/2006	1145	St. Francis Xavier Church Chicago, IL	1,500.00
7/17/2006	1146	St. Catherine Laboure Catholic Church Chicago, IL	5,000.00
		TOTAL CONTRIBUTIONS	\$82,725.00

^{*}ALL CONTRIBUTIONS WERE MADE TO THE GENERAL PURPOSE FUND OF PUBLIC CHARITABLE ORGANIZATIONS EXEMPT UNDER SECTION 501[C][3] OF THE INTERNAL REVENUE CODE.

BRUNS FOUNDATION

Holdings

Period Ended September 30, 2006

CASH & CASH EQUIVALENTS								
	Quentity	Market Price	Market Value / Accrued Income	Unit Cost	Adjusted Cost / Onginel Cost	Unrealized Gara (Loss)	Unrealized Yield to Maturity / Garn (Loss) Current Yield	Estimated Annual Income
CASH								
GOLDMAN SACHS FINANCIAL SOUARE MONEY MARKET FUND (FST SHARES)	720,181 55	1 0000	720,181 55	1 0000	720,181 55	00 0	5 2100	37,521 46
TOTAL CASH			720181.55	10	720,181.55	0.00		37,521.46
FIXED INCOME			- 					
	Quantity	Market Price	Market Value / Accrued Income	Unit Cost	Adjusted Cost / Original Cost	Unrealized / Economic Gain (Loss)	Yield to Maturity in Percentage	Estimated Annual Income
OTHER FIXED INCOME								
GS HIGH YIELD FUND								
GOLDMAN SACHS HIGH YIELD INSTL MUTUAL FUND CLASS I	2 00	7 9800	15 92	8 1704	16 30	(0 38)		1 23

Not a Deposit. Not FDIC Insurad. May Lose Value (Excluding Goldman Sachs Bank Deposit Account) Brokerage and securities services provided by Goldman Sachs & Co. Bank Deposit Account offered by Goldman Sachs Bank USA, Member FDIC

LONG POSITION

Page / of 2

Statement Detail

BRUNS FOUNDATION

Holdings (Continued)

Period Ended September 30, 2006

PUBLIC EQUITY								
	Quantity	Market Price	Market Value / Accrued Income	Unit Cost	Cost Basis	Unrealized Gain (Loss)	Dividend	Dividend Estimated
US EQUITY								
US STOCKS								
VERISIGN INC CMN (VRSN)	10,000 00	20 2000	20 2000 202,000 00 22 8000	22 8000	228,000 00	(26,000 00)		
			Market Value		Adjusted Cost /* Original Cost	Unreafized Gain (Loss)		Estimated Angual Income
TOTAL PORTFOLIO			42219747	~	38.4168416	(26,000.38)		37,522.69
			•					

Original Cost is price paid by purchaser adjusted for annual original issue discount payments and/or return of capital adjustments if applicable. Adjusted Cost reflects adjustments to Original Cost for accretion and/or amortization. Adjusted cost for GMS Portfolios.
 Not a Deposit. Not FDIC Insured. May Lose Value (Excluding Goldman Sachs Bank Deposit Account).
 Brokerage and securities services provided by Goldman Sachs. & Co. Bank Deposit Account offered by Goldman Sachs. Bank USA. Member FDIC.

Form **8868**

(Rev. December 2006)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

► File a separate application for each return

OMB No. 1545-1709

IIIOIIIAI NOVOIIU	SOURCE			
If you are	filing for an Automatic 3-Month Extension, complete only Part I and check this box filing for an Additional (not automatic) 3-Month Extension, complete only Part II (o	n page 2 of t		
Do not com Part I	plete Part II unless you have already been granted an automatic 3-month extension on a p Automatic 3-Month Extension of Time. Only submit original (no copies need		Form 8	3868.
		•		
	(c)(3) corporations required to file Form 990-T and requesting an automatic 6-month external toolly	ctension—ch	eck this	s box
	rporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7 income tax returns	'004 to reque	st an e	extension of
one of the r Form 8868 group return	Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month au eturns noted below (6 months for section 501(c)(3) corporations required to file Form 9 electronically if (1) you want the additional (not automatic) 3-month extension or (2) you files, or a composite or consolidated Form 990-T. Instead, you must submit the fully comp 88. For more details on the electronic filing of this form, visit www.irs.gov/efile.and.click.on	90-T). Howev e Forms 990- leted and sig	er, yo BL, 60 ned pa	u cannot file 69, or 8870, ge 2 Part II)
Type or	Name of Exempt Organization	Employer ide		ion number
print	THE BRUNS FOUNDATION	13-722524	43	
File-by-the due date for	Number, street, and room or suite no-if a-P-O-box, see instructions			
filing your return. See	c/o BCRS ASSOCIATES, LLC; 100 WALL STREET - 11TH FLOOR			
instructions	City, town or post office, state, and ZIP code. For a foreign address, see instructions. NEW YORK, NY 10005			
Check type	of return to be filed (file a separate application for each return):			
☐ Form 99	90		orm 47	720
☐ Form 99	00-BL	□ F	orm 52	227
☐ Form 99	· · · · · · · · · · · · · · · · · · ·		orm 60	
💢 Form 99	00-PF		orm 88	370
If the orgIf this is ffor the who	e No ► (212) 440-0800 FAX No ►			▶ ☐ f this is attach
a list with the	ne names and EINs of all members the extension will cover			
until _ for the ► □	est an automatic 3-month (6 months for a section 501(c)(3) corporation required to file MAY 31 , 2007, to file the exempt organization return for the organization or calendar year 20 or tax year beginning OCTOBER 1, 2005, and ending SEPTEME	named above		extension is
2 If this	tax year is for less than 12 months, check reason. Initial return Final return [☐ Change in	accou	inting period
less a	application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, ny nonrefundable credits. See instructions	3a	\$	1,320.00
	application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax ents made. Include any prior year overpayment allowed as a credit.	3b	\$	5,203.00
depos	ce Due. Subtract line 3b from line 3a Include your payment with this form, or, if required it with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Paymerm). See instructions	d, nt 3c	\$	0.00
	you are going to make an electronic fund withdrawal with this Form 8868, see Form 845 t instructions	3-EO and Fo	orm 887	79-EO
For Privacy	Act and Paperwork Reduction Act Notice, see Instructions.	Form	8868	(Rev 12-2006)

Gorm 886ۥ(R	ev 4-2007)
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● If you are filing for an Additional (not automatic) 3-Month Extension, complete only Part II and check this box ▶ ☑ Note. Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868 ● 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. You must file original and one copy.		
Type or	Name of Exempt Organization	Employer identification number
print	THE BRUNS FOUNDATION Number, street, and room or suite no If a P O box, see instructions.	13-7225243
File by the extended	c/o BCRS ASSOCIATES, LLC; 100 WALL STREET - 11TH FL.	For IRS use only
due date for filing the	City, town or post office, state, and ZIP code For a foreign address, see instructions	
return. See instructions	NEW YORK, NY 10005	
	of return to be filed (File a separate application for each return)	American artificial companyation of the experience of the com-
☐ Form 990		☐ Form 6069
☐ Form 990	((() = ()	☐ Form 8870
☐ Form 990		
STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.		
• The books are in the care of BCRS ASSOCIATES, LLC Telephone No ▶ 212-440-0800 FAX No ▶		
•		
	ilization does not have an office or place of business in the United States, check this bi -a-Group-Return,-enter-the-organization's-four-digit-Group-Exemption-Number-(GEN)-	
	group, check this box If it is for part of the group, check this box	
list with the names and EINs of all members the extension is for		
4 I reque	st an additional 3-month extension of time untilAUGUST 15,	2007
5 For cale	endar year, or other tax year beginningOCTOBER 1, 2005_, and ending	SEPTEMBER 30, 2006
6 If this ta	ax year is for less than 12 months, check reason 🔲 Initial return 🔲 Final return 🗀	Change in accounting period
7 State in detail why you need the extension ALL INFORMATION NECESSARY TO FILE A COMPLETE AND		
ACCURATE TAX RETURN IS NOT YET AVAILABLE.		
.,		
	pplication is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, y nonrefundable credits. See instructions	8a \$
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and		
estimated tax payments made. Include any prior year overpayment allowed as a credit and any		
amount paid previously with Form 8868 8b \$		
	Due. Subtract line 8b from line 8a Include your payment with this form, or, if required, deposit	0.00
with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System) See instructions 8c \$ 0.00		
Signature and Verification Under penalties of perjupy, Tidecare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief,		
It is true, correct, and complete, and that I am authorized to prepare this form		
Signature	Title ► CPA	Date > 5/15/07
<u>- </u>	Notice to Applicant. (To Be Completed by the IRS)	1-1-
We have approved this application Please attach this form to the organization's return.		
— · · · · · · · · · · · · · · · · · · ·		
We have not approved this application. However, we have granted a 10-day grace period from the later of the date shown below or the due date of the organization's return (including any prior extensions). This grace period is considered to be a valid extension of time for elections otherwise required to be made on a timely return. Please attach this form to the organization's return.		
	e not approved this application. After considering the reasons stated in item 7, we cannot grant you	
to file V	le are not granting a 10-day grace period	
☐ We can	not consider this application because it was filed after the extended due date of the return for wh	nich an extension was requested
Other		
	_	
Director By Date		
Alternate Mailing Address. Enter the address if you want the copy of this application for an additional 3-month extension		
returned to an address different than the one entered above		
	Name	
Type or print Number and street (include suite, room, or apt. no.) or a P.O. box number		
	City or town, province or state, and country (including postal or ZIP code)	