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

2010

Department of the Treasury
Internal Revenue Service

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

For calendar year 2010, or tax year beginning , 2010, and ending

G Check all that apply: ☐ Initial return ☐ Initial Return of a former public charity ☐ Final return
☐ Amended return ☐ Address change ☐ Name change

Name of foundation BR FOUNDATION		A Employer identification number 35-2014496
Number and street (or P.O. box number if mail is not delivered to street address) 2930 FRANKLIN STREET		B Telephone number (see the instructions) (219) 874-9609
City or town MICHIGAN CITY	State ZIP code IN 46360	C If exemption application is pending, check here <input type="checkbox"/>
H Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		D 1 Foreign organizations, check here <input type="checkbox"/> 2 Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>
I Fair market value of all assets at end of year (from Part II, column (c), line 16) \$ 1,064,354.	J Accounting method <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____	E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>
(Part I, column (d) must be on cash basis.)		F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see the instructions).)		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
REVENUE	1 Contributions, gifts, grants, etc. received (att sch)	55,720.			
	2 Ck <input type="checkbox"/> if the foundn is not req to att Sch B				
	3 Interest on savings and temporary cash investments	8,365.	8,365.		
	4 Dividends and interest from securities	1,704.	1,704.		
	5a Gross rents				
	b Net rental income or (loss)		L-6a Stmt		
	6a Net gain/(loss) from sale of assets not on line 10	14,555.			
	b Gross sales price for all assets on line 6a	114,894.			
	7 Capital gain net income (from Part IV, line 2)		14,555.		
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances				
b Less Cost of goods sold					
c Gross profit/(loss) (att sch)					
11 Other income (attach schedule)					
12 Total. Add lines 1 through 11	80,344.	24,624.			
ADMINISTRATIVE AND EXPENSES	13 Compensation of officers, directors, trustees, etc				
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees (attach schedule)				
	b Accounting fees (attach sch) L-16b Stmt	1,050.	1,050.		
	c Other prof fees (attach sch)				
	17 Interest				
	18 Taxes (attach schedule) (see instr) FOREIGN TAXES PAID	76.	76.		
	19 Depreciation (attach sch) and depletion				
	20 Occupancy				
	21 Travel, conferences, and meetings				
	22 Printing and publications				
23 Other expenses (attach schedule) See Line 23 Stmt	1,618.	1,618.			
24 Total operating and administrative expenses. Add lines 13 through 23	2,744.	2,744.			
25 Contributions, gifts, grants paid	83,646.				
26 Total expenses and disbursements. Add lines 24 and 25	86,390.	2,744.			
27 Subtract line 26 from line 12:					
a Excess of revenue over expenses and disbursements	-6,046.				
b Net investment income (if negative, enter -0-)		21,880.			
c Adjusted net income (if negative, enter -0-)					

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Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)		Beginning of year	End of year	
				(a) Book Value	(b) Book Value	(c) Fair Market Value
ASSETS	1	Cash – non-interest-bearing				
	2	Savings and temporary cash investments		820,094.	833,260.	833,260.
	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 the instructions)				
	7	Other notes and loans receivable (attach sch)				
		Less: allowance for doubtful accounts				
	8	Inventories for sale or use				
	9	Prepaid expenses and deferred charges				
	10a	Investments – U.S. and state government obligations (attach schedule)				
	b	Investments – corporate stock (attach schedule) L-10b Stmt		259,488.	302,174.	231,094.
	c	Investments – corporate bonds (attach schedule)		61,898.		
LIABILITIES	11	Investments – land, buildings, and equipment: basis				
		Less: accumulated depreciation (attach schedule)				
	12	Investments – mortgage loans				
	13	Investments – other (attach schedule)				
	14	Land, buildings, and equipment: basis				
		Less: accumulated depreciation (attach schedule)				
	15	Other assets (describe)				
	16	Total assets (to be completed by all filers – see instructions. Also, see page 1, item I)		1,141,480.	1,135,434.	1,064,354.
	17	Accounts payable and accrued expenses				
	18	Grants payable				
FUND ASSETS AND BALANCES	19	Deferred revenue				
	20	Loans from officers, directors, trustees, & other disqualified persons				
	21	Mortgages and other notes payable (attach schedule)				
	22	Other liabilities (describe)				
	23	Total liabilities (add lines 17 through 22)				
		Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.	<input type="checkbox"/>			
	24	Unrestricted				
	25	Temporarily restricted				
	26	Permanently restricted				
		Foundations that do not follow SFAS 117, check here and complete lines 27 through 31.	<input checked="" type="checkbox"/>			
	27	Capital stock, trust principal, or current funds				
	28	Paid-in or capital surplus, or land, building, and equipment fund		1,141,480.	1,135,434.	
	29	Retained earnings, accumulated income, endowment, or other funds				
	30	Total net assets or fund balances (see the instructions)		1,141,480.	1,135,434.	
	31	Total liabilities and net assets/fund balances (see the instructions)		1,141,480.	1,135,434.	

Part III Analysis of Changes in Net Assets or Fund Balances

1	Total net assets or fund balances at beginning of year – Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	1,141,480.
2	Enter amount from Part I, line 27a	2	-6,046.
3	Other increases not included in line 2 (itemize)	3	
4	Add lines 1, 2, and 3	4	1,135,434.
5	Decreases not included in line 2 (itemize)	5	
6	Total net assets or fund balances at end of year (line 4 minus line 5) – Part II, column (b), line 30	6	1,135,434.

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shares MLC Company)	(b) How acquired P — Purchase D — Donation	(c) Date acquired (month, day, year)	(d) Date sold (month, day, year)
1a Coram Healthcare Corp.	P	07/01/96	01/04/10
b Sequenom Inc	P	09/29/08	03/02/10
c Vistaprint NV	P	07/29/10	09/09/10
d Royal BK Scotland Group	P	11/04/08	10/12/10
e See Columns (a) thru (d)			

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a 1,699.		0.	1,699.
b 8,092.		3,548.	4,544.
c 18,217.		16,033.	2,184.
d 72,900.		47,470.	25,430.
e See Columns (e) thru (h)		33,288.	-19,302.

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(i) Gains (Column (h) gain minus column (k), but not less than -0-) or Losses (from column (h))
(i) Fair Market Value as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of column (i) over column (j), if any	
a			1,699.
b			4,544.
c			2,184.
d			25,430.
e See Columns (i) thru (l)			-19,302.

2 Capital gain net income or (net capital loss)	<div> <div>If gain, also enter in Part I, line 7</div> <div>If (loss), enter -0- in Part I, line 7</div> </div>	2	14,555.
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6):	<div> <div>If gain, also enter in Part I, line 8, column (c) (see the instructions) If (loss), enter -0- in Part I, line 8</div> </div>	3	

Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.)

If section 4940(d)(2) applies, leave this part blank.

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?

☐ Yes☒ No

If 'Yes,' the foundation does not qualify under section 4940(e). Do not complete this part.

1 Enter the appropriate amount in each column for each year, see the instructions before making any entries.

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (column (b) divided by column (c))
2009	66,911.	574,626.	0.116443
2008	76,398.	862,692.	0.088558
2007	62,846.	1,121,504.	0.056037
2006	64,477.	1,055,519.	0.061086
2005	23,623.	920,939.	0.025651

2 Total of line 1, column (d)	2	0.347775
3 Average distribution ratio for the 5-year base period — divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years	3	0.069555
4 Enter the net value of noncharitable-use assets for 2010 from Part X, line 5	4	622,875.
5 Multiply line 4 by line 3	5	43,324.
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	219.
7 Add lines 5 and 6	7	43,543.
8 Enter qualifying distributions from Part XII, line 4	8	75,746.

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions.

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 – see the instructions)

1 a	Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter 'N/A' on line 1 Date of ruling or determination letter. _____ (attach copy of letter if necessary – see instr.)		
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input checked="" type="checkbox"/> and enter 1% of Part I, line 27b	1	219.
c	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, column (b)		
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2	0.
3	Add lines 1 and 2	3	219.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4	0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5	219.
6	Credits/Payments:		
a	2010 estimated tax pmts and 2009 overpayment credited to 2010	6a	1,577.
b	Exempt foreign organizations – tax withheld at source	6b	
c	Tax paid with application for extension of time to file (Form 8868)	6c	
d	Backup withholding erroneously withheld	6d	
7	Total credits and payments. Add lines 6a through 6d	7	1,577.
8	Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached	8	
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9	
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	1,358.
11	Enter the amount of line 10 to be Credited to 2011 estimated tax 1,358. Refunded	11	

Part VII-A Statements Regarding Activities

	Yes	No
1 a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?		X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see the instructions for definition)?		X
If the answer is 'Yes' to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities		
c Did the foundation file Form 1120-POL for this year?		X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation \$ _____ (2) On foundation managers \$ _____		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers \$ _____		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? If 'Yes,' attach a detailed description of the activities		X
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the changes		X
4 a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		X
b If 'Yes,' has it filed a tax return on Form 990-T for this year?		N/A
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? If 'Yes,' attach the statement required by General Instruction T		X
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	X	
7 Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, column (c), and Part XV	X	
8 a Enter the states to which the foundation reports or with which it is registered (see the instructions) IN - Indiana		
b If the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If 'No,' attach explanation	X	
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2010 or the taxable year beginning in 2010 (see instructions for Part XIV)? If 'Yes,' complete Part XIV		X
10 Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names and addresses.	X	

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Part VII-A Statements Regarding Activities (Continued)

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If 'Yes', attach schedule (see instructions)	11		X
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008?	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address N/A	13	X	
14	The books are in care of BINA GUPTA Telephone no (219) 874-9609 Located at 2930 FRANKLIN STREET, MICHIGAN CITY, IN ZIP + 4 46360			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the year 15			
16	At any time during calendar year 2010, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for Form TD F 90-22.1. If 'Yes,' enter the name of the foreign country	16	Yes	No X

Part VII-B 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 foundation (either directly or indirectly):		
(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
(6) Agree to pay money or property to a government official? (Exception. Check 'No' if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
b If any answer is 'Yes' to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see the instructions)? Organizations relying on a current notice regarding disaster assistance check here	1b NA	
c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2010?	1c	X
2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)).		
a At the end of tax year 2010, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2010? If 'Yes,' list the years 20__ , 20__ , 20__ , 20__	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer 'No' and attach statement - see the instructions)	2b NA	
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here 20__ , 20__ , 20__ , 20__		
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
b If 'Yes,' did it have excess business holdings in 2010 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2010.)	3b NA	
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	X
b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2010?	4b	X

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Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)**5a** During the year did the foundation pay or incur any amount to:**(1)** Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?☐ Yes ☒ No**(2)** Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?☐ Yes ☒ No**(3)** Provide a grant to an individual for travel, study, or other similar purposes?☐ Yes ☒ No**(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)? (see instructions)☐ Yes ☒ No**(5)** Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?☐ Yes ☒ No**b** If any answer is 'Yes' to 5a(1)-(5), did **any** of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)?5b ☒ A

Organizations relying on a current notice regarding disaster assistance check here

☐**c** If the answer is 'Yes' to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?☐ Yes ☐ No

If 'Yes,' attach the statement required by Regulations section 53.4945-5(d)

6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?☐ Yes ☒ No**b** Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?6b ☐ X

If 'Yes' to 6b, file Form 8870.

7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?☐ Yes ☒ No**b** If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?7b ☒ A**Part VIII** Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors**1** List all officers, directors, trustees, foundation managers and their compensation (see instructions).

(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
BINA GUPTA 2930 FRANKLIN MICHIGAN CITY IN 46360	TRUSTEE 1.00	0.	0.	0.

2 Compensation of five highest-paid employees (other than those included on line 1— see instructions). If none, enter 'NONE.'

(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				
0				
0				
0				
0				

Total number of other employees paid over \$50,000

☐

None

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Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)**3** Five highest-paid independent contractors for professional services (see instructions). If none, enter 'NONE.'

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services		None

Part IX-A Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.

	Expenses
1	
2	
3	
4	

Part IX-B Summary of Program-Related Investments (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
1	
2	
All other program-related investments. See instructions.	
3	
Total. Add lines 1 through 3.	

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Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities	1a	247,059.
b	Average of monthly cash balances	1b	385,301.
c	Fair market value of all other assets (see instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	632,360.
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	1e	
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	632,360.
4	Cash deemed held for charitable activities. Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	9,485.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	622,875.
6	Minimum investment return. Enter 5% of line 5	6	31,144.

Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☐ and do not complete this part.)

1	Minimum investment return from Part X, line 6	1	31,144.
2a	Tax on investment income for 2010 from Part VI, line 5	2a	219.
b	Income tax for 2010. (This does not include the tax from Part VI.)	2b	
c	Add lines 2a and 2b	2c	219.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	30,925.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	30,925.
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	30,925.

Part XII Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc. — total from Part I, column (d), line 26	1a	75,746.
b	Program-related investments — total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	75,746.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b (see instructions)	5	219.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	75,527.

Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2009	(c) 2009	(d) 2010
1 Distributable amount for 2010 from Part XI, line 7				30,925.
2 Undistributed income, if any, as of the end of 2010:				
a Enter amount for 2009 only			0.	
b Total for prior years: 20____, 20____, 20____				
3 Excess distributions carryover, if any, to 2010:				
a From 2005	0.			
b From 2006	0.			
c From 2007	32,341.			
d From 2008	33,769.			
e From 2009	38,587.			
f Total of lines 3a through e	104,697.			
4 Qualifying distributions for 2010 from Part XII, line 4: ► \$ 75,746.				
a Applied to 2009, but not more than line 2a				
b Applied to undistributed income of prior years (Election required — see instructions)				
c Treated as distributions out of corpus (Election required — see instructions)				
d Applied to 2010 distributable amount				30,925.
e Remaining amount distributed out of corpus	44,821.			
5 Excess distributions carryover applied to 2010 (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:				
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	149,518.			
b Prior years' undistributed income. Subtract line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed				
d Subtract line 6c from line 6b. Taxable amount — see instructions		0.		
e Undistributed income for 2009. Subtract line 4a from line 2a. Taxable amount — see instructions			0.	
f Undistributed income for 2010. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2011				0.
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see instructions)				
8 Excess distributions carryover from 2005 not applied on line 5 or line 7 (see instructions)	0.			
9 Excess distributions carryover to 2011. Subtract lines 7 and 8 from line 6a	149,518.			
10 Analysis of line 9:				
a Excess from 2006	0.			
b Excess from 2007	32,341.			
c Excess from 2008	33,769.			
d Excess from 2009	38,587.			
e Excess from 2010	44,821.			

N/A

- b** Check box to indicate whether the foundation is a private operating foundation described in section ☐ 4942(j)(3) or ☐ 4942(j)(5)

(4) Gross investment income

[illegible]

Form 990-PF (2010)

Part XV	Supplementary Information (continued)
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3 Grants and Contributions Paid During the Year or Approved for Future Payment

[illegible]

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

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

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

OMB No 1545-0047

2010

Name of the organization

BR FOUNDATION

Employer identification number

35-2014496

Organization type (check one):

Filers of:

Form 990 or 990-EZ

Section:

- ☐ 501(c)(____) (enter number) organization
☐ 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation
☐ 527 political organization

Form 990-PF

- ☒ 501(c)(3) exempt private foundation
☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation
☐ 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

- ☒ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor (Complete Parts I and II.)

Special Rules

- ☐ For a section 501(c)(3) organization filing Form 990 or 990-EZ, that met the 33-1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- ☐ For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ, that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.
- ☐ For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ, that received from any one contributor, during the year, contributions for use *exclusively* for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year. ► \$ _____

Caution: An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF) but it **must** answer 'No' on Part IV, line 2 of their Form 990, or check the box on line H of its Form 990-EZ, or on line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

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

Schedule B (Form 990, 990-EZ, or 990-PF) (2010)

Name of organization

Employer identification number

BR FOUNDATION

35-2014496

Part I Contributors (see instructions.)

(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	RAKESH & BINA GUPTA 2930 FRANKLIN ST. MICHIGAN CITY IN 46360	\$ 49,035.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II if there is a noncash contribution.)
2	MEDICAL MANAGEMENT GROUP, INC 1501 WABASH ST. Michigan City IN 46360	\$ 6,685.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II if there is a noncash contribution.)
			Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
			Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
			Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
			Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
			Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

Name of organization

Employer identification number

BR FOUNDATION

35-2014496

Part II Noncash Property (see instructions)

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	ORIENTAL RUGS & VARIOUS OTHER ITEMS		
		\$ 49,035.	Various
2	VARIOUS EQUIPMENT		
		\$ 6,685.	Various
		\$	
		\$	
		\$	
		\$	

BAA

Schedule B (Form 990, 990-EZ, or 990-PF) (2010)

Form 990-PF
Part I, Line 6a

Net Gain or Loss From Sale of Assets

2009

Name **BR FOUNDATION** Employer Identification Number **35-2014496**

Asset Information:

Description of Property:		<u>Coram Healthcare Corp.</u>	
Date Acquired:	<u>07/01/96</u>	How Acquired:	<u>Purchased</u>
Date Sold:	<u>01/04/10</u>	Name of Buyer:	
Sales Price:	<u>1,699.</u>	Cost or other basis (do not reduce by depreciation)	<u>0.</u>
Sales Expense:		Valuation Method:	
Total Gain (Loss):	<u>1,699.</u>	Accumulation Depreciation:	
Description of Property:		<u>Sequenom Inc</u>	
Date Acquired:	<u>09/29/08</u>	How Acquired:	<u>Purchased</u>
Date Sold:	<u>03/02/10</u>	Name of Buyer:	
Sales Price:	<u>8,092.</u>	Cost or other basis (do not reduce by depreciation)	<u>3,548.</u>
Sales Expense:		Valuation Method:	
Total Gain (Loss):	<u>4,544.</u>	Accumulation Depreciation:	
Description of Property:		<u>Vistaprint NV</u>	
Date Acquired:	<u>07/29/10</u>	How Acquired:	<u>Purchased</u>
Date Sold:	<u>09/09/10</u>	Name of Buyer:	
Sales Price:	<u>18,217.</u>	Cost or other basis (do not reduce by depreciation)	<u>16,033.</u>
Sales Expense:		Valuation Method:	
Total Gain (Loss):	<u>2,184.</u>	Accumulation Depreciation:	
Description of Property:		<u>Royal BK Scotland Group</u>	
Date Acquired:	<u>11/04/08</u>	How Acquired:	<u>Purchased</u>
Date Sold:	<u>10/12/10</u>	Name of Buyer:	
Sales Price:	<u>72,900.</u>	Cost or other basis (do not reduce by depreciation)	<u>47,470.</u>
Sales Expense:		Valuation Method:	
Total Gain (Loss):	<u>25,430.</u>	Accumulation Depreciation:	
Description of Property:		<u>Amylin Pharmaceuticals</u>	
Date Acquired:	<u>10/25/10</u>	How Acquired:	<u>Purchased</u>
Date Sold:	<u>12/16/10</u>	Name of Buyer:	
Sales Price:	<u>7,292.</u>	Cost or other basis (do not reduce by depreciation)	<u>5,773.</u>
Sales Expense:		Valuation Method:	
Total Gain (Loss):	<u>1,519.</u>	Accumulation Depreciation:	
Description of Property:		<u>Americal International Group</u>	
Date Acquired:	<u>11/14/08</u>	How Acquired:	<u>Purchased</u>
Date Sold:	<u>12/20/10</u>	Name of Buyer:	
Sales Price:	<u>6,694.</u>	Cost or other basis (do not reduce by depreciation)	<u>5,383.</u>
Sales Expense:		Valuation Method:	
Total Gain (Loss):	<u>1,311.</u>	Accumulation Depreciation:	
Description of Property:		<u>Japan Airlines</u>	
Date Acquired:	<u>01/02/10</u>	How Acquired:	<u>Purchased</u>
Date Sold:	<u>12/10/10</u>	Name of Buyer:	
Sales Price:	<u>0.</u>	Cost or other basis (do not reduce by depreciation)	<u>8,532.</u>
Sales Expense:		Valuation Method:	
Total Gain (Loss):	<u>-8,532.</u>	Accumulation Depreciation:	
Description of Property:		<u>Readers Digest</u>	
Date Acquired:	<u>09/10/09</u>	How Acquired:	<u>Purchased</u>
Date Sold:	<u>12/31/10</u>	Name of Buyer:	
Sales Price:	<u>0.</u>	Cost or other basis (do not reduce by depreciation)	<u>13,600.</u>
Sales Expense:		Valuation Method:	
Total Gain (Loss):	<u>-13,600.</u>	Accumulation Depreciation:	

Form 990-PF, Page 1, Part I, Line 23

Line 23 Stmt

Other expenses:	Rev/Exp Book	Net Inv Inc	Adj Net Inc	Charity Disb
INVESTMENT FEES	40.	40.		
OTHER FEES	750.	750.		
ACCRUED INTEREST	828.	828.		

Total **1,618.** **1,618.**

Form 990-PF, Part IV, Capital Gains and Losses for Tax on Investment Income

Columns (a) thru (d)

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shares MLC Company)	(b) How acquired P-Purchase D-Donation	(c) Date acquired (month, day, year)	(d) Date sold (month, day, year)
Amylin Pharmaceuticals	P	10/25/10	12/16/10
American International Group	P	11/14/08	12/20/10
Japan Airlines	P	01/02/10	12/10/10
Readers Digest	P	09/10/09	12/31/10

Form 990-PF, Part IV, Capital Gains and Losses for Tax on Investment Income

Columns (e) thru (h)

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
7,292.		5,773.	1,519.
6,694.		5,383.	1,311.
0.		8,532.	-8,532.
0.		13,600.	-13,600.
Total		<u>33,288.</u>	<u>-19,302.</u>

Form 990-PF, Part IV, Capital Gains and Losses for Tax on Investment Income

Columns (i) thru (l)Complete only for assets showing gain in column (h) and owned
by the foundation on 12/31/69

(i) Fair Market Value as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of column (i) over column (j), if any	(l) Gains (column (h) gain minus column (k), but not less than -0-) or losses (from column (h))
			1,519.
			1,311.
			-8,532.
			-13,600.
Total			<u>-19,302.</u>

Form 990-PF, Page 11, Part XV, line 3a

Line 3a statement

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Founda- tion status of re- cipient	Purpose of grant or contribution	Person or Business Checkbox Amount
a Paid during the year				
<u>St. Paul Lutheran School</u>	<u>N/A</u>		<u>GENERAL PURPOSE</u>	Person or <input type="checkbox"/> Business <input checked="" type="checkbox"/>
<u>Michigan City IN 46360</u>				<u>1,000.</u>
<u>American Heart Association</u>	<u>N/A</u>		<u>Education</u>	Person or <input type="checkbox"/> Business <input checked="" type="checkbox"/>
<u>Chicago IL 60601</u>				<u>500.</u>
<u>LaPorte Sympany Orchestra</u>	<u>N/A</u>		<u>Arts</u>	Person or <input type="checkbox"/> Business <input checked="" type="checkbox"/>
<u>LaPorte IN 46350</u>				<u>1,000.</u>
<u>Boys and Girls Club</u>	<u>N/A</u>		<u>Arts</u>	Person or <input type="checkbox"/> Business <input checked="" type="checkbox"/>
<u>Michigan City IN 46360</u>				<u>500.</u>
<u>International Friendship Gardens</u>	<u>N/A</u>		<u>GENERAL PURPOSE</u>	Person or <input type="checkbox"/> Business <input checked="" type="checkbox"/>
<u>Michigan City IN 46360</u>				<u>250.</u>
<u>SAM</u>	<u>N/A</u>		<u>SCHOLARSHIP</u>	Person or <input type="checkbox"/> Business <input checked="" type="checkbox"/>
<u>Michigan City IN 46360</u>				<u>500.</u>
<u>Shyan Lal Vidya Mandai</u>	<u>N/A</u>		<u>School Bus</u>	Person or <input type="checkbox"/> Business <input checked="" type="checkbox"/>
<u>India</u>				<u>1,500.</u>
<u>St Anthony Hospital</u>	<u>N/A</u>		<u>GENERAL PURPOSE</u>	Person or <input type="checkbox"/> Business <input checked="" type="checkbox"/>
<u>Michigan City IN 46360</u>				<u>1,000.</u>
<u>Michigan City School for</u>	<u>N/A</u>		<u>GENERAL PURPOSE</u>	Person or <input type="checkbox"/> Business <input checked="" type="checkbox"/>
<u>Special Kids</u>				<u>2,025.</u>
<u>Michigan City IN 46360</u>				
<u>LaPorte County Vistor Bureau</u>	<u>N/A</u>		<u>GENERAL PURPOSE</u>	Person or <input type="checkbox"/> Business <input checked="" type="checkbox"/>
<u>Michigan City IN 46360</u>				<u>2,025.</u>
<u>Shirley Heinze Land Trust</u>	<u>N/A</u>		<u>GENERAL PURPOSE</u>	Person or <input type="checkbox"/> Business <input checked="" type="checkbox"/>
<u>Michigan City IN 46360</u>				<u>2,800.</u>
<u>Goodwill</u>	<u>N/A</u>		<u>GENERAL PURPOSE</u>	Person or <input type="checkbox"/> Business <input checked="" type="checkbox"/>
<u>Michigan City IN 46360</u>				<u>15,815.</u>

Total

28,915.

Form 990-PF, Page 1, Part I

Line 16b - Accounting Fees

Name of Provider	Type of Service Provided	Amount Paid Per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
APPLEGATE & COMPANY	TAX & ACCOUNTING SERVI	1,050.	1,050.		
Total		<u>1,050.</u>	<u>1,050.</u>		

Form 990-PF, Page 2, Part II, Line 10b

L-10b Stmt

Line 10b - Investments - Corporate Stock:	End of Year	
	Book Value	Fair Market Value
15000 SHS ALLIED IRISH BANKS	14,715.	13,200.
1000 SHS AMR CORP-DEL	4,658.	7,790.
5000 SHS BANGKOK BANK PUBLIC CO LTD	11,748.	24,250.
300 SHS COMPUTER ASSOCIATES INT'L INC (CA INC)	8,456.	7,332.
2000 SHS CITIZENS FIRST BANCORP	1,808.	60.
20000 SHS DURA AUTOMOTIVE SYSTEMS	9,808.	0.
200 SHS E TRADE FINANCIAL	3,208.	3,200.
1000 SHS EURO DISNEY	19,085.	5,310.
35000 SHS FANNIE MAE	17,156.	10,500.
10500 SHS FEDERAL-MOGUL CORP	14,095.	0.
2500 SHS FORD MOTOR CO	4,583.	41,975.
9372 SHS INSIGHT HEALTH SVCS	27,202.	9.
100 SHS INTEL CORP	4,206.	2,103.
2500 SHS IRELAND BANK	3,783.	6,625.
500 SHS MITSUBISHI TOKYO FIN'L GROUP	4,421.	2,705.
700 SHS MOTOROLA INC	12,411.	6,349.
2500 MOTORS LIQUIDATION COMPANY	7,506.	228.
2500 SHS NATIONAL BANK OF GREECE	4,283.	4,200.
6985 SHS NORTHFIELD LABORATORIES	10,485.	0.
5000 SHS NOVELL INC	38,000.	29,600.
100 SHS UNISYS CORP	10,500.	2,589.
793 SHS WTS FEDERAL MOGUL CORP	0.	333.
4800 SHS XEROX CORPORATION	52,469.	55,296.
2000 SHS YRC WORLDWIDE INC.	17,588.	7,440.
Total	<u>302,174.</u>	<u>231,094.</u>