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Form 990-PF

Department of the Treasury

Return of Private Foundation

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

OMB No 1545-0052

-			be able to use a copy of this			
_			1, 2010		NOV 30, 2011	
G	Checl	call that apply: Initial return		ormer public charity	Final return	
_		Amended return	Address chan	ge	Name change	
Na	ıme o	f foundation			A Employer identification	number
		BRAY FAMILY FOUNDATIO		aa		
<u> </u> -	b -	ROBERT BRAY, ESQ. & S		· 	23-2791988	
I NI	mber a	and street (or P O box number if mail is not delivered to street	address)	Room/suite	B Telephone number	
Ļ		1386 CINNAMON DRIVE		<u></u>	215-646-75	50
Cı	ty or t	own, state, and ZIP code	10024		C If exemption application is p	
Ŀ	<u> </u>	FORT WASHINGTON, PA	19034		D 1. Foreign organizations	s, check here
H	_	type of organization: X Section 501(c)(3) ex			Foreign organizations me check here and attach co	mputation
<u> </u>	•		Other texable arrivate founds		E If private foundation sta	tus was terminated
		arket value of all assets at end of year J Account		Accrual	under section 507(b)(1)	(A), check here
	rom . ►\$	Part II, col. (c), line 16) 446, 202. (Part I, colu	For Taxing Authorit	ies .	F If the foundation is in a	
	art I				under section 507(b)(1)	
L	arti	(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net	(d) Disbursements for charitable purposes
	1 4			1100110	N/A	(cash basis only)
	2	Contributions, gifts, grants, etc., received Check If the foundation is not required to attach Sch B			M/A	
	2	Interest on savings and temporary				
	\ A	cash investments Dividends and interest from securities	14,409.	14,409.		STATEMENT 1
	5.	Gross rents	14,407.	14,403.		DIWITHTHE NI T
	1 .	Net rental income or (loss)				
	6.0	Net gain or (loss) from sale of assets not on line 10	<6,651.	<u></u>		
Ë	"	Gross sales price for all assets on line 6a 88,072.	(0,031.			
Revenue	7	Capital gain net income (from Part IV, line 2)		0.		
å	8	Net short-term capital gain				
	9	Income modifications				***************************************
7	10a	Gross sales less returns and allowances			-	
70 12	Ι.	Less Cost of goods sold				
0	C	Gross profit or (loss)				,
7	11	Other income			-	
	12	Total. Add lines 1 through 11	7,758.	14,409.		
<u>-</u> م	13	Compensation of officers, directors, trustees, etc	0.	0.		0.
_	14	Other employee salaries and wages				
) 	15	Pension plans, employee benefits				
enses	16a	Legal fees				
Der	b	Accounting fees STMT 2	12,238.	0.		12,238.
ŠÄ	C	Other professional fees STMT 3	3,174.	3,174.		0.
` ≧	17	Interest				
Operating and Administrative Exp	18	Taxes STMT 4	395.	395.		0.
inis	19	Depreciation and depletion				
mp	20	Occupancy	<u>ŏ</u>		.,	
Ą	21	Travel, conferences, and meetings	SO-S			
ā	22	Printing and publications OCT 2 2 2017	181			·
į	23	Other expenses	15			
∍rat	24	Total operating and administrative EN, UT expenses. Add lines 13 through EN,	15 007	3 500		10 000
ő	0.5		15,807. 22,805.	3,569.		12,238.
		Contributions, gifts, grants paid Total expenses and disbursements	44,003.			22,805.
	26	Add lines 24 and 25	38,612.	3,569.		35 043
	27	Subtract line 26 from line 12:	30,012.	3,309.		35,043.
	1		<30,854.	Ĺ		
	Ι.	Excess of revenue over expenses and disbursements Net investment income (if negative, enter -0-)	730,034.	10,840.	······································	
	1	Adjusted net income (if negative, enter -0-)		10,040.	N/A	
0235	01 7-10	LHA For Paperwork Reduction Act Notice, see	the instructions		M/ FL	Form 990-PF (2010)
ا-ء،	, - IV					. v (2010)

Fo	m 99	BRAY FAMILY FOUNDATION O-PF (2010) ROBERT BRAY, ESQ. & SUS	SAN BRAY,MD,	CO-TR 2	23-2791988 Page 2		
	Part II Balance Sheets Atlached schedules and amounts in the description column should be for end-of-year amounts only (a) Book Value (b) Book Value (c) Fair Mar						
	art	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value		
	1	Cash - non-interest-bearing					
	2	Savings and temporary cash investments	30,649	9,23	9,233.		
	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					
	7	Other notes and loans receivable					
	ŀ	Less: allowance for doubtful accounts	<u> </u>				
ş	8	Inventories for sale or use					
Assets	9	Prepaid expenses and deferred charges					
Ä	10a	Investments - U.S. and state government obligations					
	b	Investments - corporate stock STMT 5	434,325	436,96	436,969.		
	C	Investments - corporate bonds					
	11	Investments - land, buildings, and equipment basis					
		Less accumulated depreciation	1				
	12	Investments - mortgage loans					
	13	Investments - other					
	14	Land, buildings, and equipment basis					
		Less accumulated depreciation					
	15	Other assets (describe)					
	16	Total assets (to be completed by all filers)	464,974	446,20	2. 446,202.		
	17	Accounts payable and accrued expenses					
	18	Grants payable					
es	19	Deferred revenue					
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons					
ë	21	Mortgages and other notes payable					
_	22	Other liabilities (describe)					
			_				
	23	Total liabilities (add lines 17 through 22)	C).	0.		
		Foundations that follow SFAS 117, check here					
s		and complete lines 24 through 26 and lines 30 and 31.					
Se	24	Unrestricted					
alar	25	Temporarily restricted					
Ö	26	Permanently restricted					
Ē		Foundations that do not follow SFAS 117, check here					
þ		and complete lines 27 through 31.	606 564				
Net Assets or Fund Balances	27	Capital stock, trust principal, or current funds	626,564				
SS	28	Paid-in or capital surplus, or land, bldg., and equipment fund	1.61.500		0.		
Ϋ́	29	Retained earnings, accumulated income, endowment, or other funds	<161,590				
ž	30	Total net assets or fund balances	464,974	446,20	4		
	0.4	Table Bak III and and and and and the design of the second	164 074	146 20			
_	31	Total liabilities and net assets/fund balances	464,974	446,20	2.		
Р	art	Analysis of Changes in Net Assets or Fund E	Balances				
		net assets or fund balances at beginning of year - Part II, column (a), line	30				
		t agree with end-of-year figure reported on prior year's return)			1 464,974.		
		amount from Part I, line 27a			2 <30,854.>		
		increases not included in line 2 (itemize) UNREALIZED	GAIN / LOSS		3 12,082.		
		nes 1, 2, and 3	-		4 446,202.		
5	Decre	ases not included in line 2 (itemize)			5 0.		
6	Total	net assets or fund balances at end of year (line 4 minus line 5) - Part II, c	olumn (b), line 30		446,202.		
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ROBERT BRAY, ESQ. & SUSAN BRAY, MD, CO-TR 23-2791988 Page 3

	nd Losses for Tax on I		t Income	Т (Б) !	low acqu - Purcha	ired T	n) Data a	ogurad T	(d) Data cold	
(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)						se ((c) Date acquired (mo., day, yr.)		(d) Date sold (mo., day, yr.)	
b SEE ATTACHED	STATEMENT			1						
b SEE ATTACHED	SIMIEMENI			<u> </u>						
d										
е		·····								
(e) Gross sales price	(f) Depreciation allowed (or allowable)	, , , ,	st or other basis expense of sale					in or (loss) (f) minus (g)	
<u>a</u>		<u> </u>								
b		-		\dashv					····	
d		 	·							
e 88,072.		 	94,72	3.					<6,651	
Complete only for assets showing	gain in column (h) and owned by	the foundation	•	3.		(I) G	Sains (Co	ol. (h) gain i		
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) E>	cess of col. (ı) col. (ı), ıf any			col. (l	c), but no	ot less than from col. (f	-0-) or	
а						_				
b										
<u>c</u>										
d				_						
e		ļ							<6,651	
Capital gain net income or (net capi	tal loss) $ \begin{cases} \text{If gain, also enter} \\ \text{If (loss), enter} \end{cases} $	er in Part I, line D- in Part I, line	7 7	}	2				<6,651	
Net short-term capital gain or (loss) If gain, also enter in Part I, line 8, co) as defined in sections 1222(5) a blumn (c).	nd (6):		}				N/A		
If (loss), enter -0- in Part I, line 8 Part V Qualification Un	der Section 4940(e) fo	r Reduced	Tay on Net	Inv	estme	nt Inco	ma	N/A	···	
/as the foundation liable for the sectio "Yes," the foundation does not qualify Enter the appropriate amount in ea	under section 4940(e). Do not c	omplete this pa	ırt.						Yes X No	
(a) Base period years Calendar year (or tax year beginning			Net value of no	(c) nchar			((Distribi col. (b) divi	(d) ition ratio ded by col (c))	
2009		36,878.				,650.			.08183	
2008		29,542.				,595.			.07212	
2007		32,845.				,145.			.06230	
2006		14,002. 12,215.				,045. ,129.			.07131	
2005	=	2,213.			//1	,149.			.05474	
Total of line 1, column (d) Average distribution ratio for the 5-y	vear hase period - divide the total	on line 2 by 5	or by the number	of ve:	ars		2		.34232	
the foundation has been in existence		on mio 2 by 0,	or by the number	or yea	113		3		.06846	
Enter the net value of noncharitable	-use assets for 2010 from Part X,	line 5					4		448,754	
Multiply line 4 by line 3							5		30,723	
Enter 1% of net investment income	(1% of Part I, line 27b)					•	6		108	
Add lines 5 and 6							7		30,831	
Enter qualifying distributions from F		n 1h and aa	late that no	a a 40	/ tou ===================================		8		35,043	
If line 8 is equal to or greater than lii See the Part VI instructions.	THE 7, CHECK ME DOX IN PART VI, IING	e io, and comp	ete mat part usini	y a 1%	o tax rate	;. 		r-	rm 990-PF (2010	

BRAY FAMILY FOUNDATION Form 990-PF (2010) ROBERT BRAY, ESQ. & SUSAN BRAY, MD, CO-TR 23-2791988 Page 4 Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions) 1a Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1. Date of ruling or determination letter: (attach copy of letter if necessary-see instructions) b Domestic foundations that meet the section 4940(e) requirements in Part V, check here X and enter 1% 108. c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b). 2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 2 3 4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 4 5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-5 108. 6 Credits/Payments: a 2010 estimated tax payments and 2009 overpayment credited to 2010 310. 6a b Exempt foreign organizations - tax withheld at source 6b c Tax paid with application for extension of time to file (Form 8868) 6с d Backup withholding erroneously withheld 6d 7 Total credits and payments. Add lines 6a through 6d 310. 8 Enter any penalty for underpayment of estimated tax. Check here _____ if Form 2220 is attached 8 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 9 202. 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 10 202. Refunded▶ 11 Enter the amount of line 10 to be: Credited to 2011 estimated tax 11 Part VII-A | Statements Regarding Activities 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in Yes No any political campaign? $\overline{\mathbf{X}}$ 1a X b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)? 1b 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? Х 1c d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. \triangleright \$ 0. (2) On foundation managers. \triangleright \$ e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. > \$ 0. 2 Has the foundation engaged in any activities that have not previously been reported to the IRS? X 2 If "Yes," attach a detailed description of the activities. 3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes Х 4a Did the foundation have unrelated business gross income of \$1,000 or more during the year? X 4a b If "Yes," has it filed a tax return on Form 990-T for this year? N/A 4b X 5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T 6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: By language in the governing instrument, or By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? X 7 Did the foundation have at least \$5,000 in assets at any time during the year? X If "Yes," complete Part II, col (c), and Part XV.

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10

X

8a Enter the states to which the foundation reports or with which it is registered (see instructions)

of each state as required by General Instruction G? If "No," attach explanation

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)

year 2010 or the taxable year beginning in 2010 (see instructions for Part XIV)? If "Yes," complete Part XIV

10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses

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

(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)?			
(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			ŀ
termination of government service, if terminating within 90 days.)			
b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			
section 53.4941(d)-3 or in a current notice regarding disaster assistance (see page 22 of the instructions)?	1b		Х
Organizations relying on a current notice regarding disaster assistance check here			·
c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected			l
before the first day of the tax year beginning in 2010?	1c		Х
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)):	1 1		
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	1 1		
before 2010? Yes X No			
If "Yes," list the years \blacktriangleright			
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 instructions.) N/A	2b		
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
>			
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
during the year?			
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	1 1		
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)	3ь	•	
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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BRAY FAMILY FOUNDATION Form 990-PF (2010) ROBERT BRAY, ESQ. & SUSAN BRAY, MD, CO-TR 23-2791988 Page 6 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 Yes X No (1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? (2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, Yes X No any voter registration drive? (3) Provide a grant to an individual for travel, study, or other similar purposes? Yes X No (4) Provide a grant to an organization other than a charitable, etc., organization described in section Yes X No 509(a)(1), (2), or (3), or section 4940(d)(2)? (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for Yes X No the prevention of cruelty to children or animals? 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)? N/A 5b 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 N/A Yes No expenditure responsibility for the grant? 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 Yes X No a personal benefit contract? b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 6b Х If "Yes" to 6b, file Form 8870. Yes X No 7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? N/A 7b b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors List all officers, directors, trustees, foundation managers and their compensation. (d) Contributions to employee benefit plans and deferred (b) Title, and average hours per week devoted to position (c) Compensation (e) Expense account, other (If not paid, (a) Name and address enter -0-) allowances compensation SEE STATEMENT 6 0. 0 0. 2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE." (d) Contributions to employee benefit plans and deferred (b) Title, and average hours per week devoted to position (e) Expense account, other (a) Name and address of each employee paid more than \$50,000 (c) Compensation allowances

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

Total. Add lines 1 through 3			0.
3		4	
All other program-related investments See instructions.			
		_	
2			
1 N/A		-	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 an	d 2.	Amount	
Part IX-B Summary of Program-Related Investments]	
4		-	
3		-	
		-	
2			
1N/A			
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical informumber of organizations and other beneficiaries served, conferences convened, research papers produced, etc.		Expenses	;
Part IX-A Summary of Direct Charitable Activities		····	
Total number of others receiving over \$50,000 for professional services	 -	-	0
	<u> </u>		
		ļ	
			
NONE	(b) Type of Service	(6) 6011	pensation
3 Five highest-paid independent contractors for professional services. If none, enter "NONE (a) Name and address of each person paid more than \$50,000	." (b) Type of service	Las Com	pensation
Part VIII Paid Employees, and Contractors (continued)	anagers, nignly		
ROBERT BRAY, ESQ. & SUSAN BRAY, MD, C [Part VIII] Information About Officers, Directors, Trustees, Foundation M		<u> 2791988 </u>	Page 7

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=			2/91900 Fage 0
P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	ndations, s	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	435,647.
b	Average of monthly cash balances	1b	435,647. 19,941.
C	Fair market value of all other assets	1c	·
d	Total (add lines 1a, b, and c)	1d	455,588.
е	Reduction claimed for blockage or other factors reported on lines 1a and		<u></u>
	1c (attach detailed explanation) le l 0 .		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	455,588.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	6,834.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	448,754.
6	Minimum investment return. Enter 5% of line 5	6	22,438.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and foreign organizations check here and do not complete this part.)	d certain	· · · ·
1	Minimum investment return from Part X, line 6	1	22,438.
2a	Tax on investment income for 2010 from Part VI, line 5		
b	Income tax for 2010. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	108.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	22,330.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	22,330.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	22,330.
Ρ	art XII Qualifying Distributions (see instructions)	•	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	35,043.
	Program-related investments - total from Part IX-B	1b	0.
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:		
а	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	35,043.
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	5	108.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	34,935.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of	ualifies for t	he section
	4940(e) reduction of tax in those years.		

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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				22,330.
2 Undistributed income, if any, as of the end of 2010		· · · · · · · · · · · · · · · · · · ·		
a Enter amount for 2009 only			0.	
b Total for prior years:		0		
3 Excess distributions carryover, if any, to 2010:		0.		
a From 2005				
b From 2006 8,566.				
c From 2007 7,034.				
dFrom 2008 9,408.				
eFrom 2009 14,679.				
f Total of lines 3a through e	39,687.	:		
4 Qualifying distributions for 2010 from				
Part XII, line 4: ►\$ 35,043.				
a Applied to 2009, but not more than line 2a			0.	
b Applied to undistributed income of prior				
years (Élection required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2010 distributable amount				22,330.
e Remaining amount distributed out of corpus	12,713.			
5 Excess distributions carryover applied to 2010 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:				
8 Corpus Add lines 3f, 4c, and 4e Subtract line 5	52,400.			
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		0.		:
d Subtract line 6c from line 6b. Taxable		_		į
amount - see instructions		0.		
e Undistributed income for 2009. Subtract line				
4a from line 2a. Taxable amount - see instr.			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	0.			
section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2005	0.			
not applied on line 5 or line 7	0.			,
9 Excess distributions carryover to 2011. Subtract lines 7 and 8 from line 6a	52,400.			
10 Analysis of line 9:	32,400.			
a Excess from 2006 8,566.				
b Excess from 2007 7,034.				
c Excess from 2008 9,408.				
dExcess from 2009 14,679.				
e Excess from 2010 12,713.				
1 1 1	I			Form 990-PF (2010)

Part XIV Private Operating Fo		tructions and Part VI		N/A	3
1 a If the foundation has received a ruling or	determination letter that	it is a private operating			
foundation, and the ruling is effective for	2010, enter the date of th	ne ruling	•		
b Check box to indicate whether the found	ation is a private operating	g foundation described	in section	4942(J)(3) or 494	42(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum	(a) 2010	(b) 2009	(c) 2008	(d) 2007	(e) Total
investment return from Part X for					_
each year listed					
b 85% of line 2a					
c Qualifying distributions from Part XII,					
line 4 for each year listed					
d Amounts included in line 2c not	Į				
used directly for active conduct of					
exempt activities			_		
e Qualifying distributions made directly					
for active conduct of exempt activities.					
Subtract line 2d from line 2c Complete 3a, b, or c for the alternative test relied upon: a "Assets" alternative test - enter: (1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)	"	· · ·			-
b "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter:			-		
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(III)					
(3) Largest amount of support from					_
an exempt organization (4) Gross investment income			 		
Part XV Supplementary Info	rmation (Complet	e this part only	if the foundation	had \$5,000 or mo	re in assets
at any time during t			ii iiio iodiidaiioii	40,000 01 1110	aro in accord
1 Information Regarding Foundation			<u>. </u>		
a List any managers of the foundation who		han 2% of the total con	ributions received by the t	oundation before the clos	e of any tax
year (but only if they have contributed m			,		
SEE STATEMENT 7					
b List any managers of the foundation who other entity) of which the foundation has			(or an equally large portio	n of the ownership of a pa	rtnership or
NONE	The figures and out				
2 Information Regarding Contributi	on, Grant, Gift, Loan, nly makes contributions to	• • • • •	•	ot accept unsolicited requi	ests for funds If
the foundation makes gifts, grants, etc. (see instructions) to indivi	duals or organizations (ınder other conditions, co	mplete items 2a, b, c, and	d
a The name, address, and telephone number	per of the person to whom	applications should be	addressed:		
SEE STATEMENT 8					
b The form in which applications should b	e submitted and informati	on and materials they s	hould include:	· · · · · · · · · · · · · · · · · · ·	
c Any submission deadlines:					
		Lauran abastable for the	loade of make been	they feet and	
d Any restrictions or limitations on awards	, such as by geographical	i areas, charitable fields	Kinas of institutions, or o	mer factors:	

Form 990-PF (2010) ROBERT BRAY, ESQ. & SUSAN BRAY, MD, CO-TR 23-2791988 Page 11

Part XV | Supplementary Information (continued)

Payment		
Foundation status of	Purpose of grant or	Amount
recipient	0011818011011	
recipient		
:		
		22 205
 	> 3a	22,805.
	Foundation status of	Foundation Purpose of grant or status of contribution

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.		business income		ded by section 512, 513, or 514	(e)
4.0	(a) Business	(b) Amount	(C) Exclu- sion	(d) Amount	Related or exempt function income
1 Program service revenue	code		code	Allouit	Tunction income
a b	-		┼─-		
b	-		+-		
d	- +		+-		
e	- +		+ -	·····	
f	-	 	1		
g Fees and contracts from government agencies	-		+-		
2 Membership dues and assessments		<u> </u>			
3 Interest on savings and temporary cash		 			
investments					
4 Dividends and interest from securities		-	14	14,409.	
5 Net rental income or (loss) from real estate:					
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal					
property			$oxed{oxed}$		<u> </u>
7 Other investment income					
8 Gain or (loss) from sales of assets other			آ ِ رِ		
than inventory			18	<6,651.	<u> </u>
9 Net income or (loss) from special events			<u> </u>		
10 Gross profit or (loss) from sales of inventory			<u> </u>		
11 Other revenue:					
<u>a</u>			<u> </u>		
Ь			1		
	- +		+		
C					
_					
c e		0		7 758	0
d e 12 Subtotal. Add columns (b), (d), and (e)		0.		7,758.	7 758
c d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e)		0.		7,758.	0 7,758
c d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.				13_	7,758
c d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations. Part XVI-B Relationship of Activities	s to the Accor	nplishment of E	xemp	t Purposes	7,758
c d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations. Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in	s to the Accor	mplishment of Excolumn (e) of Part XVI-A	xemp	t Purposes	7,758
c d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations. Part XVI-B Relationship of Activities	s to the Accor	mplishment of Excolumn (e) of Part XVI-A	xemp	t Purposes	7,758
d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations. Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in	s to the Accor	mplishment of Excolumn (e) of Part XVI-A	xemp	t Purposes	7,758
d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations. Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in	s to the Accor	mplishment of Excolumn (e) of Part XVI-A	xemp	t Purposes	7,758
c d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations. Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in	s to the Accor	mplishment of Excolumn (e) of Part XVI-A	xemp	t Purposes	7,758
c d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations. Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in	s to the Accor	mplishment of Excolumn (e) of Part XVI-A	xemp	t Purposes	7,758
c d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations. Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in	s to the Accor	mplishment of Excolumn (e) of Part XVI-A	xemp	t Purposes	7,758
c d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations. Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in	s to the Accor	mplishment of Excolumn (e) of Part XVI-A	xemp	t Purposes	7,758
d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations. Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in	s to the Accor	mplishment of Excolumn (e) of Part XVI-A	xemp	t Purposes	7,758
c d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations. Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in	s to the Accor	mplishment of Excolumn (e) of Part XVI-A	xemp	t Purposes	7,758
c d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations. Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in	s to the Accor	mplishment of Excolumn (e) of Part XVI-A	xemp	t Purposes	7,758
c d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations. Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in	s to the Accor	mplishment of Excolumn (e) of Part XVI-A	xemp	t Purposes	7,758
c d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations. Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in	s to the Accor	mplishment of Excolumn (e) of Part XVI-A	xemp	t Purposes	7,758
c d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations. Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in	s to the Accor	mplishment of Excolumn (e) of Part XVI-A	xemp	t Purposes	7,758
c d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations. Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in	s to the Accor	mplishment of Excolumn (e) of Part XVI-A	xemp	t Purposes	7,758
c d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations. Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in	s to the Accor	mplishment of Excolumn (e) of Part XVI-A	xemp	t Purposes	7,758
c d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations. Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in	s to the Accor	mplishment of Excolumn (e) of Part XVI-A	xemp	t Purposes	7,758
c d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations. Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in	s to the Accor	mplishment of Excolumn (e) of Part XVI-A	xemp	t Purposes	7,758
c d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations. Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in	s to the Accor	mplishment of Excolumn (e) of Part XVI-A	xemp	t Purposes	7,758

Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable

	Exempt Orgai	nizations									
1	Did the organization directly or ind	irectly engage in any of the following with any other organization	described in section 501(c) of		Yes	No					
	the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organiza	ations?	[
a	Transfers from the reporting found	dation to a noncharitable exempt organization of:		 							
	(1) Cash			1a(1)		_X_					
(2) Other assets											
b	b Other transactions:										
	(1) Sales of assets to a noncharitable exempt organization										
	(2) Purchases of assets from a no	oncharitable exempt organization		1b(2)		X					
	(3) Rental of facilities, equipment	, or other assets		1b(3)		X					
	(4) Reimbursement arrangement	S		1b(4)		<u> </u>					
	(5) Loans or loan guarantees			1b(5)		X					
	(6) Performance of services or m	embership or fundraising solicitations		1b(6)		X					
C	Sharing of facilities, equipment, m	ailing lists, other assets, or paid employees		1c		X					
d		s "Yes," complete the following schedule. Column (b) should alwa			ets,						
	or services given by the reporting	foundation. If the foundation received less than fair market value	in any transaction or sharing arrangement, sh	ow in							
	<u> </u>	other assets, or services received.									
(a)∟	ine no (b) Amount involved	(c) Name of noncharitable exempt organization	(d) Description of transfers, transactions, and st	naring arra	ngeme	nts					
		N/A									
	_										
			<u> </u>								

							_							
			_											
2a	ls the	founda	tion direc	tly or indir	ectly affilia	ted with,	or related	l to, one o	r more tax-	exempt or	ganızatıo	ns descr	ribed	
	ın sec	tion 50	1(c) of th	e Code (ot	her than se	ection 501	1(c)(3)) o	r ın sectio	n 527 ?					

Yes	X	No
_		
nohin		

b If "Y	es," complete the following schedule.		
	(a) Name of organization	(b) Type of organization	(c) Description of relationship
	N/A		
	···		
			·
Sign	Under penalties of perjury, I declare that I have examined this retu and complete Declaration of preparer (other than taxpeyer or fidu		

Here Xusan of Signature of officer or trustee Title Preparer's signature Check Print/Type preparer's name PTIN self- employed

Paid JANE UHR Preparer Firm's name ► KREISCHER MILLER **Use Only**

Fırm's EIN ▶

Firm's address ▶ 100 WITMER ROAD, SUITE 350 HORSHAM, PA 19044-2369

(215)441-4600 Phone no. Form **990-PF** (2010)

023622 04-26-11

PAGE

1 OF 1

Part IV | Gapital Gains and Losses for Tax on Investment Income **(b)** How acquired P - Purchase D - Donation (a) List and describe the kind(s) of property sold, e.g., real estate, (c) Date acquired (d) Date sold 2-story brick warehouse; or common stock, 200 shs. MLC Co. (mo., day, yr.) (mo., day, yr.) 200.00 SH. ENTERPLUS CORP 02/28/0501/25/11 200.00 SH. 11/12/9901/25/11 INTEL CORP P c 100.00 SH. INTEL CORP \overline{P} 10/25/0001/25/11 d 300.00 SH. FORD CAP P 06/15/0403/15/11 e 200.00 SH. CALLABLE P 06/22/0403/15/11 f 575.50 SH. AMERICAN ELECTRIC POWER INC. P 12/27/0407/06/11 244.50 SH. INC P 01/04/0507/06/11 h 240.00 SH. AQUA AMERICA INC. P 06/10/04/10/27/11 200.00 SH. ENERPLUS CORP 02/28/0510/27/11 P 180.00 SH. INTEL CORP 03/21/0310/27/11 P CAPITAL GAINS DIVIDENDS m n 0 (g) Cost or other basis (f) Depreciation allowed (h) Gain or (loss) (e) Gross sales price (or allowable) plus expense of sale (e) plus (f) minus (g) 6,293 7,530 <1,237.>4,288. 7,631. <3,343.> b 4,450. <2,306.> 2,144. С 15,099. 16,573. <1,474.>d 10,066. 11,290. <1,224.>е 22,128. 22,886. <758.> 9,401. 9,686. <285.> 5,285. 3,676. 1,609. 5,670. 7,530. <1,860.> 4,482. 3,471. 1,011.3,216. 3,216. m n 0 Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (I) Losses (from col. (h)) Gains (excess of col. (h) gain over col. (k), (j) Adjusted basis (k) Excess of col. (ı) (i) F.M.V. as of 12/31/69 but not less than "-0-") as of 12/31/69 over col. (j), if any <1,237.> a <3,343.>b <2,306.> C <1,474.> d $\overline{<1,224.}>$ <758.> <285.> g 1,609. h <1,860.>1,011. 3,216. m n 0 If gain, also enter in Part I, line 7 2 Capital gain net income or (net capital loss) If (loss), enter "-0-" in Part I, line 7 2 <6,651.> 3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). If (loss), enter "-0-" in Part I, line 8 N/A 3

FORM 990-PF DIVIDEND	S AND INTER	EST FROM SI	ECURITIES	STATEMENT 1
SOURCE	GROSS	AMOUNT	CAPITAL GAINS DIVIDENDS	COLUMN (A) AMOUNT
SCHWAB WELLS FARGO	-	6,506. 11,119.	2,780. 436.	3,726. 10,683.
TOTAL TO FM 990-PF, PART I, I	N 4	17,625.	3,216.	14,409.
FORM 990-PF	ACCOUNTI	NG FEES		STATEMENT 2
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST MENT INCOM		
ADMINISTRATIVE FEES ACCOUNTING FEES	10,443. 1,795.		0.	10,443. 1,795.
TO FORM 990-PF, PG 1, LN 16B	12,238.		0.	12,238.
FORM 990-PF C	THER PROFES	SIONAL FEE:	5	STATEMENT 3
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST		(D) CHARITABLE
	I Dit Bookb	MENT INCO	ME NET INCOM	
INVESTMENT FEES	3,174.			
INVESTMENT FEES TO FORM 990-PF, PG 1, LN 16C		3,1	74.	E PURPOSES
-	3,174.	3,1	74.	PURPOSES 0. 0.
TO FORM 990-PF, PG 1, LN 16C	3,174. 3,174.	3,1	(C) ADJUSTED	STATEMENT 4 (D) CHARITABLE
TO FORM 990-PF, PG 1, LN 16C =	3,174. 3,174. TAX (A) EXPENSES	3,1° 3,1° 3,1° ES (B) NET INVES' MENT INCOM	(C) ADJUSTED	STATEMENT 4 (D) CHARITABLE

FORM 990-PF	CORPORATE STOCK		STATI	EMENT 5		
DESCRIPTION		BOOK VALUI		FAIR MARKET VALUE		
WELLS FARGO CHARLES SCHWAB		265,25 171,73		265,250. 171,719.		
TOTAL TO FORM 990-PF, PART I	I, LINE 10B	436,96	59.	436,969.		
	- LIST OF OFFICERS, I S AND FOUNDATION MANA		STATI	емент 6		
NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT		
SUSAN H. BRAY, M.D. PHILADELPHIA, PA	PRESIDENT 0.00	0.	0.	0.		
ROBERT J. BRAY, ESQ. YARDLEY, PA	V-P, SEC. 0.00	0.	0.	0.		
MOLLY E. O'NEILL ORELAND, PA	TREASURER 0.00	0.	0.	0.		
BRIAN J. BRAY FT. WASHINGTON, PA	DIRECTOR 0.00	0.	0.	0.		
JOANNE M. KYLE ORELAND, PA	DIRECTOR 0.00	0.	0.	0.		
ANNE S. MUIR COLLEGVILLE, PA	DIRECTOR 0.00	0.	0.	0.		
TOTALS INCLUDED ON 990-PF, P.	AGE 6, PART VIII	0.	0.	0.		

FORM 990-PF

PART XV - LINE 1A LIST OF FOUNDATION MANAGERS STATEMENT

7

NAME OF MANAGER

SUSAN H. BRAY, M.D. ROBERT J. BRAY, ESQ. FORM 990-PF

GRANT APPLICATION SUBMISSION INFORMATION PART XV, LINES 2A THROUGH 2D

STATEMENT

8

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

BRAY FAMILY FOUNDATION P.O. BOX 626 FT WASHINGTON, PA 19034

TELEPHONE NUMBER

215-646-7550

FORM AND CONTENT OF APPLICATIONS

NO SPECIFIC FORM.

ANY SUBMISSION DEADLINES

NONE

RESTRICTIONS AND LIMITATIONS ON AWARDS

CONTRIBUTIONS WILL BE MADE TO ORGANIZATIONS ORGANIZED UNDER SECTION 501(C) OF THE INTERNAL REVENUE CODE, INCLUDING BUT NOT LIMITED TO CHARITIES QUALIFYING UNDER BROAD SUPPORT PROVISIONS (501(C)(3)) AND TO THE SUPPORT OF PERSONS WHO REQUIRE MEDICAL ASSISTANCE TO IMPROVE OR MAINTAIN A REASONABLE LIFESTYLE UNDER CONDITIONS OF EXTREME NEED.

FORM 990-PF

9

STATEMENT

PAID	DURING THE TEAR		
RECIPIENT NAME AND ADDRESS	RECIPIENT RELATIONSHIP AND PURPOSE OF GRANT	RECIPIENT STATUS	TNUOMA
ARCHBISHOP JOHN CARROL HIGH SCHOOL 211 MATSON FORD ROAD RADNOR , PA 19087	NONE CHARITABLE	EDUCATION	3,500.
CONCERN 49 EASTON ROAD, SUITE 202 WILLOW GROVE, PA 19090	NONE CHARITABLE	PUBLIC	1,000.
FORT WASHINGTON ELEMENTARY SCHOOL PTA HIGHLAND/FORT WASHINGTON AVENUES FT WASHINGTON , PA 19034	NONE CHARITABLE	EDUCATION	1,150.
GEARING UP PO BOX 26061 PHILADELPHIA , PA 19128	NONE CHARITABLE	PUBLIC	1,000.
HANDI-CRAFTERS 215 BARLEY SHEAF ROAD PO BOX 72646 THORNDALE, PA 19372	NONE CHARITABLE	PUBLIC	1,000.
ST. CATHERINE LABOURE MEDICAL CLINIC 5838 GERMANTOWN AVENUE PHILADELPHIA , PA 19144	NONE CHARITABLE	PUBLIC	2,500.
WE-PAC WEST PHILA ALLIANCE FOR CHILDREN 3603 HAMILTON STREET PHILADELPHIA , PA 19104	NONE CHARITABLE	PUBLIC	2,000.
PA HORTICULTURAL SOCIETY 100 N. 20TH STREET 5TH FLOOR PHILADELPHIA , PA 19103	NONE CHARITABLE	PUBLIC	600.

GRANTS AND CONTRIBUTIONS

PAID DURING THE YEAR

•BRAY• FAMILY FOUNDATION ROBERT B	RAY, ESQ.		23-2791988
SAINT.JOSEPH VILLA: SISTER MARY SNYDER 110 WEST WISSAHICKON AVENUE FLOURTOWN , PA 19031	NONE CHARITABLE	PUBLIC	1,000.
CHILDREN'S TUMOR FOUNDATION 95 PINE STREET 16TH FLOOR NEW YORK , NY 10269	NONE CHARITABLE	PUBLIC	500.
PHILADELPHIA CLASSICAL SYMPHONY 235 S. CAMAC STREET PHILADELPHIA , PA 19107	NONE CHARITABLE	PUBLIC	1,000.
CHESTNUT HILL CENTER FOR ENRICHMENT 8431 GERMANTOWN AVENUE PHILADELPHIA , PA 19118	NONE CHARITABLE	PUBLIC	400.
CHESTNUT HILL ROTARY FOUNDATION 119 WEST HIGHLAND AVENUE PHILADELPHIA , PA 19118	NONE CHARITABLE	PUBLIC	100.
THE CUSKEY FOUNDATION 4 THE KIDS, INC 318 BOXELDER DRIVE WEST CHESTER, PA 19380	NONE CHARITABLE	PUBLIC	2,000.
SOCIETY OF ST. VINCENT DEPAUL 120 ALISON ROAD ORELAND , PA 19075		PUBLIC	1,055.
LA SALLE ACADEMY 1434 NORTH SECOND STREET PHILADELPHIA , PA 19122	NONE CHARITABLE	EDUCATION	2,000.
ST MALACHY SCHOOL JOHANNA RUN 1429 NORTH 11TH STREET PHILADELPHIA , PA 19122	NONE CHARITABLE	EDUCATION	2,000.
TOTAL TO FORM 990-PF, PART XV, LI	NE 3A	· · · · · · · · · · · · · · · · · · ·	22,805.

Form 8868 (Rev. 1 2011)					Page 2
• If you are filing for an Additional (Not Automatic) 3-Month Ext	tension, c	complete only Part II and check this bo	х.	>	\mathbf{x}
Note. Only complete Part II if you have already been granted an a	utomatic	3-month extension on a previously filed	Form 8	8868	
• If you are filing for an Automatic 3-Month Extension, complet	te only Pa	rt I (on page 1).			
Part II Additional (Not Automatic) 3-Month E	xtensio	n of Time. Only file the original (no co	opies n	reeded)	
Name of exempt organization		-	Empl	oyer identification	number
Type or BRAY FAMILY FOUNDATION					
Print ROBERT BRAY, ESQ. & SUSAN BE	RAY, MI	D, CO-TR	2	3-2791988	
File by the extended Number, street, and room or suite no. If a P.O. box, so					
due date for 1386 CINNAMON DRIVE					
return See City, town or post office, state, and ZIP code. For a fo	reign add	ress, see instructions.			
FORT WASHINGTON, PA 19034					
Enter the Return code for the return that this application is for (file	a separa	te application for each return)			0 4
	•				
Application	Return	Application			Return
Is For	Code	Is For			Code
Form 990	01		, ,,	2 3 2 2	
Form 990-BL	02	Form 1041-A			08
Form 990-EZ	01	Form 4720			09
Form 990-PF	04	Form 5227			10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11
Form 990-T (trust other than above)	06	Form 8870			12
STOP! Do not complete Part II if you were not already granted	an auton	natic 3-month extension on a previou	sly file	d Form 8868.	
MICHELLE BRAY					
• The books are in the care of ▶ P.O. BOX 626 -	FT. V	WASHINGTON, PA 19038			
Telephone No. ► 215-646-7550		FAX No. ▶			
If the organization does not have an office or place of business	s in the Ur	nited States, check this box		▶	
• If this is for a Group Return, enter the organization's four digit (Group Exe	emption Number (GEN) If th	is is for	r the whole group, c	heck this
box ▶ . If it is for part of the group, check this box ▶	and atta	ch a list with the names and EINs of all	memb	ers the extension is	for.
4 I request an additional 3-month extension of time until	OCTO	BER 15, 2012.			
5 For calendar year, or other tax year beginning	DEC 1	, 2010 , and ending	NOV	30, 2011	·
6 If the tax year entered in line 5 is for less than 12 months, c			Final re	eturn	
Change in accounting period					
7 State in detail why you need the extension					
ADDITIONAL TIME IS NECESSARY	ro FU	RNISH A COMPLETE AND	AC	CURATE TAX	
RETURN.					
8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, 6	or 6069, e	nter the tentative tax, less any			
nonrefundable credits. See instructions	,		8a	\$	0.
b If this application is for Form 990-PF, 990-T, 4720, or 6069,	enter any	refundable credits and estimated			
tax payments made Include any prior year overpayment all	lowed as a	a credit and any amount paid			
previously with Form 8868.			8b	\$	310.
c Balance due. Subtract line 8b from line 8a. Include your pa	ıyment wit	th this form, if required, by using			
EFTPS (Electronic Federal Tax Payment System). See instru			8c	\$	<u>0.</u>
•		nd Verification			
Under penalties of perjury, I declare that I have examined this form, includ	ing accomp	panying schedules and statements, and to the	e best o	f my knowledge and b	elief,
it is true, correct, and complete, and that I am authorized to prepare this fo	N (I (I ^{mro}	,		7-12-1	19
Signature ► MMU UW Title ►	<u> [] []</u>		Date	▶ 1 · (L')	
1)				Form 8868 (Re	v 1-2011)

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