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DLN: 93491289006350

2018

OMB No. 1545-0052

Return of Private Foundation

Department of the Treasury

Form 990-PF

Internal Revenue Service

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

▶ Do not enter social security numbers on this form as it may be made public. ▶ Go to <u>www.irs.gov/Form990PF</u> for instructions and the latest information.

Open to Public Inspection

		ndar year 2018, or tax year beginning 12-01-20)18 , ar	nd en	ding 11-30-					
BR	AY FAM	INDATION IILY FOUNDATION IRAY ESQ & SUSAN BRAYMD CO-TR			23-2791988	entification numbe	ır			
		d street (or P.O. box number if mail is not delivered to street address)	Room/suite			1 /				
		INAMON`DRIVE	·		(215) 646-7550	mber (see instruction	ns)			
		n, state or province, country, and ZIP or foreign postal code			C If exemption application is pending, check here					
FOR	Γ WASH	INGTON, PA 19034			C If exemption	application is pendin	g, check here			
G Cł	neck al	ll that apply: \Box Initial return \Box Initial return of a	former public charity		D 1. Foreign or	ganizations, check he	ere			
		☐ Final return ☐ Amended return				ganizations meeting k here and attach co				
		☐ Address change ☐ Name change			·	ındation status was t	· -			
_	,	rpe of organization: Section 501(c)(3) exempt private				n 507(b)(1)(A), chec				
		n 4947(a)(1) nonexempt charitable trust Unther taxable trust Unther taxable trust Unther taxable trust Unit District District Counting method:	Cash Accru	ıal	E If the founds	ition is in a 60-montl	h termination —			
of '	year (f	From Part II, col. (c), ▶\$ 435,435 Continuing method: Continuing		iai		n 507(b)(1)(B), chec				
Pa	rt I	Analysis of Revenue and Expenses (The total	(a) Revenue and				(d) Disbursements			
		of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions).)	expenses per books	(b) N	let investment income	(c) Adjusted net income	for charitable purposes (cash basis only)			
	1	Contributions, gifts, grants, etc., received (attach schedule)								
	2	Check ► ✓ if the foundation is not required to attach Sch. B								
	3	Interest on savings and temporary cash investments								
	4	Dividends and interest from securities	7,840		7,840					
	5a	Gross rents								
<i>a</i> .	b	Net rental income or (loss)								
Ĕ	6a	Net gain or (loss) from sale of assets not on line 10	24,412	2						
Revenue	b	Gross sales price for all assets on line 6a 114,357			24.412					
œ	7 8	Capital gain net income (from Part IV, line 2)			24,412					
	9	Income modifications								
	10a	Gross sales less returns and allowances								
	ь	Less: Cost of goods sold								
	c	Gross profit or (loss) (attach schedule)								
	11	Other income (attach schedule)								
	12	Total. Add lines 1 through 11	32,252	2	32,252					
	13	Compensation of officers, directors, trustees, etc.	2,996	5	0		2,996			
	14	Other employee salaries and wages								
ses	15 16a	Pension plans, employee benefits								
<u></u>	b	Accounting fees (attach schedule)	% 8,800		0		0			
Ä		Other professional fees (attach schedule)	,							
II e	17	Interest								
E a	18	Taxes (attach schedule) (see instructions)								
≦ E	19	Depreciation (attach schedule) and depletion								
Ē	20	Occupancy								
۵ ک	21	Travel, conferences, and meetings								
ē	22	Printing and publications								
Operating and Administrative Expenses	23	Other expenses (attach schedule)	1,598	1	150		1,448			
er at	24	Total operating and administrative expenses.								
<u>ă</u>	25	Add lines 13 through 23	13,394 40,000	-	150		4,444			
_	25 26	Contributions, gifts, grants paid Total expenses and disbursements. Add lines 24 and	40,000				40,000			
	20	25	53,394		1 50		44,444			
	27	Subtract line 26 from line 12:								
	a	Excess of revenue over expenses and disbursements	-21,142							
	ь	Net investment income (if negative, enter -0-)			32,102					
	С	Adjusted net income (if negative, enter -0-)								

For	n 990-	PF (2018)													Page 2
Pa	rt II	Balance Sheets Sh	attached schedules ar should be for end-of-y	nd amoun zear amo	its in thu	e desc lv. (Se	ription e instr	column uctions.)		ing of year ook Value	-	b) Book		f year	Market Value
	1	Cash—non-interest-be							(8)	ook value	<u> </u>	D) DOOR	value	(C) Fall	
	2	Savings and temporar	ry cash investmer	nts .						28,572			6,503		6,503
	3	Accounts receivable	•												
		Less: allowance for do	oubtful accounts	<u> </u>											
	4	Pledges receivable													
		Less: allowance for do	oubtful accounts	<u>-</u>											
	5	Grants receivable .					- .								
	6	Receivables due from	officers, directors	s, truste	es, an	d othe	er								
		disqualified persons (a	attach schedule)	(see inst	tructio	ns) .									
	7	Other notes and loans	s receivable (atta	ch sched	lule) 🕨	·									
		Less: allowance for do	oubtful accounts	-									ı		
S	8	Inventories for sale or	ruse												
Assets	9	Prepaid expenses and	deferred charges	· .											
As	10a	Investments—U.S. an	nd state governme	ent oblig	ations	(atta	ch sch	nedule)							
	b	Investments—corpora	ate stock (attach s	schedule	e) .					409,413	ارچھ		428,932		428,932
	С	Investments—corpora	ate bonds (attach	schedul	e) .										
	11	Investments—land, bu	uildings, and equi	pment:	basis l	_ _			_						
		Less: accumulated de	preciation (attach	ı schedu	ıle) 🕨								ı		
	12	Investments—mortga	ige loans												
	13	Investments—other (a	attach schedule)												
	14	Land, buildings, and e	equipment: basis	▶											
		Less: accumulated de											'		
	15	Other assets (describe	e >					_)							
	16	Total assets (to be c	completed by all f	lers—se	e the										
		instructions. Also, see	e page 1, item I)							437,985			435,435		435,435
	17	Accounts payable and	l accrued expense	s											
	18	Grants payable .													
ties	19	Deferred revenue .													
bilit	20	Loans from officers, d	lirectors, trustees	, and ot	her dis	qualif	fied pe	ersons							
Liabilities	21	Mortgages and other i				,									
_	22	Other liabilities (descr													
	23	Total liabilities(add	lines 17 through	22) .						0			0		
		Foundations that fo	ollow SFAS 117,	check l	nere I	• [
ces		and complete lines													
lan	24	Unrestricted													
Ba	25	Temporarily restricted	d												
Fund Balances	26	Permanently restricted	:d												
Fu		Foundations that do	o not follow SFA	S 117,	check	here	• •	✓							
or		and complete lines	27 through 31.												
ets	27	Capital stock, trust pr	rincipal, or curren	t funds						626,564			626,564		
Assets	28	Paid-in or capital surp	olus, or land, bldg	., and e	quipm	ent fu	nd			0			0		
t A	29	Retained earnings, ac	cumulated incom	e, endov	wment	, or o	ther fo	unds		-188,579			-191,129		
Net	30	Total net assets or f	fund balances (see instr	ruction	ıs) .				437,985			435,435		
	31	Total liabilities and	net assets/fund	l balan	ces (s	ee ins	tructi	ons) .		437,985			435,435		
Pa	rt III	Analysis of Char	nges in Net As	sets o	r Fur	nd Ba	alanc	es							
1		ıl net assets or fund bal ear figure reported on p			ar—Pa	rt II, d			ne 30 (mu:	-	end-	1		4	37,985
2	Ente	er amount from Part I, I	line 27a									2			21,142
3	Othe	er increases not include	ed in line 2 (itemi:	:e) ▶ _						% j		3			18,592
4		lines 1, 2, and 3										4		4	35,435
5		reases not included in li								\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		5			0
6	l'ota	l net assets or fund bal	lances at end of y	ear (line	e 4 mii	nus lir	ne 5)-	-Part II,	column (b), line 30		6		4	35,435

	e the kind(s) of property sold (e.g., rehouse; or common stock, 200 shs		(b) How acquired P—Purchase D—Donation		(c) ite acquired o., day, yr.)	(d) Date sold (mo., day, yr.)
1aSee Additional Data Tabl	e					
b						
С						
d						
e						
(e) Gross sales price	(f) Depreciation allowed (or allowable)	Cost or	(g) other basis ense of sale	(h) Gain or (loss) (e) plus (f) minus (g)		
a See Additional Data Tabl	e					
b						
c						
d						
e						
Complete only for assets	showing gain in column (h) and ow	ned by the foundation	on 12/31/69			T)
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	Excess	(k) of col. (i) . (j), if any	со	Gains (Col. (ol. (k), but not	h) gain minus less than -0-) or om col.(h))
a See Additional Data Tabl	e					
b						
c						
d						
e						
2 Capital gain net income3 Net short-term capital g	or (net capital loss) { gain or (loss) as defined in sections 1	If gain, also enter in F If (loss), enter -0- in I 1222(5) and (6):	,	2		24,41
If gain, also enter in Pa in Part I, line 8	rt I, line 8, column (c) (see instruction	, , ,) - · · · · ·	з		
Part V Qualification l	Jnder Section 4940(e) for Re	duced Tax on Net	Investment I	ncome	 }	
-	rivate foundations subject to the sec					
ror optional use by domestic p	Trace foundations subject to the set	stion is rotal tax on in				
f section 4940(d)(2) applies, le Vas the foundation liable for th	eave this part blank. e section 4942 tax on the distributal	ble amount of any year	in the base perio	d?	П	es 🔽 No
f "Yes," the foundation does no	t qualify under section 4940(e). Do	not complete this part				
	nount in each column for each year;	see instructions before	making any entr	ies.		
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitab	le-use assets	(col.	(d) Distribution rat (b) divided by c	
2017	40,748		480,838			0.084744
2016	32,423		491,213			0.066006
2015	29,500		467,751			0.063068
2014	37,977		485,148			0.078279
2013	36,470		494,981			0.073680
2 Total of line 1, column (•		2			0.365777
	for the 5-year base period—divide to the following for the followi		.0, or by the 3			0.073155
•	ncharitable-use assets for 2018 from	,	4			441,978
5 Multiply line 4 by line 3		•	5			32,333
• • • •	ent income (1% of Part I, line 27b)		6			321
	7 Add lines 5 and 6					32,654
	8 Enter qualifying distributions from Part XII, line 4 ,					44,444
If line 8 is equal to or green instructions.	eater than line 7, check the box in Pa	art VI, line 1b, and con	plete that part us	ing a 1º	% tax rate. Se	e the Part VI

Page **6**

Pai	rt VII-B	Statements Regard	ling	Activities for Which	Form 4720 May Be	Required (continue	ed)				
5a	During th	e year did the foundation p	рау о	r incur any amount to:						Yes	No
	(1) Carry	on propaganda, or otherw	vise a	ttempt to influence legisl	ation (section 4945(e))?	Ves	✓ 1	No.			
	(2) Influe	ence the outcome of any sp	pecifi	c public election (see sect	tion 4955); or to carry	1es	ات	10			
	on, di	rectly or indirectly, any vo	ter re	egistration drive?		· · · □ Yes	V	No			
	(3) Provid	de a grant to an individual	for t	ravel, study, or other sim	ilar purposes?	Yes	-	No.			
		de a grant to an organizati tion 4945(d)(4)(A)? See ir			· -		·				
		de for any purpose other t				· · Yes	✓ 1	No			
		itional purposes, or for the		•							
b		swer is "Yes" to 5a(1)–(5),	•	•		I I VAC	✓ 1	No			
_		ns section 53.4945 or in a					_		5b		
	-	ions relying on a current n					· —				
c	-	wer is "Yes" to question 5		-							
ŭ		se it maintained expenditu			•						
		attach the statement requi		-		· · L Yes	ш	No			
6a		oundation, during the year,		-		ume on					
Va		I benefit contract?			• • • • • •						
ь		oundation, during the year,				res	⊻ 1	No	6b		No
D		o 6b, file Form 8870.	рау	premiums, directly or mu	infectiy, on a personal be	ment contract:	•	-	OD		NU
7-		·	a tha	foundation a party to a p	rabibited tay shelter tra	neartion?	_				
7a ი		ne during the tax year, wa				⊥ res	✓ 1	No	7b		
		I the foundation receive ar		•				⊢	/ D		
8		ndation subject to the sect		. , , ,			_				
	excess pa	rachute payment during th				res	✓ 1				
	rt VIII	Information About (and Contractors						Picy			
1	LIST All OI	ficers, directors, truste		b) Title, and average	(c) Compensation (If		·0 T				
	(a) Na	ame and address	,	hours per week devoted to position	not paid, enter -0-)	employee benefit plans deferred compensati	s and			se acc lowanc	
See /	Additional E	Data Table									
2	Compens	ation of five highest-pa	id en	nployees (other than tl	hose included on line :	 1—see instructions).]	If non	e, ent	er "l	NONE.	"
(~)	Namo and	address of each employee	لدنجم	(b) Title, and average		(d) Contributions t employee benefit		(a) E.	/nc=	se acco	
(a)		ore than \$50,000	paiu	hours per week	(c) Compensation	plans and deferred				owance	
				devoted to position		compensation					
NON											
]							
				1							
				1							
Tota	I number o	f other employees paid ov	er \$5	0.000							
			+5	,				Form	991)-PF (201
								. 51111		• \	

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Part VIII Information About Officers, Directors, Trustees, and Contractors (continued)	Foundation Managers, Highly Pa	id Employees,
3 Five highest-paid independent contractors for professional service	es (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.		0
Part IX-A Summary of Direct Charitable Activities List the foundation's four largest direct charitable activities during the tax year. Include rele	want statistical information such as the number	of
organizations and other beneficiaries served, conferences convened, research papers produced		Expenses
1		
2		
3		
4		
Part IX-B Summary of Program-Related Investments (see i	nstructions)	
Describe the two largest program-related investments made by the foundation during the	e tax year on lines 1 and 2.	Amount
1		
2		
All other program-related investments. See instructions.		
3		
Total. Add lines 1 through 3		0
		Form 990-PF (2018)

2a |

2b

2c

3

4

5

6

7

1a

1b

2

3a 3b

4

5

321

21,778

21.778

21.778

44,444

44.444

321

44.123

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Tax on investment income for 2018 from Part VI, line 5.

Distributable amount before adjustments. Subtract line 2c from line 1.

Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1. . .

Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26.

Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4

income. Enter 1% of Part I, line 27b. See instructions.

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for

Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:

Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment

Income tax for 2018. (This does not include the tax from Part VI.). . .

Qualifying Distributions (see instructions)

Amounts set aside for specific charitable projects that satisfy the:

the section 4940(e) reduction of tax in those years.

2a

3

4 5

6

1

2

3

4

5

b

Part XII

Undistributed Income (see instructions)

same amount must be shown in column (a).)

6 Enter the net total of each column as

a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5 **b** Prior years' undistributed income. Subtract line 4b from line 2b 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 e Undistributed income for 2017. Subtract line 4a from line 2a. Taxable amount-see instructions f Undistributed income for 2018. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2019 7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions) 8 Excess distributions carryover from 2013 not

applied on line 5 or line 7 (see instructions) . . 9 Excess distributions carryover to 2019.

Subtract lines 7 and 8 from line 6a.

10 Analysis of line 9: a Excess from 2014.

b Excess from 2015.

d Excess from 2017.

e Excess from 2018.

c Excess from 2016. .

indicated below:

Part XIII

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			Corpus	Years prior to 2017	2017	2018
1	Distributable amount for 2018 fr	om Part XI, line 7				21,778
2	Undistributed income, if any, as	of the end of 2018:				
а	Enter amount for 2017 only				0	
b	Total for prior years: 20,	20		0		
3	Excess distributions carryover, if	any, to 2018:				
а	From 2013	12,449				
b	From 2014	14,568				
С	From 2015	6,595				
d	From 2016	8,660				
е	From 2017	17,610				
f	Total of lines 3a through e		59,882			
4	Qualifying distributions for 2018	from Part				
	XII, line 4: ► \$	44,444				
а	Applied to 2017, but not more th	an line 2a			0	
b	Applied to undistributed income (Election required—see instructio			0		
С	Treated as distributions out of corequired—see instructions)		0			
d	Applied to 2018 distributable am	ount				21,778
_	Domaining amount distributed of	it of cornus	22 666			

(a)

(b)

(c)

•	quality mig all all all all all all all all all al				
	XII, line 4: ► \$				
а	Applied to 2017, but not more than line 2a			0	
b	Applied to undistributed income of prior years (Election required—see instructions)		0		
С	Treated as distributions out of corpus (Election required—see instructions)	0			
d	Applied to 2018 distributable amount				2
е	Remaining amount distributed out of corpus	22,666			

	XII, line 4: ► \$				
а	Applied to 2017, but not more than line 2a			0	
b	Applied to undistributed income of prior years (Election required—see instructions)		0		
С	Treated as distributions out of corpus (Election required—see instructions)	0			
d	Applied to 2018 distributable amount				21,778
е	Remaining amount distributed out of corpus	22,666			
5	Excess distributions carryover applied to 2018.	0			C
	(If an amount appears in column (d), the				

82,548

12.449

70,099

14.568 6,595

8,660

17,610

22,666

	Part XIV Private Operating Found	lations (see instr	uctions and Part V	/II-A, question 9)		9
	If the foundation has received a ruling or de foundation, and the ruling is effective for 20	termination letter th	at it is a private ope	rating		
b	Check box to indicate whether the organizat	ion is a private oper	ating foundation des	cribed in section \Box] 4942(j)(3) or □] 4942(j)(5)
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		(a) Tatal
	income from Part I or the minimum investment return from Part X for each	(a) 2018	(b) 2017	(c) 2016	(d) 2015	(e) Total
	year listed					
b	85% of line 2a					
С	Qualifying distributions from Part XII, line 4 for each year listed					
d	Amounts included in line 2c not used directly for active conduct of exempt activities					
е	Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the alternative test relied upon:					
а	"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					
С	"Support" alternative test—enter:					
	(1) Total support other than gross					
	investment income (interest,					
	dividends, rents, payments on securities loans (section					
	512(a)(5)), or royalties)					
	(2) Support from general public					
	and 5 or more exempt organizations as provided in					
	section $4942(j)(3)(B)(iii)$.					
	(3) Largest amount of support					
	from an exempt organization					
	(4) Gross investment income	L	L			
Pa	rt XV Supplementary Information			foundation had s	\$5,000 or more	in
1	assets at any time during the Information Regarding Foundation Man		ructions.)			
	List any managers of the foundation who ha before the close of any tax year (but only if	ve contributed more				n
	See Additional Data Table					
b	List any managers of the foundation who ow ownership of a partnership or other entity)				arge portion of the	
2	Information Regarding Contribution, G					
	Check here ▶ ☐ if the foundation only mal unsolicited requests for funds. If the foundation other conditions, complete items 2a, b, c, a	ition makes gifts, gra	ants, etc. to individu			
а	The name, address, and telephone number	or e-mail address of	the person to whom	applications should	be addressed:	
	BRAY FAMILY FOUNDATION PO BOX 626					
	FT WASHINGTON, PA 19034 (215) 646-7550					
b	The form in which applications should be su NO SPECIFIC FORM.	bmitted and informa	tion and materials th	ney should include:		
С	Any submission deadlines:					
	NONE	-l l	-1	Salas IV I CO III	Alleria de la constanta de la	
d	Any restrictions or limitations on awards, su factors:	, , , , , ,	·	•	·	
	CONTRIBUTIONS WILL BE MADE TO ORGAN BUT NOT LIMITED TO CHARITIES QUALIFYI REQUIRE MEDICAL ASSISTANCE TO IMPRO	NG UNDER BROAD S	SUPPORT PROVISION	IS (501(C)(3)) AND	TO THE SUPPORT O	F PERSONS WHO



er gross:	amounts unless otherwise indicated.		usiness income	Excluded by section		(e) Related or exemple function income
_	service revenue:	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	(See instructions
-	and contracts from government agencies					
_	ship dues and assessments					
Interest investm	on savings and temporary cash					
Dividen	ds and interest from securities			14	7,840	
Net ren	tal income or (loss) from real estate:					
	financed property					
	ebt-financed property					
	tal income or (loss) from personal property					
	vestment income (loss) from sales of assets other than					
invento	• ,			18	24,412	
Net inco	ome or (loss) from special events:			10	21,112	
	rofit or (loss) from sales of inventory					
Other r	evenue: a					
d						
d e						
d e			0		32,252	
d e Subtota Total.			0	13	32,252	32,2
d e Subtota Total.	al. Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) Add line 13 instructions to verify calcu B Relationship of Activities to the	lations.) le Accomplisi	hment of Exemp	ot Purposes	3	
d e Subtota Total. / (See wo	al. Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e)	lations.) e Accomplisi income is report	hment of Exempled in column (e) of	ot Purposes Part XVI-A contribu	ted importantly to	
d e Subtota Total. / (See wo Irt XVI	al. Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e)	lations.) e Accomplisi income is report	hment of Exempled in column (e) of	ot Purposes Part XVI-A contribu	ted importantly to	
d e Subtota Total. / (See wo art XVI	al. Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e)	lations.) e Accomplisi income is report	hment of Exempled in column (e) of	ot Purposes Part XVI-A contribu	ted importantly to	
d e Subtota Total. / (See wo Irt XVI	al. Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e)	lations.) e Accomplisi income is report	hment of Exempled in column (e) of	ot Purposes Part XVI-A contribu	ted importantly to	
subtota Total. / (See wo Irt XVI	al. Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e)	lations.) e Accomplisi income is report	hment of Exempled in column (e) of	ot Purposes Part XVI-A contribu	ted importantly to	
Subtota Total. / (See wo IT XVI	al. Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e)	lations.) e Accomplisi income is report	hment of Exempled in column (e) of	ot Purposes Part XVI-A contribu	ted importantly to	
Subtota Total. / (See wo IT XVI	al. Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e)	lations.) e Accomplisi income is report	hment of Exempled in column (e) of	ot Purposes Part XVI-A contribu	ted importantly to	
Subtota Total. / (See wo IT XVI	al. Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e)	lations.) e Accomplisi income is report	hment of Exempled in column (e) of	ot Purposes Part XVI-A contribu	ted importantly to	
Subtota Total. / (See wo rt XVI	al. Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e)	lations.) e Accomplisi income is report	hment of Exempled in column (e) of	ot Purposes Part XVI-A contribu	ted importantly to	
Subtota Total. / (See wo IT XVI	al. Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e)	lations.) e Accomplisi income is report	hment of Exempled in column (e) of	ot Purposes Part XVI-A contribu	ted importantly to	
Subtota Total. / (See wo rt XVI	al. Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e)	lations.) e Accomplisi income is report	hment of Exempled in column (e) of	ot Purposes Part XVI-A contribu	ted importantly to	
Subtota Total. / (See wo rt XVI	al. Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e)	lations.) e Accomplisi income is report	hment of Exempled in column (e) of	ot Purposes Part XVI-A contribu	ted importantly to	
Subtota Total. / (See wo rt XVI	al. Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e)	lations.) e Accomplisi income is report	hment of Exempled in column (e) of	ot Purposes Part XVI-A contribu	ted importantly to	
subtota Total. / (See wo Irt XVI	al. Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e)	lations.) e Accomplisi income is report	hment of Exempled in column (e) of	ot Purposes Part XVI-A contribu	ted importantly to	
d e Subtota Total. / (See wo Irt XVI	al. Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e)	lations.) e Accomplisi income is report	hment of Exempled in column (e) of	ot Purposes Part XVI-A contribu	ted importantly to	
subtota Total. / (See wo Irt XVI	al. Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e)	lations.) e Accomplisi income is report	hment of Exempled in column (e) of	ot Purposes Part XVI-A contribu	ted importantly to	
d e Subtota Total. / (See wo Irt XVI	al. Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e)	lations.) e Accomplisi income is report	hment of Exempled in column (e) of	ot Purposes Part XVI-A contribu	ted importantly to	
subtota Total. / (See wo Irt XVI	al. Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e)	lations.) e Accomplisi income is report	hment of Exempled in column (e) of	ot Purposes Part XVI-A contribu	ted importantly to	
subtota Total. / (See wo Irt XVI	al. Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e)	lations.) e Accomplisi income is report	hment of Exempled in column (e) of	ot Purposes Part XVI-A contribu	ted importantly to	
d e Subtota Total. / (See wo Irt XVI	al. Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e)	lations.) e Accomplisi income is report	hment of Exempled in column (e) of	ot Purposes Part XVI-A contribu	ted importantly to	
d e Subtota Total. / (See wo Irt XVI	al. Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e)	lations.) e Accomplisi income is report	hment of Exempled in column (e) of	ot Purposes Part XVI-A contribu	ted importantly to	
d e Subtota Total. / (See wo Irt XVI	al. Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e)	lations.) e Accomplisi income is report	hment of Exempled in column (e) of	ot Purposes Part XVI-A contribu	ted importantly to	

Form 990	D-PF (20	18)						Pa	ge 13
Part >	(VII	Information Re Exempt Organi		fers To and Transact	ions and I	Relationships With Nonchar	itable		
				any of the following with in section 527, relating to		ganization described in section 501 anizations?		Yes	No
a Trans	sfers fro	m the reporting foun	dation to a noncha	aritable exempt organizati	on of:				
(1)	Cash.						1a(1)		No
(2)	Other a	ssets					1a(2)		No
	r transa								
` '				anization			1b(1)		No
				npt organization			1b(2)		No
			=				1b(3)		No
							1b(4)		No
		<u>-</u>					1b(5)		No
			·	Iraising solicitations			1b(6)		No
	-			assets, or paid employees		should always show the fair market	1c		No
in an (a) Line N		action or sharing arra b) Amount involved		column (d) the value of t		ther assets, or services received. cription of transfers, transactions, and sh	aring arra	ngemer	nts
(a) Lille I	10.	b) Amount involved	(c) Name of Honor	aritable exempt organization	(u) Desc	cription of cransiers, cransactions, and sin	aring arra	ilgerrier	
	_								
	_								
	+								
	+								
	+								
2a Is the	e founda	ation directly or indire	l ectly affiliated with	n, or related to, one or mo	re tav-evemi	unt organizations			
desci	ribed in	,	r than section 501	(c)(3)) or in section 527?		· · · —	☑ No		
	-3, 0011	(a) Name of organization		(b) Type of organiz	ation	(c) Description of relat	ionship		

b II Tes, complete the following schedule.									
(a) Name of organization	(b) Type of organization	(c) Description of relationship							

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge. Sign May the IRS discuss this 2020-10-14 return Here with the preparer shown Signature of officer or trustee Title Date (see instr.)? 🗹 Yes 🗆 No Print/Type preparer's name Preparer's Signature Date PTIN Check if self-P00734965 employed ▶ 🔲 CHRISTOPHER M PEKULA Paid **Preparer** Firm's name ▶ KREISCHER MILLER Firm's EIN ▶23-1980475 **Use Only** Firm's address ▶ 100 WITMER ROAD SUITE 350 Phone no. (215) 441-4600 HORSHAM, PA 190442369

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d List and describe the kind(s) of property sold (e.g., real estate, (d) (b) (c) How acquired (a) 2-story brick warehouse; or common stock, 200 shs. MLC Co.) Date acquired Date sold P-Purchase (mo., day, yr.) (mo., day, yr.) D-Donation Ρ GUGGENHEIM TAXABLE MUNI MANAGED 2011-09-01 2019-07-19 GUGGENHEIM TAXABLE MUNI MANAGED Р 2011-09-01 2019-07-19 CORTEVA INC. Р 2009-12-03 2019-10-31 Р GUGGENHEIM TAXABLE MUNI MANAGED 2011-09-01 2019-11-12 Ρ DOW INC. 2009-12-03 2019-11-12 DUPONT DE NEMOURS INC Ρ 2009-12-03 2019-11-04 MATTHEWS ASIAN GROWTH & INCOME FUND Ρ 2018-03-01 2019-03-27 Р MATTHEWS ASIAN GROWTH & INCOME FUND 2018-03-01 2019-03-27 CAPITAL GAINS DIVIDENDS Р Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h (e) Gross sales price Depreciation allowed Cost or other basis Gain or (loss) (or allowable) (g) plus expense of sale (h) (e) plus (f) minus (g) (f) 2,386 1,969 417 2,978 2,461 517 3,310 1,732 1,578 11,049 9,353 1,696 6,964 3,382 3,582 9,076 4,963 4,113 -837 6,077 6,914 52,011 59,171 -7,160 20.506 20,506 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - I Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 Gains (Col. (h) gain minus col. (k), but not less than -0-) or (i) F.M.V. as of 12/31/69 Adjusted basis Excess of col. (i) **(I)** Losses (from col.(h)) (j) as of 12/31/69 (k) over col. (j), if any 417 517 1,578 1,696 3,582 4,113 -837 -7,160 20,506

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation (a) Name and address Title, and average (c) Compensation (If (d) Expense account, not paid, enter hours per week Contributions to (e) other allowances (b) devoted to position -0-) employee benefit plans and deferred compensation SUSAN H BRAY MD CO-VICE PRESIDENT 400 0.20 119 W HIGHLAND AVENUE

PHILADELPHIA, PA 19118				
ROBERT J BRAY ESQ	CO-VICE PRESIDENT	200	0	0
282 SYDNEY ROAD HOLLAND, PA 18966	0.20			
MOLLY E O'NETLL EMMI	TREASURER	599	0	0

HOLLAND, PA 10900				
MOLLY E O'NEILL EMMI	TREASURER	599	0	0
317 BURTON ROAD ORELAND, PA 19075	0.20			
BRIAN J BRAY	PRESIDENT	599	0	0
1396 CINNAMON DRIVE	0.20			

	INEXISORER]		ı
317 BURTON ROAD ORELAND, PA 19075	0.20			
BRIAN J BRAY	PRESIDENT	599	0	0
1386 CINNAMON DRIVE FORT WASHINGTON, PA 19034	0.20			
JOANNE M KYLE	BOARD MEMBERS	599	0	0

1386 CINNAMON DRIVE FORT WASHINGTON, PA 19034	0.20			
JOANNE M KYLE	BOARD MEMBERS	599	0	0
102 EVERGREEN COURT BLUE BELL, PA 19422	0.20			

102 EVERGREEN COURT BLUE BELL, PA 19422	0.20			
JOANNE M KYLE	BOARD MEMBERS	599	0	

SUSAN O'NEILL	BOARD MEMBERS	599	0	
1724 HOLMES ROAD MAPLE GLEN, PA 19002	0.20			

Form 990PF Part XV Line 1a - List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000).

ROBERT J BRAY ESO

than \$5,000).

SUSAN H BRAY MD

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year

a raid daring the year				
ANGEL FLIGHT EAST 1501 NARCISSA ROAD BLUE BELL, PA 19422	NONE	PUBLIC	CHARITABLE	2,500
			l I	

BLUE BELL, PA 19422				
BRENDA'S CAT RESCUE SUITE 45 PMB 90701 CATHEDRAL ROAD PHILADELPHIA, PA 19128	NONE	PUBLIC	CHARITABLE	500
COMMUNITY CENTER VISITATION -	NONE	PUBLIC	CHARITABLE	3,000

BRENDA'S CAT RESCUE SUITE 45 PMB 90701 CATHEDRAL ROAD PHILADELPHIA, PA 19128	NONE	PUBLIC	CHARITABLE	500
COMMUNITY CENTER VISITATION - COLORS OF KENSINGTON 2646 KENSINGTON AVENUE PHILADELPHIA, PA 19125	NONE	PUBLIC	CHARITABLE	3,000

PHILADELPHIA, PA 19128				
COMMUNITY CENTER VISITATION - COLORS OF KENSINGTON 2646 KENSINGTON AVENUE PHILADELPHIA, PA 19125	NONE	PUBLIC	CHARITABLE	3,000
Total	40,000			

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year

a raid daring the year				i
CRADLES TO CRAYONS 4700 WISSAHICKON AVENUE SUITE 142 PHILADELPHIA, PA 19144	NONE	PUBLIC	CHARITABLE	1,000
· · · · · · · · · · · · · · · · · · ·	I			

PHILADELPHIA SD	PHILADELPHIA, PA 19144				
PHILADELPHIA, PA 19119	PHILADELPHIA SD 6501 CHEW AVENUE	NONE	EDUCATION	CHARITABLE	2,000

EMLEN ELEMENTARY SCHOOL SCHOOL PHILADELPHIA SD 6501 CHEW AVENUE PHILADELPHIA, PA 19119	NONE	EDUCATION	CHARITABLE	2,000
FACE TO FACE123 E PRICE STREET	NONE	PUBLIC	CHARITABLE	2,100

PHILADELPHIA SD 6501 CHEW AVENUE PHILADELPHIA, PA 19119				
FACE TO FACE123 E PRICE STREET PHILADELPHIA, PA 19144	NONE	PUBLIC	CHARITABLE	2,100

40,000

Total .

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor

a Paid during the year				
FOR GOODNESS CAKES	NONE	PUBLIC	CHARITABLE	1,000

WYNNEWOOD, PA 19096				
HEALTHCARE ACCESS 710 WHEATLAND STREET SUITE 107	NONE	PUBLIC	CHARITABLE	

HEALTHCARE ACCESS 710 WHEATLAND STREET SUITE 107 PHOENIXVILLE, PA 19460	NONE	PUBLIC	CHARITABLE	1,000
MATTIE DIXON COMMUNITY CUPBOARD	NONE	PUBLIC	CHARITABLE	3 000

710 WHEATLAND STREET SUITE 107 PHOENIXVILLE, PA 19460	NONE	TOBLIC	GIVILLI/ IDEL	1,0
MATTIE DIXON COMMUNITY CUPBOARD 150 N MAIN STREET BOX 367	NONE	PUBLIC	CHARITABLE	3,00

PHOENIXVILLE, PA 19460				
MATTIE DIXON COMMUNITY CUPBOARD 150 N MAIN STREET BOX 367	NONE	PUBLIC	CHARITABLE	3,000

PHOENIXVILLE, PA 19460				
MATTIE DIXON COMMUNITY CUPBOARD 150 N MAIN STREET BOX 367 AMBLER, PA 190020367	NONE	PUBLIC	CHARITABLE	3,000

Total			▶ 3a	40,000
150 N MAIN STREET BOX 367 AMBLER, PA 190020367				
MATTIE DIXON COMMUNITY COPBOARD	NONE	PUBLIC	CHARITABLE	3,000

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of

Name and address (home or business)	or substantial contributor	recipient	
a Paid during the year			

			I	
PEACE AND SHAKE 1664 KENMARE DRIVE DRESHER, PA 19025	NONE	PUBLIC	CHARITABLE	

500

RESHER, PA 19025				
TTLEMENT MUSIC SCHOOL BOX 63966 ILADELPHIA, PA 191473966	NONE	EDUCATION	CHARITABLE	

SETTLEMENT MUSIC SCHOOL PO BOX 63966 PHILADELPHIA, PA 191473966	NONE	EDUCATION	CHARITABLE	1,500
SHANES KINDNESS	NONE	PUBLIC	CHARITABLE	1,000

PHILADELPHIA, PA 191473966				
SHANES KINDNESS 301 INTEGRITY AVENUE ORELAND, PA 19075	NONE	PUBLIC	CHARITABLE	1,000

SHANES KINDNESS 301 INTEGRITY AVENUE ORELAND, PA 19075	NONE	PUBLIC	CHARITABLE	1,000
Total			▶ 3a	40,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year SILVER SPRINGS MARTIN LUTHER NONE **FDUCATION** CHARITABLE 3,000 SCHOOL

PLYMOUTH MEETING, PA 19462				
SNEAKERS FOR SOLDIERSPO BOX 454 CHESTER SPRINGS, PA 19425	NONE	PUBLIC	CHARITABLE	1,000
SPEAK UP528 E LANCASTER AVENUE	NONE	PUBLIC	CHARITABLE	1,000

SNEAKERS FOR SOLDIERSPO BOX 454	NONE	PUBLIC	CHARITABLE	1,0
CHESTER SPRINGS, PA 19425	NONE	PUBLIC	CHARITABLE	1,0
SPEAK UP528 E LANCASTER AVENUE	NONE	PUBLIC	CHARITABLE	1,0

CHESTER SPRINGS, PA 19425	NONE	FOBLIC	CHARITABLE	1,
SPEAK UP528 E LANCASTER AVENUE	NONE	PUBLIC	CHARITABLE	1,

CHESTER SPRINGS, PA 19425				
SPEAK UP528 E LANCASTER AVENUE ST DAVIDS, PA 19087	NONE	PUBLIC	CHARITABLE	1,00

SPEAK UP528 E LANCASTER AVENUE NONE PUBLIC CHARITABLE ST DAVIDS, PA 19087	1,000

ST DAVIDS, PA 19087	NONE	TOBLIC	CHARTABLE	1,000
Total			▶ 3a	40,000

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor

a Paid during the year				
SSJ WELCOME CENTER 728 E ALLEGHENY AVENUE PHILADELPHIA, PA 19134	NONE	PUBLIC	CHARITABLE	3,000

PHILADELPHIA, PA 19134				
ST JOSEPHS UNIVERSITY CAMPUS MINISTRY 5600 CITY LINE AVENUE PHILADELPHIA, PA 19131	NONE	EDUCATION	CHARITABLE	400

MINISTRY 5600 CITY LINE AVENUE PHILADELPHIA, PA 19131				
TODAY IS A GOOD DAY 809 E SOUTHAMPTON AVE WYNDMOOR, PA 19038	NONE	PUBLIC	CHARITABLE	5,000

Total			▶ 3a	40,000
TODAY IS A GOOD DAY 809 E SOUTHAMPTON AVE WYNDMOOR, PA 19038	NONE	PUBLIC	CHARITABLE	5,000
PHILADELPHIA, PA 19131				

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor

a Paid during the year				
TWILIGHT WISHPO BOX 1042 DOYLESTOWN, PA 18901	NONE	PUBLIC	CHARITABLE	3,000
UNITARIAN UNIVERSALIST CHURCH	NONE	PUBLIC	CHARITABLE	500

UNITARIAN UNIVERSALIST CHURCH 268 WASHINGTON CROSSING PE ROAD TITUSVILLE, NJ 08560	NONE	PUBLIC	CHARITABLE	500
WHY NOT PROSPER	NONE	PUBLIC	CHARITABLE	3,500

TITUSVILLE, NJ 08560				
WHY NOT PROSPER 717 EAST CHELTEN AVENUE	NONE	PUBLIC	CHARITABLE	3,500

Total .

40,000

Recipient If recipient is an individual, show any relationship to any foundation manager and address (home or business).

Traine and dadress (nome or business)	or substantial contributor			
a Paid during the year				
WHYY150 N 6TH STREET	NONE	PUBLIC	CHARITABLE	500

WHYY150 N 6TH STREET PHILADELPHIA, PA 19106	NONE	PUBLIC	CHARITABLE	50
Total			▶ 3a	40,000

efile GRAPHIC print - DO NOT PR	OCESS	As Filed D	ata -	DI	N: 93491289006350
TY 2018 Accounting Fee	s Sche	edule			_
I	Name:		MILY FOUNDATION BRAY ESQ & SUSA		
	EIN:	23-27919	988		
Category	Amo	ount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNTING FEES		8,800	0		0

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491289006350
TY 2018 Investments Corpora	te Stock Schedule	
Name:	BRAY FAMILY FOUNDATION	
	ROBERT BRAY ESQ & SUSAN BI	RAYMD CO-TR

End of Year Fair Market Value

39,760

389,172

39,760

389,172

Name of Stoc	k		End of Year Book Value
Investments Corporation Stock Schedule			
EIN:	23-2791988		
	ROBERT BRAY	ESQ & 505	AN BRAYMD CO- H

WELLS FARGO

CHARLES SCHWAB

·	Expenses per Books	Income	Income	Charitable Purposes			
Description	Revenue and	Net Investment	Adjusted Net	Disbursements for			
Other Expenses Schedule							
EIN:	EIN: 23-2791988						
	ROBERT BRAY ESQ & SUSAN BRAYMD CO-TR						
Name:	BRAY FAMILY FOUNDATION						
TY 2018 Other Expenses Schedule							
efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN:	93491289006350			

Other Expenses Schedule	T.			
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
BANK FEES	150	150		0

1,448

1,448

MEETING EXPESNES

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN: 93491289006350
TY 2018 Other Increases Schedule			
Name:	BRAY FAMILY FOUNDATION		
	ROBERT BRAY ESQ & SUSAN BRAYMD CO-TR		
EIN: 23-2791988			
Description		Amount	
UNREALIZED GAIN / LOSS			18,592