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Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

OMB No 1545-0047

Department of the Treasury

Open to Public Inspection

		nde Service			Jopy of this return t							
	For the	e 2009 calendar yeaı	r, or tax year begi	nning 7/01	, , , , , , , , , , , , , , , , , , , ,	2009, and end	ing 6/	/30	,	2010		
В	Check if	applicable	С					D Employ	er Identifi	cation Number		
	Add	ress change Please us	Bravo Four	dation, In	c.			11-3	36457	13		
	Nar	ne change or type.	20 Market	Square #80	0			E Telephone number				
	\vdash	see specific	Harrisburg	g, PA 17101				(717	7) 21	4-2200		
	Termination tions											
	\vdash	ended return						G Gross re	eceints \$	1,420,600.		
	\vdash		and address of princip	al officer			H(a) is this	s a group return				
	U^P		As C Above	u . uu .				ill affiliates incl		Yes No		
	Tay	exempt status X 50		(insert no)	4947(a)(1)	or 527	- If 'No	,' attach a list	(see instr	uctions)		
'			bravofounda		[] 4947(a)(1)	01 327	-					
<u></u>				· 		10.11		p exemption nu				
K			oration Trust	Association C	ther -	L Year of Forn	nation	IVI S	tate of leg	gal domicile		
Pa		Summary										
		Briefly describe the c										
ce		for the benef										
nan	-	ioster_educai	:Touar Tobbor	runities i	or student	s_in_ine_	COmmon	meatru-	OT P	ennsylvania		
ver	2	Check this box	Tif the organization	on discontinued i	ts operations of	disposed of r		25% of its	accets			
ဗိ		Number of voting me				disposed of t	nore triair	25 /0 01 113	3	1		
ಿ ರ		Number of independent				I, line 1b)			4	0		
ij		Total number of emp	-	-					5	0		
Activities & Governance	6	Total number of volu	nteers (estimate i	f necessary)					6	0		
ď		Total gross unrelated				e 12			7a	0.		
	ь	Net unrelated busine	ss taxable income	from Form 990-	T, line 34				7 b	0.		
								Prior Year		Current Year		
۵	8	Contributions and gra	ants (Part VIII, line	e 1h)				1,397,3	355.	1,405,206.		
Revenue		Program service reve										
eve		Investment income (3,6	32.	15,394.		
α		Other revenue (Part					_,					
	12	Total revenue – add	lines 8 through 1	1 (must equal Pa	rt VIII, column	(A), line 12)		1,400,9	987.	1,420,600.		
	13	Grants and similar a Benefits paid to or fo Salaries, other comp Professional fundrais Total fundraising exc	mounts paid (Part	IX, column (A),	lines 1-3)	CHI CO	√					
	14	Benefits paid to or fo	or members (Part	IX, column (A), l	ine 4)	Elvi	\					
ø	15	Salaries, other comp	ensation, employe	ee benefits (Part	IX column	Jines 5-10)	,					
Expenses	16a	Professional fundrais	sing fees (Part IX,	column (A), line	11 e)	Jines 5-10)	1 1-					
ē	ь	Total fundraising exp	oenses (Part IX. c	olumn (D), line 2	5) - /(0/ . n	N 3 1	١	Į				
û		Other expenses (Par			f-240 (0) JP	IN	ענט	1,054,3	335.	1,398,243.		
		Total expenses Add			olumn A lune	2550 P		1,054,3		1,398,243.		
	1	Revenue less expen		•	0.0	N 3 P	<u> </u>	346,6		22,357.		
- 9		rievenue less expen	3e3 Subtract line	10 HOITIME 12								
5 5		T-1-11- (D1 V	h 16)				Bec	inning of Y		End of Year 1,485,565.		
Balt	20	Total assets (Part X Total liabilities (Part	•				-	10,4		131,647.		
Net Assets or Fund Balancos	21	•	•		••					·		
		Net assets or fund b		line 21 from line	20			1,331,5	201.	1,353,918.		
Pi	art II	Signature BI	OCK									
		Under penalties of perjutrue, correct, and complete	iry, I declare that I have lete Declaration of prep	examined this return, arer (other than officer	including accompany) is based on all info	ring schedules and irmation of which p	statements, a reparer has a	and to the best ny knowledge	of my kno	wledge and belief, it is		
٠.		In Maria	VXI				ı	1/61/	higi			
ր Sid 3 He		Signature of officer	To Co					0319	WIII			
3 116	:16	1. '	/ .				_	Date!	D			
1		Kelly Kop					Exe	cutive	Direc	·		
		Type or print name	and title			15-4	1		l n	parer's identifying number		
) 	:	<u> </u>		2/6/	~	Date /	/	Check if self	[se	e instructions)		
Pa		Preparer's	Mond,	N.Y C		1/11/	<i>"</i>	emploved P	`ᆜ╣			
Pr na	e- rer's		nomas H. Flo						[P(00529011		
Us		vours if solf	lowers & Flo									
	าไง	employed). 5	775 Allentow		te. 102			EIN ► 2		35345		
		ZIP + 4 Ha	arrisburg, E	PA 17112				Phone no	(717			
Ma	y the I	IRS discuss this retu	rn with the prepare	er shown above?	(see instruction	ns)				X Yes No		
D.A	A For	Privacy Act and Pa	nanwork Baductio	n Act Notice se	the congrate i	netructions		TEE AOL 17	12/20/	na Form 990 (2009)		

Form 990 (2009) Bravo Foundation, Inc.

Part IV | Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	1	х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations Did the organization engage in lobbying activities? If 'Yes,' complete Schedule C, Part II	4		<u>x</u>
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If 'Yes,' complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I	6	Х	
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If 'Yes,' complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	8		<u>X</u>
	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If 'Yes,' complete Schedule D, Part V	10		Х
11	Is the organization's answer to any of the following questions 'Yes'? If so, complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable	11	Х	
•	Did the organization report an amount for land, buildings and equipment in Part X, line 10° If 'Yes,' complete Schedule D. Part VI			
•	Did the organization report an amount for investments— other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VII			
•	Did the organization report an amount for investments— program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII			
	Poid the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part IX		<u> </u> 	
	• Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X			
	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48? If 'Yes,' complete Schedule D, Part X			
	Did the organization obtain separate, independent audited financial statement for the tax year? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII	12	Х	
127	AWas the organization included in consolidated, independent audited financial statement for the tax year? If 'Yes,' completing Schedule D, Parts XI, XII, and XIII is optional Yes No 12 A X			
	Is the organization a school described in section $170(b)(1)(A)(ii)^2$ If 'Yes,' complete Schedule E	13		X
14:	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
١	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If 'Yes,' complete Schedule F, Part I	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If 'Yes,' complete Schedule F, Part II	15		X_
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If 'Yes,' complete Schedule F, Part III	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III	19		X
20	Did the organization operate one or more hospitals? If 'Yes,' complete Schedule H	20	<u></u>	X

Checklist of Required Schedules (continued)

Part IV

No Yes Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II 21 X Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 27 If 'Yes,' complete Schedule I, Parts I and III 22 Χ Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If 'Yes,' complete Х 23 Schedule J 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, and that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No, 'go to line 25 Х 24a b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24b c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease 24c any tax-exempt bonds? 24d d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year? 25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I Х 25a b is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete 25b Х Schedule L. Part I 26 Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If 'Yes,' complete Schedule L, Part II 26 Χ, Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection comittee member, or to a person related to such an individual? If 'Yes,' complete 27 X Schedule L, Part III 28 Was the organization a party to a business transation with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions) a A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L. Part IV 28a Х b A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Х 28b Schedule L. Part IV c An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV 28c Х 29 Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation 30 contributions? If 'Yes,' complete Schedule M Х Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N. Part I 31 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II 32 32 Х Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If 'Yes,' complete Schedule R, Part I 33 33 X Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, 34 Х 34 Is any related organization a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, 35 Х 35 Part V, line 2 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization 'if 'Yes,' complete Schedule R, Part V, line 2 36 Χ Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI 37 37 X Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? 38 Note. All Form 990 filers are required to complete Schedule O 38 Form 990 (2009)

			Yes	No				
1 a	Enter the number reported in Box 3 of form 1096, Annual Summary and Transmittal of U.S.		162	NO				
ŧ	Information Returns Enter -0- if not applicable Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1a 2 1b 0							
(Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1 c	Х					
2 a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return							
2b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?								
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> this return (see instructions)							
3a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?								
t	olf 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O	3b						
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?								
ŧ	If 'Yes,' enter the name of the foreign country							
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts							
5 a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Χ				
ŧ	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X				
c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?								
6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?								
b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were no deductible?								
7 Organizations that may receive deductible contributions under section 170(c).								
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?								
ı	of 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7 b						
(Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7с		Х				
	f If 'Yes,' indicate the number of Forms 8282 filed during the year 7d							
•	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Х				
1	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X				
9	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7 g						
	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h						
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8						
9	Sponsoring organizations maintaining donor advised funds.							
	a Did the organization make any taxable distributions under section 4966?	9a						
- 1	Did the organization make any distribution to a donor, donor advisor, or related person?	9b						
10	Section 501(c)(7) organizations. Enter							
	a Initiation fees and capital contributions included on Part VIII, line 12							
1	Gross Receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			1				
11	Section 501(c)(12) organizations. Enter		1					
i	a Gross income from other members or shareholders							
-	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)							
12	a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a						
	b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year 12b							

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

Se	ction A.	Governing Body and Management					
]	Yes	No	
1	a Enter the	number of voting members of the governing body	1a 1				
		number of voting members that are independent	1 b				
2	Did any o officer, di	fficer, director, trustee, or key employee have a family relationship or a business re rector, trustee or key employee?	elationship with any other	2	Х		
3	Did the o	ganization delegate control over management duties customarily performed by or use of trustees, or key employees to a management company or other person.	inder the direct supervision	3		Х	
4		ganization make any significant changes to its organizational documents		4		X	
_		prior Form 990 was filed?		_		.,	
5		rganization become aware during the year of a material diversion of the organization organization organization become aware during the year of a material diversion of the organization become aware during the year of a material diversion become aware during the year of a material diversion become aware during the year of a material diversion of the organization of the organization of the year of a material diversion of the organization of the organization of the organization of the organization of the year of a material diversion of the organization of the organization organization of the organization of the organization of the organization of the organization	n's assets?	5 6	Х	<u>X</u>	
7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body? See Schedule 0							
	b Are any o	lecisions of the governing body subject to approval by members, stockholders, or of	ther persons?	7b		<u>X</u>	
8	Did the o the follow	ganization contemporaneously document the meetings held or written actions unde ing	rtaken during the year by	ļ			
	a The gove	rning body?		8a	X		
	b Each con	mittee with authority to act on behalf of the governing body?		8ь		Χ	
9	9 Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O						
Se	ction B.	Policies (This Section B requests information about policies not	required by the Internal				
Re	renue Code)					
					Yes	No	
10	a Does the	organization have local chapters, branches, or affiliates?		10 a		<u>X</u>	
	b If 'Yes,' cand brand	oes the organization have written policies and procedures governing the activities of the organization?	of such chapters, affiliates,	10Ь			
11 Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?							
11 A Describe in Schedule O the process, if any, used by the organization to review this Form 990 See Schedule O							
12	a Does the	organization have a written conflict of interest policy? If 'No,' go to line 13		12a	Х		
	b Are office to conflic	ers, directors or trustees, and key employees required to disclose annually interests $\ensuremath{\mathrm{ts}}^2$	that could give rise	12b	Х		
	c Does the Schedule	organization regularly and consistently monitor and enforce compliance with the po O how this is done See Schedule O	olicy? If 'Yes,' describe in	12c	Х		
13	Does the	organization have a written whistleblower policy?		13	Χ		
14	Does the	organization have a written document retention and destruction policy?		14	Х		
15	Did the p persons,	rocess for determining compensation of the following persons include a review and comparability data, and contemporaneous substantiation of the deliberation and de	approval by independent cision?				
	a The orga	nization's CEO, Executive Director, or top management official		15 a		X	
	b Other off	cers of key employees of the organization		15b		_X_	
	If 'Yes' to	line 15a or 15b, describe the process in Schedule O (See instructions)					
16		rganization invest in, contribute assets to, or participate in a joint venture or similaring the year?	arrangement with a taxable	16a		_ x_	
	b If 'Yes,' h	has the organization adopted a written policy or procedure requiring the organization enture arrangements under applicable federal tax law, and taken steps to safeguard	n to evaluate its participation				
_	status wi	th respect to such arrangements?	- 9	16b			
		Disclosures					
17	List the s	tates with which a copy of this Form 990 is required to be filed $ ho = PA = -$.					
18	inspectio	of 104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, an indicate how you make these available. Check all that apply	and 990-T (501(c)(3)s only) a	vailab	le for	public	
		website X Another's website X Upon request					
19 Describe in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interest policy, and fit statements available to the public. See Schedule 0							
20		name, physical address, and telephone number of the person who possesses the t s Flowers. CPA 5775 Allentown Blvd Suite 102 Harri	-			5 1	
	- 11111111	s cilimers (FB 3773 Allebi(NWO BIVO 3011 B 107 H277)	SOUTO PA 1/11/ /1/	/	- 77	24	

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organizations's tax year. Use Schedule J-2 if additional space is needed.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees. See instructions for definition of 'key employees.'
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

Check this box if the organization did not compensate any current officer, director, or trustee (c) (D) (E) (F) Average Position (check all that apply) Name and Title Reportable compensation from Reportable compensation from Estimated amount of other hours Individual or director per week Institutional trustee Highest Former compensation from the organization and related the organization (W 2/1099-MISC) related organizations (W-2/1099-MISC) employee compensated trustee organizations Dennis Walsh President 0.5 X 0. 0 0. Chris Bravacos Board Member 0.5 X 0. 0. 0. Bill Spinner Director 0.5 X 0 0 0. Kelly Koppenhaver Executive Direc 16 Х 0 0 0.

(A) Name and Title	(B) (c) Average Position (check all that apply)							(D) (E)			(F)	
		Individual trustee or director		Officer		Highest compensated employee		Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W 2/1099 MISC)	amou com fr org. an	itimated int of oth pensation the anization direlated anization direction in anization direction directi	her on n d
					ļ							
1 b Total							▶.	0.	0.			
 Total number of individuals (including but not limite from the organization ► 0 	d to tho	se lı	stec	d ab	ove)) wh	o red	ceived more than	\$100,000 in repor	table con	npens	atı
3 Did the organization list any former officer, director	or trust	ee	kev	emi	nlov	ee i	or bi	abest compensat	ed employee		Yes	١
 on line 1a? If Yes, complete Schedule J for such in For any individual listed on line 1a, is the sum of rethe organization and related organizations greater to 	<i>ndıvıdua</i> portable	al e cor	npe	nsa	tion	and	i oth	er compensation	from	3		
<i>individual</i>Did any person listed on line 1a receive or accrue or	omnens	atio	n fr	om	anv	unra	elate	ed organization fo	r sarvicas	4_		
rendered to the organization? If 'Yes,' complete Scientific B. Independent Contractors	hedule .) for	suc	h p	ersc	n				5		_
Complete this table for your five highest compensal compensation from the organization	ed inde	pend	dent	cor	ntra	ctors	tha	t received more t	han \$100,000 of			
(A) Name and business addres	is .							Description	of Services	Compe	C) ensatio	<u>n</u>
												_
												_

rai	rt viii], Statement of Revenue				
	•	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
v.	1 a Federated campaigns 1 a				
E S	b Membership dues 1b				
용히					
S &	c Fundraising events. 1c	_			
FR	d Related organizations 1d				
S.E	e Government grants (contributions) 1 e				
CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS	f All other contributions, gifts, grants, and similar amounts not included above 1f 1,405,206				
ξÖ	g Noncash contribns included in lns 1a-1f. \$				
8 €	h Total. Add lines 1a-1f	► 1,405,206.			
- Li	Business Code	1 27 1007 2001	,		
EN		┥			
ای					
ü	b				
. ≥	c				
SER	d				
ξ	e				
8	f All other program service revenue				
PROGRAM SERVICE REVENUE	g Total. Add lines 2a-2f	>			
_	Investment income (including dividends, interest and other similar amounts)	15,394.			15,394.
	4 Income from investment of tax-exempt bond proceeds	▶[
	5 Royalties	>			
	(i) Real (ii) Personal				
ĺ	6a Gross Rents				
	b Less rental expenses	-			
		\dashv			
	c Rental income or (loss)	_	ļ		
	d Net rental income or (loss)	•			
	7 a Gross amount from sales of assets other than inventory (i) Securities (ii) Other				
	b Less cost or other basis and sales expenses				
	c Gain or (loss)				
	d Net gain or (loss)	▶			
40E	8a Gross income from fundraising events (not including \$				
OTHER REVEN	of contributions reported on line 1c)				
~	See Part IV, line 18	•			
포	b Less direct expenses b	7			
5	c Net income or (loss) from fundraising events				
:	9a Gross income from gaming activities See Part IV, line 19	·			
	b Less direct expenses b	\dashv			
		늰			
	c Net income or (loss) from gaming activities				
	10a Gross sales of inventory, less returns and allowances a	_			
	b Less cost of goods sold b	_	1		
	c Net income or (loss) from sales of inventory	<u> </u>			<u> </u>
	Miscellaneous Revenue Business Code	_			
	11a		<u> </u>		
	b		ļ		
l	c	1	<u> </u>		
	d All other revenue	1	 	 	<u> </u>
			 		
	e Total. Add lines 11a-11d	1 100 555	-		
	12 Total revenue. See instructions	► 1,420,600.	0.	0.	15,394.

Form 990 (2009) Bravo Foundation, Inc.

Part IX | Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

		· · · · · · · · · · · · · · · · · · ·			
Do 6b,	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	0.	0.	0.	0.
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.
7	Other salaries and wages				
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees)				
;	a Management				
ı	Legal				
	Accounting	20,300.		20,300.	
	Lobbying	,		,	
	e Prof fundraising svcs See Part IV, In 17				
1	Investment management fees				
	g Other				
_	Advertising and promotion				
13	Office expenses	527.		527.	
14	Information technology	550.	*	550.	
15	Royalties				
16	Occupancy				
17	Travel	1,459.		1,459.	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	372.		372.	
	Insurance	1,240.		1,240.	
24	Other expenses Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)				
	a Scholarships	1,280,919.	1,280,919.		
	b Charitable Contributions	71,190.	71,190.		
	Dues and Subscriptions	10,000.	., =	10,000.	
	d Postage and Shipping	5,642.		5,642.	
	Printing and Publications	5,103.	_	5,103.	
	f All other expenses	941.		941.	
	Total functional expenses Add lines 1 through 24f	1,398,243.	1,352,109.	46,134.	0.
	Joint costs. Check here ►			,	
BA	campaign and fundraising solicitation	<u> </u>	<u> </u>	L	Form 990 (2009)

			(A) Beginning of year		(B) End of year
	1	Cash — non-interest-bearing	1,340,786.	1	1,484,704
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	
	5	Receivables from current and former officers, directors, trustees, key employee and highest compensated employees. Complete Part II of Schedule L.		5	
	6	Receivables from other disqualified persons (as defined under section 4958(f)(•		
		and persons described in section 4958(c)(3)(B) Complete Part II of Schedule	L	6	
	7	Notes and loans receivable, net		7	
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	8	Inventories for sale or use		8	
\$	9	Prepaid expenses and deferred charges	310.	9	310
	10 a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	15.		
	b	Less accumulated depreciation 10b 2,09	923.	10 c	551
1	11	Investments — publicly-traded securities		11	
- I		Investments – other securities See Part IV, line 11		12	
	13	Investments – program-related See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets See Part IV, line 11		15	
- 1		Total assets Add lines 1 through 15 (must equal line 34)	1,342,019.	16	1,485,565
	17	Accounts payable and accrued expenses	1,258.	17	937
- 1		Grants payable		18	
	19	Deferred revenue		19	
.	20	Tax-exempt bond liabilities		20	
3	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II			
<u>i</u>		of Schedule L		22	
Š	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities Complete Part X of Schedule D	9,200.	25	130,710
	26	Total liabilities. Add lines 17 through 25.	10,458.	26	131,647
E		Organizations that follow SFAS 117, check here ► X and complete lines			-
- 1		27 through 29 and lines 33 and 34.			
<u>S</u>	27	Unrestricted net assets	1,331,561.	27	1,353,918
E T	28	Temporarily restricted net assets		28	
- 1	29	Permanently restricted net assets		29	
₹		Organizations that do not follow SFAS 117, check here > and complete	е		
F		lines 30 through 34.			
F	30	Capital stock or trust principal, or current funds		30	
<u> </u>	31	Paid-in or capital surplus, or land, building, and equipment fund		31	
<u>ו</u>	32	Retained earnings, endowment, accumulated income, or other funds		32	
BALANCES	33	Total net assets or fund balances	1,331,561.	33	1,353,918
۱ ۶	34	Total liabilities and net assets/fund balances	1,342,019.	34	1,485,565

Form 990 (2009) Bravo Foundation, Inc. 11-3645713		Pa	age 12
Part XI Financial Statements and Reporting		-	
		Yes	No
1 'Accounting method used to prepare the Form 990 $igcap$ Cash $igcap X$ Accrual $igcap $ Other			
If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O			
2a Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		Х
b Were the organization's financial statements audited by an independent accountant?	2b	X	
c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2 c		Χ_
If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O			
d If 'Yes' to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both			
X Separate basis Consolidated basis Both consolidated and separate basis			
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3 a		Х
b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	3 b		

BAA

Form **990** (2009)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No 1545 0047 2009

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

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

ame of the organization Employer identification number										
Bravo Foundation,								45713		
Part I Reason for Pu	blic Charity Statu	s (All organizations	must d	comple	te this	part.)	See II	<u>nstruct</u>	ions	
The organization is not a private organization is not a private organization is not a private organization in the organization in the organization in the organization is not a private organization in the organization		•								
—		ociation of churches desc		section	170(b)	(1)(A)(i)).			
2 A school described	in section 170(b)(1)(A)(ii). (Attach Schedule E	Ξ)							
—		e organization described		•		•				
4 A medical research	organization operate	d in conjunction with a h	ospital o	describe	d in sec	tion 17	0(b)(1)(A	()(iii) Er	nter the hosp	ıtal's
name, city, and sta					-, -,-, -			,,-		. – – -
☐ 170(b)(1)(A)(ıv). (C	Complete Part II)	of a college or university			-	Ü	nmental	unit des	scribed in se	ction
7 An organization that	A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II)									
8 A community trust	described in section	1 70(b)(1)(A)(vi). (Comple	te Part I	I)						
from activities relate investment income	d to its exempt function	more than 33-1/3 % of its s s — subject to certain exce ss taxable income (less omplete Part III)	entions a	and (2) n	o more t	han 33-	1/3 % of	its suppo	ort from aross	
10 An organization org	ganized and operated	exclusively to test for pu	ublic safe	ety See	section	1 509(a)	(4).			
more publicly supp	orted organizations of	exclusively for the beneficial exclusively for the beneficial exclusively exclusive excl	a)(1) or	section	509(a)(2	ctions o 2) See	of, or car section	ry out th 509(a)(3	ne purposes). Check the	of one or box that
a ∏Type!	b Type II	c ∏ Type II		-		ed		d \square	Type III— C	Other
e By checking this bo	ox, I certify that the or	ganization is not controll n one or more publicly s	led direc	tly or in	directly	by one	or more ed in sec	disquali tion 509	fied person	s other
f If the organization check this box	received a written det	ermination from the IRS	that is a	Type I,	Type II	or Typ	e III sup	porting o	organization,	
g Since August 17, 2	006, has the organiza	ition accepted any gift o	r contrib	ution fro	om any	of the fo	ollowing	persons	,7	
45										Yes No
(i) a person who below, the go	verning body of the s	controls, either alone or upported organization?	togetner	with pe	rsons a	escribe	a in (ii) a	ana (III)	11 g (i)	
	iber of a person desc	•							11 g (ii)	- i
(iii) a 35% contro	lled entity of a persor	described in (i) or (ii) a	bove?						11 g (iii)	
h Provide the following	ng information about t	he supported organization	ons						<u> </u>	
(i) Name of Supported Organization	(II) EIN	(iii) Type of organization (described on lines 1 9 above or IRC section (see instructions))	organizat (i) listed	Is the not not in your string ment?	the organ	ou notify ization in (i) of upport?			(vii) Amount	of Support
			Yes	No	Yes	No	Yes	No		
			 			ļ	ļ .			
										-
									4 11	
Total										
Total										

Sec	(Complete only if you check tion A. Public Support	ed the box on line	e 5, 7, or 8 of Par	(t)				
Cale	ndar year (or fiscal year	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 200	9	(f) Total
1	Gifts, grants, contributions and membership fees received (Do not include 'unusual grants')							
	Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf							
3	The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge.							
4	Total. Add lines 1-through 3							
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)							
6	Public support. Subtract line 5 from line 4							
Sec	tion B. Total Support				,			
	ndar year (or fiscal year nning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 200	9	(f) Total
7	Amounts from line 4							
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources							
9	Net income from unrelated business activities, whether or not the business is regularly carried on							
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)							
11	Total support. Add lines 7 through 10							
12	Gross receipts from related activ	rities, etc (see in	structions)			-	12	
13	First five years. If the Form 990 organization, check this box and	is for the organiz	ation's first, seco	end, third, fourth,	or fifth tax year a	s a section	501(c)	(3)
Sec	tion C. Computation of Pu	blic Support F	Percentage	,				
14	Public support percentage for 20	009 (line 6, colum	in (f) divided by li	ne 11, column (f)			14	%_
15	Public support percentage from	2008 Schedule A	, Part II, line 14				15	%
16	a 33-1/3 support test — 2009. If the and stop here. The organization				d the line 14 is 33	3-1/3 % or m	nore, c	heck this box ►
ı	33-1/3 support test – 2008. If the and stop here. The organization	e organization did qualifies as a pu	d not check a box blicly supported o	on line 13, or 16 organization	a, and line 15 is 3	33-1/3% or r	more, o	check this box
17:	a 10%-facts-and-circumstances to or more, and if the organization the organization meets the 'facts	meets the 'facts-	and-circumstance	es' test, check this	s box and stop he	re. Explain	ın Pari	IV how
i	o 10%-facts-and-circumstances to or more, and if the organization organization meets the 'facts-an	meets the 'facts-	and-circumstance	es' test, check this	s box and stop he	re. Explain	ın Pari	IV how the
18	Private foundation. If the organi	zation did not ch	eck a box on line	, 13, 16a, 16b, 17	a, or 17b, check t	his box and	see ir	structions 🕨 🗌
BAA					9/	chedule A (F	orm 9	90 or 990-EZ) 2009

Part III Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I)

<u>Sec</u>	tion A. Public Support						
	dar year (or fiscal yr beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions and membership fees received (Do not include 'unusual grants.')	886,860.	653.449		1,397,355.		5,516,757.
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in a activity that is related to the organization's tax-exempt purpose	000,000.	033,443.	1,173,007.	1,337,333.	1,403,200.	0.
3	Gross receipts from activities that are not an unrelated trade or business under section 513						0.
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0.
5	The value of services or facilities furnished by a governmental unit to the organization without charge						0.
6	Total. Add lines 1 through 5	886,860.	653,449.	1,173,887.	1,397,355.	1,405,206.	5,516,757.
7 a	Amounts included on lines 1, 2, 3 received from disqualified persons	0.	0.	0.	0.	0.	0.
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the amount on line 13 for the						
	year	0.	0.	0.	0.	0.	0.
	Add lines 7a and 7b	0.	0.	0.	0.	0.	0.
8	Public support (Subtract line						
	7c from line 6)						5,516,757.
Sec	tion B. Total Support						
	• • • • • • • • • • • • • • • • • • • •				·		
Cale	ndar year (or fiscal yr beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
Cale:	ndar year (or fiscal yr beginning in) > Amounts from line 6	(a) 2005 886, 860.	(b) 2006 653, 449.	(c) 2007 1, 173, 887.	(d) 2008 1,397,355.	(e) 2009 1, 405, 206.	(f) Total 5, 516, 757.
Cale:	ndar year (or fiscal yr beginning in)	886,860.	653,449.	1,173,887.	1,397,355.	1,405,206.	5,516,757.
Cale 9 10 a	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form	886,860. 21,994.			3,632.	1,405,206.	5,516,757. 99,443. 0.
Caler 9 10 a	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources Unrelated business taxable income (less section 511 taxes) from businesses	886,860.	653,449.	1,173,887.	1,397,355.	1,405,206.	5,516,757. 99,443.
Caler 9 10 a b	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on	886,860. 21,994.	653,449. 34,420.	24,003.	3,632.	1,405,206.	5,516,757. 99,443. 0.
Caler 9 10 a b	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is	886,860. 21,994.	653,449. 34,420.	24,003.	3,632.	1,405,206.	5,516,757. 99,443. 0. 99,443.
Calei 9 10 a b c 11 12 13	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (add lns 9, 10c, 11, and 12)	21,994. 21,994.	34,420. 34,420.	24,003. 24,003.	3,632. 3,632.	1,405,206. 15,394. 15,394.	5,516,757. 99,443. 0. 99,443.
Calei 9 10 a b c 11 12 13	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (add lins 9, 10c, 11, and 12) First five years. If the Form 990	21,994. 21,994.	34,420. 34,420.	24,003. 24,003.	3,632. 3,632.	1,405,206. 15,394. 15,394.	5,516,757. 99,443. 0. 99,443.
Calei 9 10 a b c 11 12 13 14	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (add lins 9, 10c, 11, and 12) First five years. If the Form 990 organization, check this box and	21,994. 21,994.	34, 420. 34, 420.	24,003. 24,003.	3,632. 3,632.	1,405,206. 15,394. 15,394.	5,516,757. 99,443. 0. 99,443.
Calei 9 10 a b c 11 12 13 14 Sec	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (add lins 9, 10c, 11, and 12) First five years. If the Form 990 organization, check this box and ton C. Computation of Put	21, 994. 21, 994. 21, 994. is for the organization here	34, 420. 34, 420. ation's first, seconercentage	24,003. 24,003.	3, 632.	1, 405, 206. 15, 394. 15, 394. s a section 501(c)	5,516,757. 99,443. 0. 99,443. 0. 5,616,200. (3) ▶ □
Calety 9 10 a b c c 11 12 13 14 Sec 15	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (add lins 9, 10c, 11, and 12) First five years. If the Form 990 organization, check this box and tion C. Computation of Pul	21, 994. 21, 994. 21, 994. is for the organization here blic Support P	34, 420. 34, 420. 34, 420. etion's first, seconercentage n (f) divided by liii	24,003. 24,003.	3, 632.	1, 405, 206. 15, 394. 15, 394. s a section 501(c)	5,516,757. 99,443. 0. 99,443. 0. 5,616,200. (3) ▶ □
Calei 9 10 a b c c 11 12 13 14 Sec 15 16	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (add lins 9, 10c, 11, and 12) First five years. If the Form 990 organization, check this box and tion C. Computation of Pulpublic support percentage from	21,994. 21,994. 21,994. stop here blic Support P 09 (line 8, column 2008 Schedule A,	34, 420. 34, 420. 34, 420. ation's first, seconercentage of (f) divided by linual part IIII, line 15	24,003. 24,003. 24,003.	3, 632.	1, 405, 206. 15, 394. 15, 394. s a section 501(c)	5,516,757. 99,443. 0. 99,443. 0. 5,616,200. (3) ▶ □
Calei 9 10 a b c 11 12 13 14 Sec 15 16 Sec	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (add lins 9, 10c, 11, and 12) First five years. If the Form 990 organization, check this box and tion C. Computation of Putlion D. Computation of Invition D. Computation of Invition 1.	21,994. 21,994. 21,994. 21,994. 21,994. 21,994.	34, 420. 34, 420. 34, 420. ation's first, seconercentage or (f) divided by line Part III, line 15 ne Percentage	24,003. 24,003. 24,003.	3, 632. 3, 632. or fifth tax year as	1, 405, 206. 15, 394. 15, 394. s a section 501(c) 15 16	5,516,757. 99,443. 0. 99,443. 0. 5,616,200. (3) 98.2% 98.3%
Calei 9 10 a b c 11 12 13 14 Sec 15 16 Sec 17	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (add lins 9, 10c, 11, and 12) First five years. If the Form 990 organization, check this box and tion C. Computation of Public support percentage from the street in the process of the proces	21,994. 21,994. 21,994. 21,994. 21,994. 21,994. 21,994.	34, 420. 34, 420. 34, 420. 34, 420. etion's first, second ercentage of (f) divided by ling Part III, line 15 one Percentage column (f) divided	24,003. 24,003. 24,003. and, third, fourth, the 13, column (f); ed by line 13, column	3, 632. 3, 632. or fifth tax year as	1,405,206. 15,394. 15,394. 15,394. 15,16	5,516,757. 99,443. 0. 99,443. 0. 5,616,200. (3) ▶ □ 98.2 % 98.3 % 1.8 %
Calei 9 10 a b c c 11 12 13 14 Sec 15 16 Sec 17 18	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (add lins 9, 10c, 11, and 12) First five years. If the Form 990 organization, check this box and tion C. Computation of Put Public support percentage from the stiment income percentage filivestment income percentage f	21,994. 21,994. 21,994. 21,994. 21,994. 21,994. 21,994. 21,994. 21,994. 21,994. 21,994.	34, 420. 34, 420. 34, 420. 34, 420. ercentage (f) divided by lii Part III, line 15 ne Percentag column (f) divided le A, Part III, line	24,003. 24,003. 24,003. 24,003. end, third, fourth, ne 13, column (f); end by line 13, column (f);	3, 632. 3, 632. or fifth tax year as	1, 405, 206. 15, 394. 15, 394. 15, 394. 15, 16 17 18	5,516,757. 99,443. 0. 99,443. 0. 5,616,200. (3) ▶ □ 98.2% 98.3% 1.8% 1.7%
Calei 9 10 a b c 11 12 13 14 Sec 17 18 19 a	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (add lins 9, 10c, 11, and 12) First five years. If the Form 990 organization, check this box and tion C. Computation of Putlic support percentage from the stime of the support percentage from the support tests — 2009. If the comore than 33-1/3%, check this because of the support tests — 2009. If the comore than 33-1/3%, check this because of the support tests — 2009. If the comore than 33-1/3%, check this because of the support tests — 2009. If the comore than 33-1/3%, check this because of the support tests — 2009.	21,994. 21,994. 21,994. 21,994. 21,994. 21,994. 21,994. 21,994. 21,994. 21,994.	34, 420. 34, 420. 34, 420. 34, 420. ation's first, second ercentage in (f) divided by ling Part III, line 15 ine Percentage column (f) divided le A, Part III, line check the box on The organization.	24,003. 24,003. 24,003. 24,003. end, third, fourth, ne 13, column (f) end by line 13, column (f) line 14, and line 15 n qualifies as a p	3, 632. 3, 632. or fifth tax year as the summ (f)) umn (f)) us more than 33-1/3 ublicly supported	15, 394. 15, 394. 15, 394. 15, 394. 15, 394. 17, 18 3%, and line 17 is no organization	99,443. 0. 99,443. 0. 99,443. 1.8% 1.8% 1.7%
Calei 9 10 a b c 11 12 13 14 Sec 17 18 19 a b	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (add lins 9, 10c, 11, and 12) First five years. If the Form 990 organization, check this box and tion C. Computation of Putton D. Computation of Investment income percentage from the same of the support tests — 2009. If the 6 33-1/3 support tests — 2009. If the	21,994. 21,994. 21,994. 21,994. 21,994. 21,994. 21,994. 21,994. 21,994. 21,994. 21,994.	34, 420. 34, 420. 34, 420. 34, 420. 34, 420. ercentage n (f) divided by linger lill, line 15 ne Percentage column (f) divided le A, Part III, line check the box on the organization of not check a boo here. The organization of the organizat	24,003. 24,003. 24,003. 24,003. 24,003. et al., and line 15, column (f); line 14, and line 15, qualifies as a pix on line 14 or 19 mization qualifies as	3, 632. 3, 632. 3, 632. or fifth tax year as the summon (f)) umn (f)) us more than 33-1/3 ublicly supported to a, and line 16 is reas a publicly supported to a publicly	15, 394. 15, 394. 15, 394. 15, 394. 15, 394. 17 18 3%, and line 17 is no organization more than 33-1/3% orted organization recognization more than 33-1/3% orted organization more than 33-1/	99,443. 0. 99,443. 0. 99,443. 0. 5,616,200. (3) 98.2% 98.3% 1.8% 1.7% ot

Schedule A	(Form 990	or 990-E2	Z) 2009	Bravo	Four	dati	on,	Inc.		11-3645713	Page 4
Part IV	Supplem	ental In	format	ion. Cor	nplete	this p	part	to provide	the explanations r	required by Part II, lin formation. See instru	ne 10;
	Part II, III	ne 1/a	or 1/b;	and Pa	rt III, I	ine 12	2. Pr	ovide any	other additional in	formation. See instru	ictions.
											
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SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

Supplemental Financial Statements

Complete if the organization answered 'Yes,' to Form 990,
Part IV, lines 6, 7, 8, 9, 10, 11, or 12.

Attach to Form 990. ► See separate instructions

OMB No 1545 0047

Open to Public Inspection

Employer Identification number

Bra	vo Foundation, Inc.				
				11-3645713	
Par	deligible organizations Maintaining Dono the organization answered 'Yes' to	r <mark>Advised Funds or Other Similar Fur</mark> o Form 990, Part IV, line 6.	ids or Acc	ounts Complete	ıf
		(a) Donor advised funds	(b) F	unds and other acc	ounts
1	Total number at end of year	2	(-).	and and other acc	
2	Aggregate contributions to (during year)	138,828.			
3	Aggregate grants from (during year)	8,118.			
1	Aggregate value at end of year	130,710.			
-		· - · · · · · · · · · · · · · · · · · ·			· · · · · · · · · · · · · · · · · · ·
5	Did the organization inform all donors and dor funds are the organization's property, subject	to the organization's exclusive legal control?		XYes	No
6	used only for charitable purposes and not for purpose conferring impermissible private bene		any other	XYes	No
Par	t II Conservation Easements Comple	ete if the organization answered 'Yes'	to Form 99	90, Part IV, line	7
1	Purpose(s) of conservation easements held by	y the organization (check all that apply)			
	Preservation of land for public use (e.g., r	ecreation or pleasure) Preservation	of an historic	ally important land	area
	Protection of natural habitat	Preservation	of certified his	storic structure	
	Preservation of open space	-			
2	Complete lines 2a through 2d if the organization last day of the tax year	on held a qualified conservation contribution in	the form of a	a conservation ease	ement on the
				Held at the End of	f the Year
a	Total number of conservation easements		2 a		
t	Total acreage restricted by conservation ease	ments	2 b		
c	: Number of conservation easements on a certi	fied historic structure included in (a)	2c		
C	Number of conservation easements included i	n (c) acquired after 8/17/06	2 d		
3	Number of conservation easements modified, year ►	transferred, released, extinguished, or termina	ited by the or	ganization during th	ne tax
4	Number of states where property subject to co	onservation easement is located >			
5	Does the organization have a written policy re and enforcement of the conservation easeme	garding the periodic monitoring, inspection, hant it holds?	andling of viol	ations, Yes	□ No
6	Staff and volunteer hours devoted to monitori during the year •	ng, inspecting, and enforcing conservation eas	_		_
7	Amount of expenses incurred in monitoring, if during the year	nspecting, and enforcing conservation easeme	nts \$_		
8	Does each conservation easement reported o 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?	n line 2(d) above satisfy the requirements of se	ection	Yes	☐ No
9	In Part XIV, describe how the organization report include, if applicable, the text of the footnote conservation easements	s conservation easements in its revenue and expe to the organization's financial statements that	nse statement describes the	, and balance sheet, organization's acci	and ounting for
Pa	Organizations Maintaining Collection Complete if the organization and	ections of Art, Historical Treasures, o wered 'Yes' to Form 990, Part IV, line	r Other Sir	nilar Assets	
1 a	a If the organization elected, as permitted unde treasures, or other similar assets held for pub the text of the footnote to its financial statemi	lic exhibition, education, or research in further			
1	b If the organization elected, as permitted unde treasures, or other similar assets held for put amounts relating to these items	r SFAS 116, to report in its revenue statement lic exhibition, education, or research in further			
	(i) Revenues included in Form 990, Part VIII	, line 1		> \$	
	(ii) Assets included in Form 990, Part X			▶ \$	
2	If the organization received or held works of a amounts required to be reported under SFAS	art, historical treasures, or other similar assets 116 relating to these items	for financial	gain, provide the fo	llowing
	a Revenues included in Form 990, Part VIII, lin	e 1		► \$	
	b Assets included in Form 990, Part X			►\$	

Schedule D (Form 990) 2009 Brave				11-364		age 2
Part III Organizations Mainta	ining Collection	ons of Art, Histo	rical Treasures, or	Other Similar Ass	ets (continued	<u>d) </u>
3 Using the organization's acquisiting tems (check all that apply)	on accession and		•	hat are a significant us	e of its collection	
a Public exhibition		d Loan c	r exchange programs			
b Scholarly research		e [_] Other				
c Preservation for future gener						
4 Provide a description of the organization of the organization of the organization of the organization of the organization.5 During the year, did the organization of the organization of the organization of the organization.					se in	
5 During the year, did the organiza assets to be sold to raise funds r	ather than to be n	naintained as part o	f the organization's col	lection?	Yes 1	No
Part IV Escrow and Custodia 9, or reported an amo	I Arrangement unt on Form 9	t s Complete if oi 90, Part X, line	rganization answer 21	ed 'Yes' to Form 9	90, Part IV, Iir	ie .
1a Is the organization an agent, trus included on Form 990, Part X?				er assets not	Yes	No
b If 'Yes,' explain the arrangement	in Part XIV and o	omplete the following	ng table			
_					Amount	
c Beginning balance				1 c		
d Additions during the year				1 d		
e Distributions during the year				1e	····	
f Ending balance		00 D-4V I 013		1f		
2a Did the organization include an a		90, Part X, line 217			Yes I	No
b If 'Yes,' explain the arrangement Part V Endowment Funds Co		aration answer	od 'Voc' to Form 00	00 Part IV June 10		
Fait V Elidowine it Fullds Co	(a) Current year	(b) Prior year		·····' _Y · · · · · · · · · · · · · · · · · · ·	(e) Four years ba	
1 a Beginning of year balance	(a) Current year	(b) Filor year	(c) Two years back	(u) Three years back	(e) Four years be	<u>ack</u>
b Contributions			-			
					+	
c Net Investment earnings, gains, and losses					-	
d Grants or scholarships						
e Other expenditures for facilities and programs					ļ	
f Administrative expenses	_ .					
g End of year balance		<u> </u>			1	
2 Provide the estimated percentag	•	balance held as				
a Board designated or quasi-endov		 %				
b Permanent endowment	8					
c Term endowment	%					
3a Are there endowment funds not organization by	in the possession	of the organization	that are held and admi	nistered for the	Yes	No
(i) unrelated organizations					3a(i)	
(ii) related organizations					3a(ii)	
b If 'Yes' to 3a(II), are the related of	-				3b	
4 Describe in Part XIV the intende						
Part VI Investments-Land, B		Equipment. See	Form 990, Part X			
Description of investmen	t (a)	Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated Depreciation	(d) Book Valu	ie
1 a Land	<u> </u>			· · · · · · · · · · · · · · · · · · ·		
b Buildings						
c Leasehold improvements						
d Equipment	<u> </u>		2,645.	2,094.	5	551.
e Other						
Total. Add lines 1a through 1e (Colum	nn (d) must equal	Form 990, Part X, o	olumn (B), line 10(c))	<u> </u>		551.
BAA				Sched	dule D (Form 990)	2009

Schedule I	D (Form 990) 2009 Bravo Foundation,	Inc.	11-364	5713 Page 3
Part VII	Investments-Other Securities See Fe	orm 990, Part X, line	12. N/A	
•	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valua Cost or end-of-year mark	tion ket value
Financial	derivatives			
Closely-he	eld equity interests			
Other				
		· - · · · · · · · · · · · · · · · · · ·		
		-		
			· · · · · · · · · · · · · · · · · · ·	
	and (h) must a surel forces (000 Part V and (D) land 100 Part	-		
	imn (b) must equal Form 990 Part X, col (B) line 12)	Farma 000 Dark V Iva	- 12\ N/A	
Part VII	I Investments—Program Related (See			
	(a) Description of investment type	(b) Book value	(c) Method of valua Cost or end-of-year mark	tion vet value
-			Cost or end-or-year man	Net value
				
		 		
				
	· · · · · · · · · · · · · · · · · · ·			
-				
Total (Colum	mn (b) must equal Form 990, Part X, Col (B) line 13)			
Part IX	Other Assets (See Form 990, Part X,	line 15) N/A		
	(a) De	escription		(b) Book value
				•
		•		
-		· · · · · · · · · · · · · · · · · · ·		
				····
	· - · · · · · · · · · · · · · · · · · ·			
				
Total (C	olumn (h) must squal Form 000, Bort V, and (B)	line 15)		<u> </u>
Part X	olumn (b) must equal Form 990, Part X, col (B),			
rank	Other Liabilities (See Form 990, Part	1	<u> </u>	
	(a) Description of Liability	(b) Amount	\dashv	
	ncome Taxes		4	
Held i	or Agencies/Others	130,710	<u>) . </u>	
			_	
			_	
			_	
			\neg	
			_	
			7	
			-	
Total (Colo	ımn (b) must equal Form 990, Part X, col (B) line 25)	130,710	$\overline{}$	
for uncert	Footnote In Part XIV, provide the text of the footain tax positions under FIN 48	inote to the organization's	s financial statements that reports the	organization's liability

Schedule D (Form 990) 2009	Bravo Foundation, Inc.	11-	-3645713	Page 4
Part XI Reconciliatio	on of Change in Net Assets from Form	990 to Financial Statements		
1 Total revenue (Form 99	90, Part VIII,column (A), line 12)		1,	420,600.
2 Total expenses (Form 9	990, Part IX, column (A), line 25)			398,243.
	the year Subtract line 2 from line 1			22,357.
4 Net unrealized gains (le	osses) on investments			
5 Donated services and i	use of facilities			
6 Investment expenses				
7 Prior period adjustmen	its			
8 Other (Describe in Part	t XIV)			
9 Total adjustments (net)) Add lines 4 through 8			
10 Excess or (deficit) for t	the year per audited financial statements. Combii	ne lines 3 and 9		22,357.
Part XII Reconciliatio	on of Revenue per Audited Financial St	atements With Revenue per Re	turn	
1 Total revenue, gains, a	and other support per audited financial statement	S	1 1,	472,444.
2 Amounts included on la	ine 1 but not on Form 990, Part VIII, line 12			
a Net unrealized gains of	n investments	2a		
b Donated services and i	use of facilities	2b 51,844.		
c Recoveries of prior year	ar grants	2c		
d Other (Describe in Part	_	2d		
e Add lines 2a through 2			2 e	51,844.
3 Subtract line 2e from li				420,600.
4 Amounts included on F	Form 990, Part VIII, line 12, but not on line 1			
	not included on Form 990, Part VIII, line 7b.	4 a		
b Other (Describe in Part		4b		
c Add lines 4a and 4b	····,	1.2	4c	
	es 3 and 4c. (This must equal Form 990, Part I, I	line 12).		420,600.
	on of Expenses per Audited Financial S			
•	sses per audited financial statements			450,087.
•	ine 1 but not on Form 990, Part IX, line 25			
a Donated services and i		2a 51,844.		
b Prior year adjustments		2b		
c Other losses		2c		
d Other (Describe in Par	t XIV)	2d		
e Add lines 2a through 2	•		2 e	51,844.
3 Subtract line 2e from li				398,243.
	Form 990, Part IX, line 25, but not on line 1:	!		
	not included on Form 990, Part VIII, line 7b.	4a		
b Other (Describe in Par		46		
c Add lines 4a and 4b	· · · · · · ·	1-1	4 c	
	nes 3 and 4c (This must equal Form 990, Part I,	line 18.)		,398,243.
	tal Information			
Complete this part to provide	te the descriptions required for Part II, lines 3, 5, 1, line 8, Part XII, lines 2d and 4b, and Part XIII,	and 9, Part III, lines 1a and 4, Part IV, lines 2d and 4b Also complete this pa	lines 1b and 2 rt to provide ai	tb; Part V, ny additional
				- -
			_ _	
				

Part XIV Supplemental Information (continued)
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Schedule D (Form 990) 2009 Bravo Foundation, Inc.

11-3645713

Page 5

SCHEDULE O (Form 990) .

Supplemental Information to Form 990

OMB No 1545 0047

2009

Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service

Name of the organization

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

► Attach to Form 990.

Bravo Foundation, Inc.	11-3645713
Part VI Section A Question 2	
Kelly Koppenhaver and William Spinner are employed by Bravo G	roup, a Pennsylvania
S-corporation 100% owned by Chris Bravacos and Dennis Walsh.	
Part VI Section A Question 8b	
Bravo Foundation does not have committees within the board of	directors.
Part IV Question 28a and 28c	
Although certain expense reimbursement transactions occurred	during the tax year
between Bravo Foundation and corporations 100% owned by interest	ested persons listed in
Part VII of Form 990, these expense reimbursement transaction	s were less than
\$100,000 in the aggregate (See Schedule R Part V). Furthermo	re, no single
transaction exceeded \$10,000 or 1% of Bravo Foundation's rever	nue and no transaction
occurred between Bravo Foundation and a family member of an in	nterested person.
Therefore, Schedule L Part IV was neither completed nor inclu-	ded in this return.
Part VII, Section A., Column E.	
Board members/officers of Bravo Foundation are also employees	/owners of Bravo Group,
Inc., EIN# 23-2988027, a related entity.	
Compensation from Bravo Group is not reported because the Vol	unteer Exception
applies.	
Form 990, Part VI, Line 6 - Explanation of Classes of Members or Shareholder	,
Chris Bravacos is the sole member of Bravo Foundation.	
Form 990, Part VI, Line 7a - How Members or Shareholders Elect Governing B	ody
Members are generally responsible for electing (1) other memb	ers and (2) the board
of directors.	
Form 990, Part VI, Line 11 - Form 990 Review Process	
Board members review Form 990 with the paid preparer and appr	ove prior to filing.
All board members are provided with a copy of the finalized F	orm 990 prior to

Schedule O (Form 990) 2009	Page 2
Name of the organization Bravo Foundation, Inc.	Employer identification number 11-3645713
Form 990, Part VI, Line 11 - Form 990 Review Process (continu	ed)
filing.	
Form 990, Part VI, Line 12c - Explanation of Monitoring and En	forcement of Conflicts
Bravo Foundation's directors, officers, and key en	mployees periodically discuss
potential conflicts of interest between both new a	and existing contacts during
regularly scheduled board meetings.	·
Form 990, Part VI, Line 19 - Other Organization Documents Pul	blicly Available
Bravo Foundation does not make its governing documents	ments, conflict of interest policy,
or financial statements directly available to the	public. However, summarized
financial information is available through the Per	nnsylvania Bureau of Charitable
Organizations website and archives.	

	Employer identification number
Bravo Foundation, Inc.	11-3645713
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Schedule O (Form 990) 2009

Page 2

SCHEDULE R (Form 990)

Department of the Treasury internal Revenue Service

Name of the organization

Related Organizations and Unrelated Partnerships

Complete if the organization answered 'Yes' to Form 990, Part IV, lines 33, 34, 35, 36, or 37.
 Attach to Form 990.

2003

OMB No 1545 0047

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Open to Public Inspection

Employer identification number

Schedule R (Form 990) (2009) (F)
Direct controlling
entity (F)
Direct controlling entity Part II Identification of Related Tax-Exempt Organizations (Complete of the organization answered 'Yes' to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.) 11-3645713 (E)
Public charity status (if section 501(c)(3)) **(E)** End-of-year assets Part I Identification of Disregarded Entities (Complete of the organization answered 'Yes' to Form 990, Part IV, line 33.) (**D)**Exempt Code section (**D)** Total income TEEA5001L 02/05/10 (C)
Legal domicile (state or foreign country) (C) Legal domicile (state or foreign country) BAA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. (B) Primary activity Primary activity (A) (Ame, address, and EIN of related organization **(A)** Name, address, and EIN of disregarded entity Bravo Foundation, Inc

11-3645713 Page 2

Schedule R (Form 990) 2009 Bravo Foundation, Inc.

Identification of Related Organizations Taxable as a Partnership (Complete of the organization answered 'Yes' to Form 990, Part IV, line.34 because it had one or more related organizations treated as a partnership during the tax year.) Part III

חברמחאם ורוומת		מנינת הואפ	אוובמנוטונט ווכמו	ממ מים מים מים מים	Decause It had one of more related organizations acated as a partition still defined at year	7 13				
(A)	(B)	(2)	(e)	(E)	(F)	(5)	€	€. •	<u>ວ</u>	
Name, address, and EIN of	Primary Activity	Legal	Direct controlling entity	Predominant		Share of total income Share of end-of-year	Dispropor-	Code V-UBI	General	<u></u>
ופושנפת סנאשוויצשווסו		(state or	(state or				allocations?	20 of Schedule	partner	ر ح
		foreign		from tax under				χ. -		
		country)		sections 512-514)			Yes No	(Form 1065)	Yes	٩
									_	
'i i ! ! ! ! ! ! ! ! ! ! ! ! ! ! ! ! ! !			·							
 							<u>-</u>			
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									_	
111111111111111111111111111111111111111									_	
							_		•	

Name, address, and EIN of related organization Primary Activity Legal domicile Direct Type of entity Corp., S corp.
TW

Schedule R (Form 990) (2009)

TEEA5002L 02/05/10

BAA

11-3645713

Part V Transactions With Related Organizations (Complete of the organization answered 'Yes' to Form 990, Part IV, line 34, 35, or 36) Schedule R (Form 990) 2009 Bravo Foundation, Inc.

Note Complete Inc 1 if any antity is listed in Darte II III or IV of this schodula		^	Yes	9
Note Complete line in any carry is listed in a fact, in, or it is soliced. 1. During the tax year did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV		-	<u> </u>	ا د
a Receipt of (i) interest (ii) annuities (iii) royalities (iv) rent from a controlled entity	!	1a	_	×
b Gift, grant, or capital contribution to other organization(s)		1 b	_	×
c Gift, grant, or capital contribution from other organization(s)		1c	×	
d Loans or loan guarantees to or for other organization(s)		1d	×	×
e Loans or Ioan guarantees by other organization(s)		1e	×	احا
f Sala of accate to other organization(s)			<u>×</u>	
		: :	> 	۰۱,
g ruicilase of assets from one organization(s)		 - 4	< >	۔ اے
n Exchange of assets		=	١	ار
i Lease of facilities, equipment, or other assets to other organization(s)	I.	:=	×	\sim
j Lease of facilities, equipment, or other assets from other organization(s)		;=	× 	V
k Performance of services or membership or fundraising solicitations for other organization(s)	l	논	×	 ~
I Performance of services or membership or fundraising solicitations by other organization(s)	1	=	×	 ~
	<u> </u>	l m	×	
n Sharing of paid employees.	LI	- L	×	
• Dombing and to other president for avenuese			×	
o inclination series page to other organization for expenses		1	+	1.
p Reimbursement paid by other organization for expenses		-	<u>× </u>	~
q Other transfer of cash or property to other organization(s)		19	× 	Ų.
r Other transfer of cash or property from other organization(s)	1, ,_,	1.	×	ا ا
2 If the answer to any of the above is 'Yes,' see the instructions for information on who must complete this line, including covered relationships and transaction thresholds	thresholds			
(A) Name of other organization type (a-r)		(C) Amount involved	olved	
				1
(1) The Bravo Group, Inc			6,130	ا:
(2) The Bravo Group, Inc.			3,024	
(3) The Bravo Goun Inc.		7	42,342	~
				:1
(4) The Bravo Group, Inc.			15,826	ان
(5)				1
(9)				
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Part VI | Unrelated Organizations Taxable as a Partnership (Complete of the organization answered 'Yes' to Form 990, Part IV, line 37)

(H) General or managing partner? Ŷ Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total asset or gross revenue) that was not a related organization. See Instructions regarding exclusion for certain investment partnerships Yes Code V-UBI amount in box 20 of Schedule K-1 Form (1065) Dispropor-tionate allocations? 8 N Yes (E) Share of end-of-year assets Are all partners section 501(c)(3) organizations? Yes No (C) Legal domicile (state or foreign country) (B) Primary activity (A)
Name, address, and EIN of entity 1 i 1 1 1 1 1 1 1 1 1 1 ١

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