

Form **990**
Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Do not enter social security numbers on this form as it may be made public.

Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047
2019
Open to Public Inspection

A For the 2019 calendar year, or tax year beginning 01-01-2019, and ending 12-31-2019

B Check if applicable:
 Address change
 Name change
 Initial return
 Final return/terminated
 Amended return
 Application pending

C Name of organization: BRADLEY IMPACT FUND INC
 Doing business as:
 Number and street (or P.O. box if mail is not delivered to street address) Room/suite: 1400 N WATER ST NO 300
 City or town, state or province, country, and ZIP or foreign postal code: MILWAUKEE, WI 53202

D Employer identification number: 45-4678325
E Telephone number: (414) 291-2500
G Gross receipts \$ 24,710,671

F Name and address of principal officer:
 GABRIEL CONGER
 1400 N WATER ST NO 300
 MILWAUKEE, WI 53202

H(a) Is this a group return for subordinates? Yes No
H(b) Are all subordinates included? Yes No
 If "No," attach a list. (see instructions)
H(c) Group exemption number ▶

I Tax-exempt status: 501(c)(3) 501(c) () ◀ (insert no.) 4947(a)(1) or 527

J Website: ▶ WWW.BRADLEYIMPACTFUND.ORG

K Form of organization: Corporation Trust Association Other ▶
L Year of formation: 2012 **M** State of legal domicile: WI

Part I Summary

1 Briefly describe the organization's mission or most significant activities:
 THE BRADLEY IMPACT FUND PROVIDES GRANTS TO ORGANIZATIONS THAT ALIGN WITH ITS GIVING AREAS OF CIVIL SOCIETY, INFORMED CITIZENS, FREE MARKETS, AND CONSTITUTIONAL ORDER.

2 Check this box if the organization discontinued its operations or disposed of more than 25% of its net assets.

3 Number of voting members of the governing body (Part VI, line 1a)	3	9
4 Number of independent voting members of the governing body (Part VI, line 1b)	4	9
5 Total number of individuals employed in calendar year 2019 (Part V, line 2a)	5	4
6 Total number of volunteers (estimate if necessary)	6	9
7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
7b Net unrelated business taxable income from Form 990-T, line 39	7b	0

	Prior Year	Current Year
8 Contributions and grants (Part VIII, line 1h)	10,734,234	14,075,106
9 Program service revenue (Part VIII, line 2g)	0	0
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	177,896	242,956
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	0	0
12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	10,912,130	14,318,062
13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)	6,241,934	8,473,681
14 Benefits paid to or for members (Part IX, column (A), line 4)	0	0
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	0	582,194
16a Professional fundraising fees (Part IX, column (A), line 11e)	126,790	144,000
b Total fundraising expenses (Part IX, column (D), line 25) ▶ 446,907		
17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	577,566	973,760
18 Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	6,946,290	10,173,635
19 Revenue less expenses. Subtract line 18 from line 12	3,965,840	4,144,427

	Beginning of Current Year	End of Year
20 Total assets (Part X, line 16)	8,711,594	13,624,586
21 Total liabilities (Part X, line 26)	68,391	174,143
22 Net assets or fund balances. Subtract line 21 from line 20	8,643,203	13,450,443

Part II Signature Block

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 officer) is based on all information of which preparer has any knowledge.

Sign Here

Signature of officer: *****
 Date: 2020-10-22

CURT CULVER CHAIRMAN
 Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name: _____ Preparer's signature: _____ Date: _____
 Check if self-employed PTIN: P00634290
 Firm's name ▶ WEGNER CPAS LLP Firm's EIN ▶ 39-0974031
 Firm's address ▶ 2921 LANDMARK PL STE 300 Phone no. (608) 274-4020
 MADISON, WI 537134236

May the IRS discuss this return with the preparer shown above? (see instructions) Yes No

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III

1 Briefly describe the organization's mission:

THE BRADLEY IMPACT FUND IS A DONOR-ADVISED FUND WITH A MISSION TO SERVE AS PHILANTHROPIC ADVISORS WHO EDUCATE, EMPOWER, AND INSPIRE DONORS TO ADVANCE OUR COMMON PRINCIPLES THROUGH HIGH-IMPACT GIVING AND THE PROTECTION OF DONOR INTENT.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes No

If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes No

If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ 9,169,995 including grants of \$ 8,473,681) (Revenue \$ 0)
See Additional Data

4b (Code:) (Expenses \$ including grants of \$) (Revenue \$)

4c (Code:) (Expenses \$ including grants of \$) (Revenue \$)

4d Other program services (Describe in Schedule O.)
(Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses ▶ 9,169,995

Part IV Checklist of Required Schedules

Table with 3 columns: Question ID, Question Text, and Yes/No response. Rows include questions 1 through 21, covering various organizational requirements and reporting obligations.

Part IV Checklist of Required Schedules (continued)

		Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>		No
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>		No
26	Did the organization report any amount on Part X, line 5 or 22 for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i>		No
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
a	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If "Yes," complete Schedule L, Part IV</i>		No
b	A family member of any individual described in line 28a? <i>If "Yes," complete Schedule L, Part IV</i>		No
c	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? <i>If "Yes," complete Schedule L, Part IV</i>		No
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>		No
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>		No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?		No
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O.	Yes	

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response or note to any line in this Part V

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		

Part V Statements Regarding Other IRS Filings and Tax Compliance *(continued)*

<p>2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return</p>	<p>2a <input style="width: 80%; border: none;" type="text"/></p>		4		
<p>b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)</p>		2b		Yes	
<p>3a Did the organization have unrelated business gross income of \$1,000 or more during the year?</p>		3a			No
<p>b If "Yes," has it filed a Form 990-T for this year?<i>If "No" to line 3b, provide an explanation in Schedule O</i></p>		3b			
<p>4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?</p>		4a			No
<p>b If "Yes," enter the name of the foreign country: <input style="width: 80%; border: none;" type="text"/> See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).</p>					
<p>5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?</p>		5a			No
<p>b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?</p>		5b			No
<p>c If "Yes," to line 5a or 5b, did the organization file Form 8886-T?</p>		5c			
<p>6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?</p>		6a			No
<p>b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?</p>		6b			
<p>7 Organizations that may receive deductible contributions under section 170(c).</p>					
<p>a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?</p>		7a			No
<p>b If "Yes," did the organization notify the donor of the value of the goods or services provided?</p>		7b			
<p>c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?</p>		7c			No
<p>d If "Yes," indicate the number of Forms 8282 filed during the year</p>	<p>7d <input style="width: 80%; border: none;" type="text"/></p>				
<p>e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?</p>		7e			No
<p>f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?</p>		7f			No
<p>g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?</p>		7g			
<p>h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?</p>		7h			
<p>8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?</p>		8			No
<p>9 Sponsoring organizations maintaining donor advised funds.</p>					
<p>a Did the sponsoring organization make any taxable distributions under section 4966?</p>		9a			No
<p>b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?</p>		9b			No
<p>10 Section 501(c)(7) organizations. Enter:</p>					
<p>a Initiation fees and capital contributions included on Part VIII, line 12</p>	<p>10a <input style="width: 80%; border: none;" type="text"/></p>				
<p>b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities</p>	<p>10b <input style="width: 80%; border: none;" type="text"/></p>				
<p>11 Section 501(c)(12) organizations. Enter:</p>					
<p>a Gross income from members or shareholders</p>	<p>11a <input style="width: 80%; border: none;" type="text"/></p>				
<p>b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)</p>	<p>11b <input style="width: 80%; border: none;" type="text"/></p>				
<p>12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?</p>					
<p>b If "Yes," enter the amount of tax-exempt interest received or accrued during the year.</p>	<p>12b <input style="width: 80%; border: none;" type="text"/></p>				
<p>13 Section 501(c)(29) qualified nonprofit health insurance issuers.</p>					
<p>a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.</p>		13a			
<p>b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans</p>	<p>13b <input style="width: 80%; border: none;" type="text"/></p>				
<p>c Enter the amount of reserves on hand</p>	<p>13c <input style="width: 80%; border: none;" type="text"/></p>				
<p>14a Did the organization receive any payments for indoor tanning services during the tax year?</p>		14a			No
<p>b If "Yes," has it filed a Form 720 to report these payments?<i>If "No," provide an explanation in Schedule O</i></p>		14b			
<p>15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N.</p>		15			No
<p>16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.</p>		16			No

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



Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a Enter the number of voting members of the governing body at the end of the tax year; 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?; 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?; 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?; 5 Did the organization become aware during the year of a significant diversion of the organization's assets?; 6 Did the organization have members or stockholders?; 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?; 7b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?; 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 8a The governing body? 8b Each committee with authority to act on behalf of the governing body?; 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O.

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

Table with 3 columns: Question, Yes, No. Rows include: 10a Did the organization have local chapters, branches, or affiliates? 10b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11b Describe in Schedule O the process, if any, used by the organization to review this Form 990. 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done 13 Did the organization have a written whistleblower policy? 14 Did the organization have a written document retention and destruction policy? 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? 15a The organization's CEO, Executive Director, or top management official 15b Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 16b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?

Section C. Disclosure

Table with 3 columns: Question, Yes, No. Rows include: 17 List the states with which a copy of this Form 990 is required to be filed (AL, AK, AR, CA, CO, CT, FL, GA, HI, IL, KS, KY, ME, MD, MA, MI, MN, MS, NV, NH, NJ, NM, NY, NC, ND, OH, OK, OR, PA, RI, SC, TN, UT, VA, WA, WV, WI); 18 Section 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. [] Own website [] Another's website [X] Upon request [] Other (explain in Schedule O); 19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.; 20 State the name, address, and telephone number of the person who possesses the organization's books and records: KELLY MILLER SCRIBNER COHEN & COMPANY SC 400 E MASON ST STE 300 MILWAUKEE, WI 53202 (414) 271-1700

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

Check if Schedule O contains a response or note to any line in this Part VII

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

See instructions for the order in which to list the persons above.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(1) MICHAEL GREBE CHAIRMAN	2.00	X		X				0	0	0
(2) RICHARD GRABER VICE PRESIDENT	5.00	X		X				0	0	0
(3) CURT CULVER TREASURER	1.00	X		X				0	0	0
(4) STEPHEN EINHORN DIRECTOR	0.50	X						0	0	0
(5) JAMES ARTHUR POPE DIRECTOR	0.50	X						0	0	0
(6) DIANE HENDRICKS DIRECTOR	0.50	X						0	0	0
(7) KATHRYN MURPHY BURKE DIRECTOR	0.50	X						0	0	0
(8) PHILLIP PRANGE DIRECTOR	0.50	X						0	0	0
(9) SYLVIE LEGERE RICKETTS DIRECTOR	0.50	X						0	0	0
(10) GABRIEL CONGER PRESIDENT	40.00			X				101,943	0	33,815
(11) JESSICA DEAN SENIOR VICE PRESIDENT	40.00					X		139,505	0	40,707

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			

1b Sub-Total	241,448	0	74,522
1c Total from continuation sheets to Part VII, Section A			
1d Total (add lines 1b and 1c)			

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ▶ **2**

	Yes	No
3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		No
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	Yes	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>		No

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
AMERICAN PHILANTHROPIC 119 N HIGH ST WEST CHESTER, PA 19380	FUNDRAISING CONSULTING	144,000

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ▶ **1**

Part VIII Statement of Revenue

Check if Schedule O contains a response or note to any line in this Part VIII

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514	
Contributions, Gifts, Grants, and Other Similar Amounts	1a Federated campaigns	1a	200,000				
	b Membership dues	1b					
	c Fundraising events	1c					
	d Related organizations	1d					
	e Government grants (contributions)	1e					
	f All other contributions, gifts, grants, and similar amounts not included above	1f	13,875,106				
	g Noncash contributions included in lines 1a - 1f:\$	1g	2,839,874				
	h Total. Add lines 1a-1f			14,075,106			
Program Service Revenue	2a	Business Code					
	b						
	c						
	d						
	e						
	f All other program service revenue						
	g Total. Add lines 2a-2f.						
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		219,200			219,200	
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
	6a Gross rents	(i) Real	6a				
			(ii) Personal	6a			
		b Less: rental expenses	6b				
		c Rental income or (loss)	6c				
	d Net rental income or (loss)						
	7a Gross amount from sales of assets other than inventory	(i) Securities	7a	10,416,365			
			(ii) Other	7a			
		b Less: cost or other basis and sales expenses	7b	10,392,609			
		c Gain or (loss)	7c	23,756			
	d Net gain or (loss)			23,756		23,756	
	8a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18		8a				
		b Less: direct expenses	8b				
c Net income or (loss) from fundraising events							
9a Gross income from gaming activities. See Part IV, line 19		9a					
	b Less: direct expenses	9b					
c Net income or (loss) from gaming activities							
10a Gross sales of inventory, less returns and allowances		10a					
	b Less: cost of goods sold	10b					
c Net income or (loss) from sales of inventory							
Miscellaneous Revenue	Business Code						
11a							
b							
c							
d All other revenue							
e Total. Add lines 11a-11d							
12 Total revenue. See instructions			14,318,062	0	0	242,956	

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

Check if Schedule O contains a response or note to any line in this Part IX

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	8,473,681	8,473,681		
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16.				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	315,970	240,373	50,733	24,864
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	181,603	71,193	101,246	9,164
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	23,828	14,920	7,278	1,630
9 Other employee benefits	31,165	19,515	9,519	2,131
10 Payroll taxes	29,628	18,552	9,050	2,026
11 Fees for services (non-employees):				
a Management				
b Legal	19,635		19,635	
c Accounting	53,705		53,705	
d Lobbying				
e Professional fundraising services. See Part IV, line 17	144,000			144,000
f Investment management fees	19,737		19,737	
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	248,884	59,086	151,217	38,581
12 Advertising and promotion	190,934	110,812	9,683	70,439
13 Office expenses	31,593	10,306	20,454	833
14 Information technology	95,750	23,489	70,074	2,187
15 Royalties				
16 Occupancy	26,402		26,402	
17 Travel	40,306	25,406	5,278	9,622
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	244,980	102,662	888	141,430
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization				
23 Insurance	1,834		1,834	
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a				
b				
c				
d				
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e	10,173,635	9,169,995	556,733	446,907
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720).				

Part X Balance Sheet

Check if Schedule O contains a response or note to any line in this Part IX

		(A) Beginning of year		(B) End of year
Assets	1 Cash—non-interest-bearing	64,393	1	782,878
	2 Savings and temporary cash investments		2	
	3 Pledges and grants receivable, net	1,057,551	3	1,041,436
	4 Accounts receivable, net		4	
	5 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	12,013	9	11,476
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a		
	b Less: accumulated depreciation	10b		10c
	11 Investments—publicly traded securities	4,020,134	11	8,107,744
	12 Investments—other securities. See Part IV, line 11	3,557,503	12	3,681,052
	13 Investments—program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11		15	
16 Total assets. Add lines 1 through 15 (must equal line 34)	8,711,594	16	13,624,586	
Liabilities	17 Accounts payable and accrued expenses	31,891	17	157,825
	18 Grants payable	36,500	18	16,318
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17 - 24). Complete Part X of Schedule D		25	
	26 Total liabilities. Add lines 17 through 25	68,391	26	174,143
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions	7,585,652	27	12,722,560
	28 Net assets with donor restrictions	1,057,551	28	727,883
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.			
	29 Capital stock or trust principal, or current funds		29	
	30 Paid-in or capital surplus, or land, building or equipment fund		30	
	31 Retained earnings, endowment, accumulated income, or other funds		31	
32 Total net assets or fund balances	8,643,203	32	13,450,443	
33 Total liabilities and net assets/fund balances	8,711,594	33	13,624,586	

Part XI Reconciliation of Net Assets

Check if Schedule O contains a response or note to any line in this Part XI

1	Total revenue (must equal Part VIII, column (A), line 12)	1	14,318,062
2	Total expenses (must equal Part IX, column (A), line 25)	2	10,173,635
3	Revenue less expenses. Subtract line 2 from line 1	3	4,144,427
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	8,643,203
5	Net unrealized gains (losses) on investments	5	662,813
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	0
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	13,450,443

Part XII Financial Statements and Reporting

Check if Schedule O contains a response or note to any line in this Part XII

- 1** Accounting method used to prepare the Form 990: Cash Accrual Other _____
 If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.
- 2a** Were the organization's financial statements compiled or reviewed by an independent accountant?
 If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:
 Separate basis Consolidated basis Both consolidated and separate basis
- b** Were the organization's financial statements audited by an independent accountant?
 If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:
 Separate basis Consolidated basis Both consolidated and separate basis
- c** If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?
 If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.
- 3a** As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?
- b** If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

	Yes	No
2a		No
2b	Yes	
2c	Yes	
3a		No
3b		

Additional Data

Software ID:

Software Version:

EIN: 45-4678325

Name: BRADLEY IMPACT FUND INC

Form 990 (2019)

Form 990, Part III, Line 4a:

THE BRADLEY IMPACT FUND PROVIDES FUNDING TO ORGANIZATIONS THAT RESEARCH PUBLIC POLICY AND EDUCATE THE PUBLIC ON POLICY ISSUES. THE ORGANIZATION'S BOARD OF DIRECTORS SELECT ORGANIZATIONS FOR GRANTS AND ASSISTANCE BASED UPON A RIGOROUS EXAMINATION PROCESS THAT INCLUDES AN ANALYSIS OF THE ORGANIZATION'S EFFECTIVENESS IN ITS FIELD OF INTEREST; THE ORGANIZATION'S CREATIVITY AND PAST RESULTS; THE POTENTIAL OF FOCUSED, SPECIAL PROJECTS; THE ORGANIZATION'S ACCOUNTABILITY AND TRANSPARENCY WITH FUNDS; APPROPRIATENESS OF THE ACTIVITIES UNDER SECTION 501(C)(3); AND RELEVANT FACTORS PERTAINING TO EACH ORGANIZATION. THE BRADLEY IMPACT FUND PROVIDED \$8,473,681 IN GRANTS TO 141 ORGANIZATIONS DURING 2020.

SCHEDULE A
(Form 990 or 990-EZ)

Public Charity Status and Public Support
Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.
▶ Attach to Form 990 or Form 990-EZ.
▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047
2019
Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization
BRADLEY IMPACT FUND INC

Employer identification number
45-4678325

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

- 1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
- 2 A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (Form 990 or 990-EZ).)
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state:
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 8 A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 9 An agricultural research organization described in **170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land grant college of agriculture. See instructions. Enter the name, city, and state of the college or university:
- 10 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)
- 11 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**
- 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2).** See **section 509(a)(3).** Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
 - a **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
 - b **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
 - c **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
 - d **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
 - e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
 - f Enter the number of supported organizations _____
 - g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
Total						

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)
(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III.
If the organization failed to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Table with 7 columns: (a) 2015, (b) 2016, (c) 2017, (d) 2018, (e) 2019, (f) Total. Rows include: 1 Gifts, grants, contributions, and membership fees received; 2 Tax revenues levied for the organization's benefit; 3 The value of services or facilities furnished; 4 Total; 5 The portion of total contributions by each person; 6 Public support.

Section B. Total Support

Table with 7 columns: (a) 2015, (b) 2016, (c) 2017, (d) 2018, (e) 2019, (f) Total. Rows include: 7 Amounts from line 4; 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources; 9 Net income from unrelated business activities; 10 Other income; 11 Total support.

12 Gross receipts from related activities, etc. (see instructions)
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here

Section C. Computation of Public Support Percentage

Table with 2 columns: Line number, Percentage. Rows: 14 Public support percentage for 2019 (71.690 %); 15 Public support percentage for 2018 Schedule A, Part II, line 14 (74.990 %)

16a 33 1/3% support test—2019. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization
b 33 1/3% support test—2018. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization
17a 10%-facts-and-circumstances test—2019. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization
b 10%-facts-and-circumstances test—2018. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf.						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year.						
c Add lines 7a and 7b.						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
9 Amounts from line 6.						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources.						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.						
c Add lines 10a and 10b.						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on.						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						

14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here.**

Section C. Computation of Public Support Percentage

15 Public support percentage for 2019 (line 8, column (f) divided by line 13, column (f))	15	
16 Public support percentage from 2018 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2019 (line 10c, column (f) divided by line 13, column (f))	17	
18 Investment income percentage from 2018 Schedule A, Part III, line 17	18	

19a 33 1/3% support tests—2019. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization

b 33 1/3% support tests—2018. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Part IV Supporting Organizations

(Complete only if you checked a box on line 12 of Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

		Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.</i>		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer (b) and (c) below.</i>		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes" and if you checked 12a or 12b in Part I, answer (b) and (c) below.</i>		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.</i>		
c	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? <i>If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.</i>		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).</i>		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
c	Substitutions only. Was the substitution the result of an event beyond the organization's control?		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ) .</i>		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? <i>If "Yes," provide detail in Part VI.</i>		
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>		
c	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>		
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If "Yes," answer line 10b below.</i>		
b	Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings).</i>		

Part IV Supporting Organizations (continued)

		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?		
a	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?		
b	A family member of a person described in (a) above?		
c	A 35% controlled entity of a person described in (a) or (b) above? <i>If "Yes" to a, b, or c, provide detail in Part VI.</i>		

Section B. Type I Supporting Organizations

		Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? <i>If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.</i>		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? <i>If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization.</i>		

Section C. Type II Supporting Organizations

		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? <i>If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).</i>		

Section D. All Type III Supporting Organizations

		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization (s) or (ii) serving on the governing body of a supported organization? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>		

Section E. Type III Functionally-Integrated Supporting Organizations

1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions):		
a	<input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
b	<input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
c	<input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions)		
2	Activities Test. Answer (a) and (b) below.		
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? <i>If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.</i>	Yes	No
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? <i>If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.</i>		
3	Parent of Supported Organizations. Answer (a) and (b) below.		
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI.</i>		
b	Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

- 1** Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). **See instructions.** All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8	
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):	1	
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (explain in detail in Part VI):		
2	Acquisition indebtedness applicable to non-exempt use assets	2	
3	Subtract line 2 from line 1d	3	
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by .035	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	
Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2	Enter 85% of line 1	2	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	
4	Enter greater of line 2 or line 3	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions)		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI). See instructions	
7 Total annual distributions. Add lines 1 through 6.	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions	
9 Distributable amount for 2019 from Section C, line 6	
10 Line 8 amount divided by Line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019
1 Distributable amount for 2019 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2019 (reasonable cause required-- explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2019:			
a From 2014.			
b From 2015.			
c From 2016.			
d From 2017.			
e From 2018.			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2019 distributable amount			
i Carryover from 2014 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2019 from Section D, line 7:			
\$			
a Applied to underdistributions of prior years			
b Applied to 2019 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2019, if any. Subtract lines 3g and 4a from line 2. If the amount is greater than zero, explain in Part VI . See instructions.			
6 Remaining underdistributions for 2019. Subtract lines 3h and 4b from line 1. If the amount is greater than zero, explain in Part VI . See instructions.			
7 Excess distributions carryover to 2020. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2015.			
b Excess from 2016.			
c Excess from 2017.			
d Excess from 2018.			
e Excess from 2019.			

Additional Data

Software ID:

Software Version:

EIN: 45-4678325

Name: BRADLEY IMPACT FUND INC

Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions).

Facts And Circumstances Test

SCHEDULE D (Form 990) Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

OMB No. 1545-0047 2019 Open to Public Inspection

Complete if the organization answered "Yes," on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. Attach to Form 990. Go to www.irs.gov/Form990 for instructions and the latest information.

Name of the organization BRADLEY IMPACT FUND INC

Employer identification number 45-4678325

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

Table with 2 columns: (a) Donor advised funds, (b) Funds and other accounts. Rows include Total number at end of year, Aggregate value of contributions to (during year), Aggregate value of grants from (during year), and Aggregate value at end of year.

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?

Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use, Protection of natural habitat, Preservation of open space, Preservation of an historically important land area, Preservation of a certified historic structure.

Table for conservation easements. Columns: Held at the End of the Year. Rows: Total number of conservation easements, Total acreage restricted by conservation easements, Number of conservation easements on a certified historic structure included in (a), Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register.

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year
4 Number of states where property subject to conservation easement is located
5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?
6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year
7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year
8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?
9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.
b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:
(ii) Revenue included on Form 990, Part VIII, line 1
(ii) Assets included in Form 990, Part X
2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:
a Revenue included on Form 990, Part VIII, line 1
b Assets included in Form 990, Part X

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

- 3** Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):
- a** Public exhibition
 - b** Scholarly research
 - c** Preservation for future generations
 - d** Loan or exchange programs
 - e** Other
- 4** Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5** During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? . . . **Yes** **No**

Part IV Escrow and Custodial Arrangements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a** Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? **Yes** **No**
- b** If "Yes," explain the arrangement in Part XIII and complete the following table:
- | | Amount |
|--|-----------|
| c Beginning balance | 1c |
| d Additions during the year | 1d |
| e Distributions during the year | 1e |
| f Ending balance | 1f |
- 2a** Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? . . . **Yes** **No**
- b** If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII

Part V Endowment Funds.

Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

- 2** Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a** Board designated or quasi-endowment ▶
 - b** Permanent endowment ▶
 - c** Temporarily restricted endowment ▶
- The percentages on lines 2a, 2b, and 2c should equal 100%.
- 3a** Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- | | Yes | No |
|--|---------------|----|
| (i) unrelated organizations | 3a(i) | |
| (ii) related organizations | 3a(ii) | |
| b If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R? | 3b | |
- 4** Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment				
e Other				

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).) . . . ▶ 0

Part VII Investments—Other Securities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other _____		
(A) MONEY MARKET FUNDS	3,413,229	F
(B) INVESTMENT IN MUSICNOTES, INC.	187,000	F
(C) INVESTMENT IN YB PARTNERSHIP 2, LLC	80,823	F
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.)	3,681,052	

Part VIII Investments—Program Related.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col.(B) line 13.)		

Part IX Other Assets.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15.)	

Part X Other Liabilities.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 25.)	

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements		1	14,961,138
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
a	Net unrealized gains (losses) on investments	2a	662,813	
b	Donated services and use of facilities	2b		
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d	-19,737	
e	Add lines 2a through 2d			2e 643,076
3	Subtract line 2e from line 1			3 14,318,062
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
c	Add lines 4a and 4b			4c 0
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)			5 14,318,062

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements		1	10,153,898
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
a	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII.)	2d		
e	Add lines 2a through 2d			2e 0
3	Subtract line 2e from line 1			3 10,153,898
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	19,737	
b	Other (Describe in Part XIII.)	4b		
c	Add lines 4a and 4b			4c 19,737
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)			5 10,173,635

Part XIII Supplemental Information

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

Return Reference	Explanation
See Additional Data Table	

Part XIII Supplemental Information *(continued)*

Return Reference	Explanation

Additional Data

Software ID:

Software Version:

EIN: 45-4678325

Name: BRADLEY IMPACT FUND INC

Supplemental Information

Return Reference	Explanation
PART XI, LINE 2D - OTHER ADJUSTMENTS:	INVESTMENT MANAGEMENT FEES REPORTED ON FORM 990, PART IX, LINE 11F -19,737.

SCHEDULE G
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

**Supplemental Information Regarding
Fundraising or Gaming Activities**

Complete if the organization answered "Yes" on Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.
▶ Attach to Form 990 or Form 990-EZ.
▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2019

Open to Public Inspection

Name of the organization
BRADLEY IMPACT FUND INC

Employer identification number
45-4678325

Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

- 1** Indicate whether the organization raised funds through any of the following activities. Check all that apply.
- | | |
|--|---|
| a <input checked="" type="checkbox"/> Mail solicitations | e <input type="checkbox"/> Solicitation of non-government grants |
| b <input type="checkbox"/> Internet and email solicitations | f <input type="checkbox"/> Solicitation of government grants |
| c <input type="checkbox"/> Phone solicitations | g <input type="checkbox"/> Special fundraising events |
| d <input checked="" type="checkbox"/> In-person solicitations | |
- 2a** Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? Yes No
- b** If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
AMERICAN PHILANTHROPIC 119 N HIGH ST WEST CHESTER, PA 19380	FUNDRAISING CONSULTING		No	579,754	144,000	435,754
Total				579,754	144,000	435,754

3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

AL, AK, AR, CA, CO, CT, FL, GA, HI, IL, KS, KY, ME, MD, MA, MI, MN, MS, NH, NJ, NM, NY, NC, ND, OH, OK, OR, PA, RI, SC, TN, UT, VA, WA, WV, WI

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

Revenue		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
		(event type)	(event type)	(total number)	(add col. (a) through col. (c))
Revenue	1 Gross receipts				
	2 Less: Contributions				
	3 Gross income (line 1 minus line 2)				
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs				
	7 Food and beverages				
	8 Entertainment				
	9 Other direct expenses				
	10 Direct expense summary. Add lines 4 through 9 in column (d) ▶				
	11 Net income summary. Subtract line 10 from line 3, column (d) ▶				

Part III Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

Revenue		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col.(a) through col.(c))
		1 Gross revenue			
Direct Expenses	2 Cash prizes				
	3 Noncash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	
	7 Direct expense summary. Add lines 2 through 5 in column (d) ▶				
	8 Net gaming income summary. Subtract line 7 from line 1, column (d) ▶				

9 Enter the state(s) in which the organization conducts gaming activities: _____

a Is the organization licensed to conduct gaming activities in each of these states? Yes No

b If "No," explain: _____

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? Yes No

b If "Yes," explain: _____

- 11** Does the organization conduct gaming activities with nonmembers? Yes No
- 12** Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? Yes No
- 13** Indicate the percentage of gaming activity conducted in:
- | | | |
|--------------------------------------|------------|---|
| a The organization's facility | 13a | % |
| b An outside facility | 13b | % |

14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ▶

Address ▶

- 15a** Does the organization have a contract with a third party from whom the organization receives gaming revenue? Yes No
- b** If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ _____ and the amount of gaming revenue retained by the third party ▶ \$ _____.
- c** If "Yes," enter name and address of the third party:
- Name ▶
- Address ▶

16 Gaming manager information:

Name ▶

Gaming manager compensation ▶ \$

Description of services provided ▶

Director/officer Employee Independent contractor

- 17** Mandatory distributions:
- a** Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? Yes No
- b** Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ _____

Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.

Return Reference	Explanation
SCHEDULE G, PART I, LINE 2B, COLUMN (V)	THE ORGANIZATION ENGAGED WITH THE PROFESSIONAL FUNDRAISER TO HELP RAISE FUNDS FOR THE ORGANIZATION.

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

Schedule I (Form 990)

Grants and Other Assistance to Organizations, Governments and Individuals in the United States

OMB No. 1545-0047

2019

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

Go to www.irs.gov/Form990 for the latest information.

Name of the organization BRADLEY IMPACT FUND INC

Employer identification number

45-4678325

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance...
2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000.

Table with 8 columns: (a) Name and address of organization or government, (b) EIN, (c) IRC section (if applicable), (d) Amount of cash grant, (e) Amount of non-cash assistance, (f) Method of valuation (book, FMV, appraisal, other), (g) Description of noncash assistance, (h) Purpose of grant or assistance. Rows 1-12.

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 151
3 Enter total number of other organizations listed in the line 1 table 0

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.

Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					

Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

Return Reference	Explanation
PART I, LINE 2:	THE ORGANIZATION'S BOARD OF DIRECTORS SELECT ORGANIZATIONS FOR GRANTS AND ASSISTANCE BASED UPON A RIGOROUS EXAMINATION PROCESS THAT INCLUDES AN ANALYSIS OF THE ORGANIZATION'S EFFECTIVENESS IN ITS FIELD OF INTEREST; THE ORGANIZATION'S CREATIVITY AND PAST RESULTS; THE POTENTIAL OF FOCUSED, SPECIAL PROJECTS; THE ORGANIZATION'S ACCOUNTABILITY AND TRANSPARENCY WITH FUNDS; APPROPRIATENESS OF THE ACTIVITIES UNDER SECTION 501(C)(3); AND RELEVANT FACTORS PERTAINING TO EACH ORGANIZATION.

Additional Data

Software ID:
Software Version:
EIN: 45-4678325
Name: BRADLEY IMPACT FUND INC

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ACTON INSTITUTE FOR THE STUDY OF RELIGION AND LIBERTY 98 EAST FULTON STREET GRAND RAPIDS, MI 49503	38-2926822	501(C)3	127,500				GENERAL CHARITABLE PURPOSES
ACTS COMMUNITY DEVELOPMENT CORPORATION ACTS HOUSING MILWAUKEE, WI 53205	39-1837474	501(C)3	112,750				GENERAL CHARITABLE PURPOSES

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AFRICAN ENTERPRISE USA PO BOX 28190 SPOKANE, WA 99228	95-2275044	501(C)3	35,000				EVANGELIZING THE CITIES OF AFRICA THROUGH WORD & DEED IN PARTNERSHIP WITH THE CHURCH
AID TO THE CHURCH IN NEED INC 725 LEONARD STREET 3RD FLOOR BROOKLYN, NY 11222	86-1089466	501(C)3	120,000				SUPPORT THE CHURCH SERVING THEIR PARISHIONERS & COMMUNITY IN AREAS OF EXTREME POVERTY & RELIGIOUS HOSTILITY

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ALDO LEOPOLD FOUNDATION INC E13701 LEVEE ROAD BARABOO, WI 53913	39-1423225	501(C)3	25,000				GENERAL CHARITABLE PURPOSES
AMERICAN COUNCIL OF TRUSTEES AND ALUMNI 1730 M ST NW STE 600 WASHINGTON, DC 20036	52-1870003	501(C)3	6,000				GENERAL CHARITABLE PURPOSES

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AMERICAN ENTERPRISE INSTITUTE FOR PUBLIC POLICY RESEARCH 1789 MASSACHUSETTS AVENUE NW WASHINGTON, DC 20036	53-0218495	501(C)3	219,826				GENERAL CHARITABLE PURPOSES
AMERICAN FOREIGN POLICY COUNCIL 509 C ST NE WASHINGTON, DC 20002	52-1274529	501(C)3	20,000				GENERAL CHARITABLE PURPOSES

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AMERICAN IDEAS INSTITUTE 910 17TH ST NW STE 312 WASHINGTON, DC 20006	27-0311492	501(C)3	10,000				THE AMERICAN CONSERVATIVE
AMERICAN LEGISLATIVE EXCHANGE COUNCIL 2900 CRYSTAL DRIVE ARLINGTON, VA 22202	52-0140979	501(C)3	10,500				GENERAL CHARITABLE PURPOSES

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AMERICANS FOR PROSPERITY FOUNDATION 2111 WILSON BLVD ARLINGTON, VA 22201	52-1527294	501(C)3	25,000				GENERAL CHARITABLE PURPOSES
AMERICARES 88 HAMILTON AVE STAMFORD, CT 06902	06-1008595	501(C)3	50,000				GENERAL CHARITABLE PURPOSES

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ANDEAN HEALTH AND DEVELOPMENT INC 1100 DELAPLAINE CT MADISON, WI 53715	39-1809174	501(C)3	25,000				2019 ANDEAN HEALTH BIKE RIDE
ARCHDIOCESE OF MILWAUKEE P O BOX 070912 MILWAUKEE, WI 53207	39-0807221	501(C)3	13,500				2020 CATHOLIC SCHOOLS FUNDRAISER, GENERAL PURPOSES

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BADGER INSTITUTE 700 W VIRGINIA ST SUITE 301 MILWAUKEE, WI 53204	39-1592727	501(C)3	86,098				GENERAL CHARITABLE PURPOSES
BECKET FUND 1200 NEW HAMPSHIRE AVENUE NW SUITE 700 WASHINGTON, DC 20036	52-1858532	501(C)3	6,000				CHURCH IN HOSTILE AREAS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BENJAMIN RUSH INSTITUTE PO BOX 610-001 DFW AIRPORT STATION, TX 75261	46-1848302	501(C)3	10,000				GENERAL CHARITABLE PURPOSES
BIG SHOULDERS FUND 212 W VAN BUREN ST CHICAGO, IL 60607	36-3490557	501(C)3	200,000				GENERAL CHARITABLE PURPOSES

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BOTTOM LINE INC 50 MILK STREET BOSTON, MA 02109	04-3351427	501(C)3	25,000				GENERAL CHARITABLE PURPOSES
CAPITAL RESEARCH CENTER 1513 SIXTEENTH STREET NW WASHINGTON, DC 20036	52-1289734	501(C)3	40,750				GENERAL CHARITABLE PURPOSES

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CATHOLIC NEAR EAST WELFARE ASSOCIATION 1011 FIRST AVENUE NEW YORK, NY 10022	13-1623929	501(C)3	240,000				SUPPORT THE CHURCH IN AREAS OF HOSTILITY
CATO INSTITUTE 1000 MASSACHUSETTS AVENUE NW WASHINGTON, DC 20001	23-7432162	501(C)3	200,500				GENERAL CHARITABLE PURPOSES

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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CHICAGO HOPE ACADEMY 2189 W BOWLER ST CHICAGO, IL 60612	36-4244054	501(C)3	100,000				GENERAL CHARITABLE PURPOSES
CHICAGO JESUIT ACADEMY 5058 W JACKSON BLVD CHICAGO, IL 60644	20-2091040	501(C)3	100,000				GENERAL CHARITABLE PURPOSES

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CHICAGO SHAKESPEARE THEATER 800 E GRAND AVENUE CHICAGO, IL 60611	36-3467607	501(C)3	100,000				GENERAL CHARITABLE PURPOSES
CIVITAS INSTITUTE 811 SPRING FOREST RD STE 900 RALEIGH, NC 27609	20-2454741	501(C)3	10,000				GENERAL CHARITABLE PURPOSES

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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CLARE BOOTHE LUCE CENTER FOR CONSERVATIVE WOMEN 112 ELDEN STREET HERNDON, VA 20170	54-1672138	501(C)3	150,000				GENERAL CHARITABLE PURPOSES
CLAREMONT INSTITUTE FOR THE STUDY OF STATESMANSHIP 1317 W FOOTHILL BLVD UPLAND, CA 91786	95-3443202	501(C)3	26,000				GENERAL CHARITABLE PURPOSES

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
COMMONWEALTH FOUNDATION FOR PUBLIC POLICY ALTERNATIVES 225 STATE ST STE 302 HARRISBURG, PA 17101	23-2473845	501(C)3	25,000				GENERAL CHARITABLE PURPOSES
COMPETITIVE ENTERPRISE INSTITUTE 1310 L STREET NW WASHINGTON, DC 20005	52-1351785	501(C)3	65,000				GENERAL CHARITABLE PURPOSES

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CONCORDIA UNIVERSITY INC 12800 N LAKE SHORE DR MEQUON, WI 53097	39-0833608	501(C)3	15,000				AFRICAN AMERICAN YOUTH INITIATIVE
CONSTITUTING AMERICA INC PO BOX 1988 COLLEYVILLE, TX 76034	27-2083548	501(C)3	10,000				GENERAL CHARITABLE PURPOSES

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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CROSS CATHOLIC OUTREACH 2700 N MILITARY TRAIL BOCA RATON, FL 33427	65-1156061	501(C)3	60,000				HELP THE CHURCH IN AREAS OF RELIGIOUS HOSTILITY
CRU CAMPUS CRUSADE FOR CHRIST PO BOX 628222 ORLANDO, FL 32862	95-6006173	501(C)3	14,800				GENERAL CHARITABLE PURPOSES

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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DANIEL MURPHY SCHOLARSHIP FUND 309 W WASHINGTON SUITE 700 CHICAGO, IL 60606	36-3675466	501(C)3	150,000				GENERAL CHARITABLE PURPOSES
DANNIE AND JOEANN EVANS MINISTRIES 2311 BOULDER LN BELOIT, WI 53511	47-5179178	501(C)3	19,899				GENERAL CHARITABLE PURPOSES

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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DAVID HOROWITZ FREEDOM CENTER 14724 VENTURA BLVD SHERMAN OAKS, CA 91403	95-4194642	501(C)3	10,000				GENERAL CHARITABLE PURPOSES
DIVINE SAVIOR PARISH 305 FREDONIA AVENUE FREDONIA, WI 53021	45-5483617	501(C)3	10,200				BABY BOTTLE CAMPAIGN, PRO LIFE, SVDP

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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DOCTORS WITHOUT BORDERS USA INC 40 RECTOR STREET NEW YORK, NY 10006	13-3433452	501(C)3	50,000				GENERAL CHARITABLE PURPOSES
DZI FOUNDATION A COLORADO NON-PROFIT CORPORATION PO BOX 632 RIDGWAY, CO 81432	84-1595852	501(C)3	10,000				GENERAL CHARITABLE PURPOSES

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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EDUCATE NURTURE TOMORROWS TALENT INC 855 EAST DREXEL SQUARE CHICAGO, IL 60615	83-1948005	501(C)3	10,000				2019 A-LIST SPEAKER SERIES
ENCOUNTER FOR CULTURE AND EDUCATION INC 900 BROADWAY STE 601 NEW YORK, NY 10003	39-1688129	501(C)3	10,050				THE LAND OF HOPE: AN INVITATION TO THE GREAT AMERICAN STORY, PUBLIC RELATIONS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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EVANS SCHOLARS FOUNDATION 2501 PATRIOT BLVD GLENVIEW, IL 60026	36-2865967	501(C)3	350,000				GENERAL CHARITABLE PURPOSES
EVERGREEN FREEDOM FOUNDATION PO BOX 552 OLYMPIA, WA 98507	94-3136961	501(C)3	199,500				GENERAL CHARITABLE PURPOSES

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FAIR LINES AMERICA FOUNDATION INC 2308 MOUNT VERNON AVE STE 716 ALEXANDRIA, VA 22301	83-0626707	501(C)3	10,000				GENERAL CHARITABLE PURPOSES
FEEDING AMERICA 35 EAST WACKER DRIVE CHICAGO, IL 60601	36-3673599	501(C)3	10,000				GENERAL CHARITABLE PURPOSES

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FELLOWSHIP OF CATHOLIC UNIVERSITY STUDENTS PO BOX 17408 DENVER, CO 80217	84-1522811	501(C)3	6,400				BRIAN PREISLER MISSIONARY SUPPORT, GENERAL PURPOSES
FOUNDATION FOR EXCELLENCE IN HIGHER EDUCATION 16 STOCKTON ST PRINCETON, NJ 08540	46-1439784	501(C)3	25,000				GENERAL CHARITABLE PURPOSES

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FOUNDATION FOR INDIVIDUAL RIGHTS IN EDUCATION 510 WALNUT STREET PHILADELPHIA, PA 19106	04-3467254	501(C)3	50,000				GENERAL CHARITABLE PURPOSES
FREEDOMS FOUNDATION AT VALLEY FORGE PO BOX 67 VALLEY FORGE, PA 19481	23-1657857	501(C)3	15,000				RESIDENTIAL EDUCATION PROGRAMS FOR HIGH SCHOOL TEACHERS.

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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FREEDOMWORKS FOUNDATION 111 K ST NE WASHINGTON, DC 20002	52-1526916	501(C)3	12,500				GENERAL CHARITABLE PURPOSES
GEORGETOWN UNIVERSITY 37TH AND O STS NW WASHINGTON, DC 20007	53-0196603	501(C)3	15,000				GEORGETOWN LAW'S CENTER FOR THE CONSTITUTION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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GIRL SCOUTS OF GREATER CHICAGO & NORTHWEST INDIANA 20 S CLARK STREET CHICAGO, IL 60603	36-3871241	501(C)3	10,000				GENERAL CHARITABLE PURPOSES
GROWING HOPE GLOBALLY PO BOX 5628 CAROL STREAM, IL 60197	54-1940516	501(C)3	20,000				FOOD SECURITY PROGRAMMING IN NEPAL

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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HEARTLAND INSTITUTE 3939 NORTH WILKE ROAD ARLINGTON HEIGHTS, IL 60004	36-3309812	501(C)3	50,000				GENERAL CHARITABLE PURPOSES
HILLSDALE COLLEGE 33 EAST COLLEGE STREET HILLSDALE, MI 49242	38-1374230	501(C)3	14,000				BARNEY CHARTER SCHOOLS, PRESIDENT'S CLUB PLEDGE

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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HUDSON INSTITUTE INC 1201 PENNSYLVANIA AVENUE NW WASHINGTON, DC 20004	13-1945157	501(C)3	25,000				GENERAL CHARITABLE PURPOSES
HUMAN RIGHTS FOUNDATION INC 350 FIFTH AVENUE NEW YORK, NY 10118	20-2669700	501(C)3	10,000				GENERAL CHARITABLE PURPOSES

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ILLINOIS POLICY INSTITUTE 190 S LASALLE STREET CHICAGO, IL 60603	41-2057028	501(C)3	115,000				GENERAL CHARITABLE PURPOSES
IMMANUEL PRESBYTERIAN CHURCH 1105 N WAVERLY PLACE MILWAUKEE, WI 53202	23-6393377	501(C)3	31,000				2020 ANNUAL APPEAL

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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INDEPENDENT WOMENS FORUM 4 WEEMS LANE 312 WINCHESTER, VA 22601	54-1670627	501(C)3	30,000				GENERAL CHARITABLE PURPOSES
INSTITUTE FOR FREE SPEECH 124 S WEST STREET ALEXANDRIA, VA 22314	20-3676886	501(C)3	20,000				GENERAL CHARITABLE PURPOSES

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INSTITUTE FOR JUSTICE 901 NORTH GLEBE ROAD SUITE 900 ARLINGTON, VA 22203	52-1744337	501(C)3	11,000				GENERAL CHARITABLE PURPOSES
INSTITUTE FOR REFORMING GOVERNMENT INC 701 E WASHINGTON AVE STE 201 MADISON, WI 53703	82-4034864	501(C)3	12,000				GENERAL CHARITABLE PURPOSES

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INTERCOLLEGIATE STUDIES INSTITUTE INC 3901 CENTERVILLE ROAD WILMINGTON, DE 19807	23-6050131	501(C)3	36,000				GENERAL CHARITABLE PURPOSES
INTERNATIONAL CHRISTIAN CONCERN INC PO BOX 8056 SILVER SPRING, MD 20907	52-1942990	501(C)3	24,000				SUPPORT CHURCH IN AREAS HOSTILE TO CHRISTIANITY

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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INTERNATIONAL JUSTICE MISSION PO BOX 58147 WASHINGTON, DC 20037	54-1722887	501(C)3	10,000				GENERAL CHARITABLE PURPOSES
JACK MILLER CENTER FOR TEACHING AMERICA'S FOUNDING PRINCIPLES AND HISTORY THREE BALA PLAZA WEST BALA CYWNYD, PA 19004	26-1147689	501(C)3	115,000				GENERAL CHARITABLE PURPOSES

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JOHN K MACIVER INSTITUTE FOR PUBLIC POLICY INC 10 E DOTY ST STE 800 MADISON, WI 53703	26-2639114	501(C)3	62,750				GENERAL CHARITABLE PURPOSES
JUDICIAL WATCH INC 425 THIRD ST SW WASHINGTON, DC 20024	52-1885088	501(C)3	8,750				GENERAL CHARITABLE PURPOSES

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KNIGHTS OF COLUMBUS CHARITIES INC ONE COLUMBUS PLAZA NEW HAVEN, CT 06510	23-7227608	501(C)3	18,000				CHRISTIANS AT RISK.
LADIES OF VIRTUE NFP 1245 S MICHIGAN AVE STE 149 CHICAGO, IL 60605	80-0530610	501(C)3	15,000				GENERAL CHARITABLE PURPOSES

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LAKELAND UNIVERSITY W3718 SOUTH DRIVE PLYMOUTH, WI 53073	39-0821861	501(C)3	110,000				OFFICE FOR ADVANCEMENT OF FREE ENTERPRISE EDUCATION
LEADERSHIP INSTITUTE 1101 N HIGHLAND ST ARLINGTON, VA 22201	51-0235174	501(C)3	25,500				GENERAL CHARITABLE PURPOSES

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LYRIC OPERA OF CHICAGO 20 NORTH WACKER DRIVE CHICAGO, IL 60606	36-6008929	501(C)3	65,000				GENERAL CHARITABLE PURPOSES
MACKINAC CENTER 140 WEST MAIN STREET PO BOX 568 MIDLAND, MI 48640	38-2701547	501(C)3	25,000				GENERAL CHARITABLE PURPOSES

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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MADISON SYMPHONY 222 W WASHINGTON AVE MADISON, WI 53703	39-1769944	501(C)3	6,000				GENERAL CHARITABLE PURPOSES
MANHATTAN INSTITUTE FOR POLICY RESEARCH INC 52 VANDERBILT AVENUE NEW YORK, NY 10017	13-2912529	501(C)3	25,000				GENERAL CHARITABLE PURPOSES

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MEDIA RESEARCH CENTER INC 1900 CAMPUS COMMONS DRIVE RESTON, VA 20191	54-1429009	501(C)3	100,000				GENERAL CHARITABLE PURPOSES
MILWAUKEE COLLEGE PREP 2449 N 36TH ST MILWAUKEE, WI 53210	39-1881295	501(C)3	125,000				GENERAL CHARITABLE PURPOSES

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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MILWAUKEE HABITAT FOR HUMANITY 3726 NORTH BOOTH STREET MILWAUKEE, WI 53212	39-1496741	501(C)3	6,600				ANNUAL GALA, HABITAT GOLDEN TICKET
MILWAUKEE REPERTORY THEATER 108 E WELLS STREET MILWAUKEE, WI 53202	39-0946025	501(C)3	23,100				SUPPORT OF READING RESIDENCY PROGRAM AT BRUCE GUADALUPE SCHOOL

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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MILWAUKEE RESCUE MISSION 830 N 19TH ST MILWAUKEE, WI 53233	39-0816851	501(C)3	137,500				YEAR END APPEAL, CROSS TRAINERS ACADEMY, SUPPORT THE TRIVE
MILWAUKEE SYMPHONY ORCHESTRA INC 1101 N MARKET STREET MILWAUKEE, WI 53202	39-6023436	501(C)3	50,000				GENERAL CHARITABLE PURPOSES

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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MOVING PICTURE INSTITUTE 375 GREENWICH ST NEW YORK, NY 10013	20-3237801	501(C)3	15,250				GENERAL CHARITABLE PURPOSES
NATIONAL ASSOCIATION OF SCHOLARS 420 MADISON AVENUE NEW YORK, NY 10017	11-2741490	501(C)3	12,000				GENERAL CHARITABLE PURPOSES

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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NATIONAL REVIEW INSTITUTE 19 W 44TH ST STE 1701 NEW YORK, NY 10036	13-3649537	501(C)3	11,000				2019 BUCK
NATIONAL RIGHT TO WORK LEGAL DEFENSE & EDUCATION FOUNDATION INC 8001 BRADDOCK ROAD SUITE 600 SPRINGFIELD, VA 22151	59-1588825	501(C)3	25,000				GENERAL CHARITABLE PURPOSES

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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NATIONAL TAXPAYERS UNION FOUNDATION 122 C STREET NW WASHINGTON, DC 20001	52-1122683	501(C)3	6,250				GENERAL CHARITABLE PURPOSES
NAVY SEAL FOUNDATION 1619 D STREET VIRGINIA BEACH, VA 23459	31-1728910	501(C)3	10,000				GENERAL CHARITABLE PURPOSES

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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NETWORK OF ENLIGHTENED WOMEN INC 1360 EAST CAPITOL STREET NE WASHINGTON, DC 20003	20-5178959	501(C)3	59,500				GENERAL CHARITABLE PURPOSES
NEW BEGINNINGS ARE POSSIBLE INC 6100 N 42ND STREET MILWAUKEE, WI 53209	39-1913547	501(C)3	10,000				WHERE IT'S NEEDED MOST.

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
OPEN DOORS WITH BROTHER ANDREW INC PO BOX 27001 SANTA ANA, CA 92799	23-7275342	501(C)3	60,000				OPEN DOORS M.M.B SAFE HOUSE INITIATIVE
OPERATION DREAM INC PO BOX 12356 MILWAUKEE, WI 53212	26-1455938	501(C)3	10,000				GENERAL CHARITABLE PURPOSES

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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OPPORTUNITY INTERNATIONAL INC 550 W VAN BUREN SUITE 200 CHICAGO, IL 60607	54-0907624	501(C)3	24,000				WORLD VISION DR CONGO WEST ZONE KONGO CENTRAL CLUSTER SAVINGS GROUPS
PACIFIC RESEARCH INSTITUTE FOR PUBLIC POLICY 101 MONTGOMERY STREET SAN FRANCISCO, CA 94104	94-2528433	501(C)3	15,500				GENERAL CHARITABLE PURPOSES

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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PARENTS TELEVISION COUNCIL INC 707 WILSHIRE BLVD LOS ANGELES, CA 90017	95-4819071	501(C)3	10,000				GENERAL CHARITABLE PURPOSES
PAX AMERICANA INSTITUTE INC PO BOX 745 PORTAGE, WI 53901	82-5381376	501(C)3	15,000				GENERAL CHARITABLE PURPOSES

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PRAGER UNIVERSITY 10045 RED RUN BLVD 250 OWINGS MILLS, MD 21117	27-1763901	501(C)3	36,300				CANDACE OWENS, FIVE MINUTE VIDEOS
PRESIDENT AND FELLOWS OF HARVARD COLLEGE 124 MOUNT AUBURN STREET CAMBRIDGE, MA 02138	04-2103580	501(C)3	25,000				FUND #370-348960RG, HUMAN FLOURISHING PROGRAM U-D PROFESSOR TYLER VANDERWEELE

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PRIESTS FOR LIFE 5211 S WASHINGTON AVENUE TITUSVILLE, FL 32780	94-3123315	501(C)3	36,000				WHERE IT'S NEEDED MOST
PRINCETON UNIVERSITY 83 PROSPECT AVENUE PRINCETON, NJ 08540	21-0634501	501(C)3	25,000				JAMES MADISON PROGRAM

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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PRISON FELLOWSHIP MINISTRIES 44180 RIVERSIDE PARKWAY LANSDOWNE, VA 20176	62-0988294	501(C)3	34,000				WHERE IT'S NEEDED MOST
PROJECT VERITAS 1214 W BOSTON POST RD MAMARONECK, NY 10543	27-2894856	501(C)3	23,818				GENERAL CHARITABLE PURPOSES

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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PROLIFE ACROSS AMERICA PO BOX 18669 MINNEAPOLIS, MN 55418	41-1654040	501(C)3	6,000				WHERE IT'S NEEDED MOST
PRO-LIFE WISCONSIN EDUCATION TASK FORCE INC 15850 W BLUEMOUND ROAD SUITE 311 BROOKFIELD, WI 53005	39-1830544	501(C)3	6,000				WHERE IT'S NEEDED MOST

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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PROPERTY & ENVIRONMENT RESEARCH CENTER (PERC) 2048 ANALYSIS DRIVE BOZEMAN, MT 59718	81-0393444	501(C)3	10,000				GENERAL CHARITABLE PURPOSES
PUBLIC INTEREST LEGAL FOUNDATION INC 32 E WASHINGTON ST STE 1675 INDIANAPOLIS, IN 46204	45-4355641	501(C)3	285,000				GENERAL CHARITABLE PURPOSES

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REAL CLEAR FOUNDATION 666 DUNDEE RD STE 600 NORTHBROOK, IL 60062	52-2128875	501(C)3	10,000				GENERAL CHARITABLE PURPOSES
RUNNING REBELS COMMUNITY ORGANIZATION INC 225 W CAPITOL DR MILWAUKEE, WI 53212	39-3910464	501(C)3	230,000				GENERAL CHARITABLE PURPOSES

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SAND COUNTY FOUNDATION 131 W WILSON STREET MADISON, WI 53703	39-6089450	501(C)3	70,000				5TH OF 5 YEAR COMMITMENT
SCOTTSDALE BIBLE CHURCH 7601 E SHEA BLVD SCOTTSDALE, AZ 85260	86-0179808	501(C)3	6,400				GENERAL CHARITABLE PURPOSES

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SMS RESEARCH FOUNDATION 18620 SW 39TH ST MIRAMAR, FL 33029	27-2906662	501(C)3	10,000				GENERAL CHARITABLE PURPOSES
SOCIETY FOR THE PROPAGATION OF THE FAITH 1011 FIRST AVENUE NEW YORK, NY 10022	13-5563422	501(C)3	24,000				CATHOLIC CHURCH IN AREAS OF HOSTILITY

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SOUTH AND SOUTHEAST ASIA ACTION TEAM WITH THE RELIGIOUS FREEDOM INSTITUTE 316 PENNSYLVANIA AVENUE SE WASHINGTON, DC 20003	81-0983298	501(C)3	25,000				RESEARCH ON THE IMPACT OF RELIGIOUS FREEDOM AND POVERTY IN INDIA AND THE WORLD
ST BERNARD PARISH 2438 ATWOOD AVE MADISON, WI 53704	39-0852862	501(C)3	55,000				GENERAL CHARITABLE PURPOSES

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ST FRANCIS PARISH PROVINCE OF ST JOSEPH CAPUCHIN ORDER PO BOX 05830 MILWAUKEE, WI 53205	39-0806357	501(C)3	15,000				ST. BEN'S COMMUNITY MEAL
ST JAMES ACADEMY BANGALORE 421 WHEELER DRIVE FREDONIA, WI 53021	20-3954889	501(C)3	131,000				WHERE IT'S NEEDED MOST. CHINA, FOR SERVICES IN THE FIELD OF EMPOWERMENT OF INDIVIDUALS WITH DISABILITIES

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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ST MARCUS LUTHERAN CHURCH 2215 N PALMER ST MILWAUKEE, WI 53212	39-0850377	501(C)3	22,000				GENERAL CHARITABLE PURPOSES
ST PAUL UNIVERSITY CATHOLIC FOUNDATION INC 723 STATE ST MADISON, WI 53703	20-8844817	501(C)3	10,000				GENERAL CHARITABLE PURPOSES

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ST AUGUSTINE PREPARATORY ACADEMY 2607 5TH ST MILWAUKEE, WI 53207	47-1800734	501(C)3	56,000				SCHOLARSHIP GALA, GENERAL CHARITABLE PURPOSES
ST MARY'S VISITATION CATHOLIC PARISH 1260 CHURCH STREET ELM GROVE, WI 53122	53-0196617	501(C)3	8,000				GENERAL CHARITABLE PURPOSES

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STANFORD UNIVERSITY BOARD OF TRUSTEES OF THE LELAND STANFORD JU STANFORD UNIVERSITY DEVELOPMENT SERVICES STANFORD, CA 94305	94-1156365	501(C)3	10,000				HOOVER INSTITUTION'S UNCOMMON KNOWLEDGE
STARBOARD MEDIA FOUNDATION INC PO BOX 10707 GREEN BAY, WI 54307	39-2003067	501(C)3	12,000				WHERE IT'S NEEDED MOST

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STEP UP FOR STUDENTS INC 4655 SALISBURY ROAD JACKSONVILLE, FL 32256	59-3649371	501(C)3	250,000				GENERAL CHARITABLE PURPOSES
SUCCESS ACADEMY CHARTER SCHOOLS 95 PINE STREET FLOOR 6 NEW YORK, NY 10005	20-5298861	501(C)3	25,000				GENERAL CHARITABLE PURPOSES

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THE CARDINAL NEWMAN SOCIETY 10432 BALLS FORD RD STE 300 MANASSAS, VA 20109	54-1691371	501(C)3	10,000				GENERAL CHARITABLE PURPOSES
THE CHICAGO SCHOLARS FOUNDATION 247 SOUTH STATE STREET CHICAGO, IL 60604	36-4117530	501(C)3	250,000				GENERAL CHARITABLE PURPOSES

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THE FEDERALIST SOCIETY 1776 I ST NW WASHINGTON, DC 20006	36-3235550	501(C)3	511,000				GENERAL CHARITABLE PURPOSES
THE FUND FOR AMERICAN STUDIES 1706 NEW HAMPSHIRE AVENUE NW WASHINGTON, DC 20009	13-6223604	501(C)3	41,500				GENERAL CHARITABLE PURPOSES

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THE HERITAGE FOUNDATION 214 MASSACHUSETTS AVE NE WASHINGTON, DC 20002	23-7327730	501(C)3	52,500				GENERAL CHARITABLE PURPOSES
THE JOSEPH PROJECT A MILWAUKEE CORPORATION 5422 W CENTER ST MILWAUKEE, WI 53210	81-3657764	501(C)3	15,000				GENERAL CHARITABLE PURPOSES

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THOMAS MORE LAW CENTER 24 FRANK LLOYD WRIGHT DRIVE ANN ARBOR, MI 48105	38-3448297	501(C)3	6,000				WHERE IT'S NEEDED MOST
TRUSTEES OF BOSTON UNIVERSITY 745 COMMONWEALTH AVENUE BOSTON, MA 02215	04-2103547	501(C)3	24,000				SCHOOL OF THEOLOGY, DACB {DICTIONARY OF AFRICAN CHRISTIAN BIOGRAPHY}

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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TURNING POINT USA 4940 EAST BEVERLY ROAD PHOENIX, AZ 85044	80-0835023	501(C)3	251,250				GENERAL CHARITABLE PURPOSES
UNITED WAY OF DANE COUNTY INC TOCQUEVILLE SOCIETY 2059 ATWOOD AVENUE MADISON, WI 53704	39-0817532	501(C)3	10,000				TOCQUEVILLE SOCIETY

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UNITED WAY OF GREATER MILWAUKEE & WAUKESHA COUNTY INC 225 WEST VINE ST MILWAUKEE, WI 53212	39-0806190	501(C)3	110,000				DE TOCQUEVILLE SOCIETY
UNIVERSITY OF WISCONSIN FOUNDATION US BANK LOCKBOX MILWAUKEE, WI 53278	39-0743975	501(C)3	6,000				CROWE (FUND #112290009)

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URBI ET ORBI COMMUNICATIONS INC 14 WEST MAIN STREET FRONT ROYAL, VA 22630	61-1238135	501(C)3	12,000				URBI ET ORBI FOUNDATION. ENABLING THE CHURCH IN AREAS OF HOSTILITY AND POVERTY
VISIONSYNERGY 113 CHERRY STREET 38307 SEATTLE, WA 98104	20-0351801	501(C)3	33,000				NETWORKS AND PARTNERSHIP DEVELOPMENT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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WILLIAM F BUCKLEY JR PROGRAM AT YALE 234 CHURCH ST FL 7 NEW HAVEN, CT 06510	27-5131268	501(C)3	10,000				GENERAL CHARITABLE PURPOSES
WISCONSIN COUNCIL ON ECONOMIC EDUCATION INC 7635 W BLUEMOUND RD MILWAUKEE, WI 53213	39-6076951	501(C)3	9,798				GENERAL CHARITABLE PURPOSES

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WISCONSIN HISTORICAL FOUNDATION INC 816 STATE ST MADISON, WI 53706	39-0921093	501(C)3	15,000				GENERAL CHARITABLE PURPOSES
WISCONSIN INSTITUTE FOR LAW & LIBERTY INC 1139 E KNAPP ST MILWAUKEE, WI 53202	45-1606079	501(C)3	155,998				GENERAL CHARITABLE PURPOSES

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WISCONSIN KNIGHTS OF COLUMBUS CHARITIES INC 4297 WEST BELTLINE HIGHWAY MADISON, WI 53711	42-1654056	501(C)3	6,000				"CULTURE OF LIFE
ABIGAIL ADAMS INSTITUTE INC 14 ARROW STREET SUITE G 10 CAMBRIDGE, MA 02138	47-1495965	501(C)3	25,000				GENERAL CHARITABLE PURPOSES

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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WITHERSPOON INSTITUTE INC 16 STOCKTON STREET PRINCETON, NJ 08540	55-0835528	501(C)3	15,000				GENERAL CHARITABLE PURPOSES
WOODLANDS ACADEMY 760 E WESTLEIGH RD LAKE FOREST, IL 60045	36-2469186	501(C)3	30,000				ANNUAL GIVING

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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YOUNG AMERICA'S FOUNDATION 11480 COMMERCE PARK DRIVE RESTON, VA 20191	23-7042029	501(C)3	80,500				GENERAL CHARITABLE PURPOSES
YOUTH FOR CHRIST INTERNATIONAL MINISTRIES PO BOX 4555 ENGLEWOOD, CO 80155	84-1188718	501(C)3	25,000				GENERAL CHARITABLE PURPOSES

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ZIMZAM GLOBAL PO BOX 72446 PHOENIX, AZ 85050	47-2861115	501(C)3	10,000				CHALLENGE MATCH

Schedule J
(Form 990)

Compensation Information

OMB No. 1545-0047

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
 ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
 ▶ Attach to Form 990.
 ▶ Go to www.irs.gov/Form990 for instructions and the latest information.

2019

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization
BRADLEY IMPACT FUND INC

Employer identification number
45-4678325

Part I Questions Regarding Compensation

	Yes	No
1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.		
<input type="checkbox"/> First-class or charter travel <input type="checkbox"/> Travel for companions <input type="checkbox"/> Tax idemnification and gross-up payments <input type="checkbox"/> Discretionary spending account		
<input type="checkbox"/> Housing allowance or residence for personal use <input type="checkbox"/> Payments for business use of personal residence <input type="checkbox"/> Health or social club dues or initiation fees <input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)		
b If any of the boxes on Line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b	
2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked on Line 1a?	2	
3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.		
<input type="checkbox"/> Compensation committee <input type="checkbox"/> Independent compensation consultant <input type="checkbox"/> Form 990 of other organizations		
<input type="checkbox"/> Written employment contract <input type="checkbox"/> Compensation survey or study <input checked="" type="checkbox"/> Approval by the board or compensation committee		
4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:		
a Receive a severance payment or change-of-control payment?	4a	No
b Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b	No
c Participate in, or receive payment from, an equity-based compensation arrangement?	4c	No
If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.		
Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.		
5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:		
a The organization?	5a	No
b Any related organization?	5b	No
If "Yes," on line 5a or 5b, describe in Part III.		
6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:		
a The organization?	6a	No
b Any related organization?	6b	No
If "Yes," on line 6a or 6b, describe in Part III.		
7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described in lines 5 and 6? If "Yes," describe in Part III.	7	No
8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III.	8	No
9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?	9	

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.

Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1 JESSICA DEAN SENIOR VICE PRESIDENT	(i)	132,605	6,900	0	21,375	19,332	180,212	0
	(ii)	0	0	0	0	0	0	0

Part III **Supplemental Information**

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

Return Reference	Explanation
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**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2019

▶ **Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.**
 ▶ **Attach to Form 990.**
 ▶ **Go to www.irs.gov/Form990 for the latest information.**

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Department of the Treasury
Internal Revenue Service

Name of the organization
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Employer identification number
45-4678325

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art—Works of art				
2 Art—Historical treasures				
3 Art—Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities—Publicly traded	X	13	2,657,051	QUOTED MARKET PRICE
10 Securities—Closely held stock	X	1	102,000	FACE VALUE
11 Securities—Partnership, LLC, or trust interests	X	1	80,823	FACE VALUE
12 Securities—Miscellaneous				
13 Qualified conservation contribution—Historic structures				
14 Qualified conservation contribution—Other				
15 Real estate—Residential				
16 Real estate—Commercial				
17 Real estate—Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ▶ (_____)				
26 Other ▶ (_____)				
27 Other ▶ (_____)				
28 Other ▶ (_____)				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement **29** 0

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?		No
b If "Yes," describe the arrangement in Part II.		
31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?	Yes	
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?	Yes	
b If "Yes," describe in Part II.		
33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.		

Part II Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

Return Reference	Explanation
PART I, COLUMN (B):	THE ORGANIZATION IS REPORTING THE NUMBER OF CONTRIBUTORS IN COLUMN B.
PART I, LINE 32B:	THE ORGANIZATION USES A FINANCIAL INSTITUTION/BROKERAGE TO PROCESS AND SELL MARKETABLE SECURITIES DONATED TO THE ORGANIZATION.

SCHEDULE O
(Form 990 or 990-EZ)**Supplemental Information to Form 990 or 990-EZ**

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

▶ Attach to Form 990 or 990-EZ.

▶ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2019**Open to Public Inspection**

Department of the Treasury

Name of the organization
BRADLEY IMPACT FUND INC

Employer identification number

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990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11B	THE PREPARED FORM 990 IS REVIEWED AND APPROVED BY THE MEMBERS OF THE GOVERNING BODY BEFORE THE RETURN IS FILED WITH THE IRS.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	ALL DIRECTORS AND OFFICERS COMPLETE AND SIGN A STATEMENT THAT PROVIDES INFORMATION REGARDING THEIR INTERESTS AND THOSE OF THEIR FAMILY MEMBERS THAT COULD GIVE RISE TO CONFLICTS. ON AN ANNUAL BASIS THE MEMBERS OF THE GOVERNING BODY MAKE DETERMINATIONS OF WHETHER A CONFLICT EXISTS AND REVIEW ACTUAL CONFLICTS. ANY PERSON WITH A CONFLICT IS PROHIBITED FROM PARTICIPATING IN THE GOVERNING BODY'S DELIBERATIONS AND DECISIONS IN THE TRANSACTION.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 15A	THE ORGANIZATION PRESIDENT SUBMITS A BUDGET FOR SALARIES AND BONUSES TO THE BOARD OF DIRECTORS. THAT BUDGET IS DEVELOPED IN CONSULTATION WITH THE DIRECTOR OF HR AND INCLUDES MARKET COMPARISON DATA. THE BOARD REVIEWS AND APPROVED SALARIES AND BENEFITS INDEPENDENTLY FROM THE OVERALL BUDGET AS PART OF THE GOVERNANCE COMMITTEE AND AN EXECUTIVE SESSION AND AS PART OF THE OVERALL BUDGET WHICH IS REVIEWED AND RECOMMENDED TO THE ENTIRE BOARD BY THE FINANCE COMMITTEE.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION C, LINE 19	THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST.