

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

**2008**

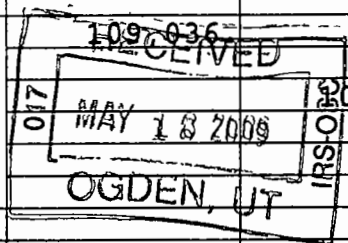
Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements.

For calendar year 2008, or tax year beginning \_\_\_\_\_, and ending \_\_\_\_\_

G Check all that apply:  Initial return  Final return  Amended return  Address change  Name change

Use the IRS label. Otherwise, print or type. See Specific Instructions	Name of foundation <b>THE BRAVEWELL COLLABORATIVE</b>	A Employer identification number <b>71-0879929</b>
	Number and street (or P O box number if mail is not delivered to street address) Room/suite <b>1818 OLIVER AVENUE SOUTH</b>	B Telephone number <b>612-377-8400</b>
	City or town, state, and ZIP code <b>MINNEAPOLIS, MN 55405</b>	C If exemption application is pending, check here <input type="checkbox"/>
H Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation	J Accounting method: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____	D 1. Foreign organizations, check here <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) \$ <b>5,725,124.</b> (Part I, column (d) must be on cash basis.)		E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>
		F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>

Part I	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
	1 Contributions, gifts, grants, etc., received	2,343,437.			
	2 Check <input type="checkbox"/> if the foundation is not required to attach Sch B				
	3 Interest on savings and temporary cash investments				
	4 Dividends and interest from securities	127,437.	127,437.	127,437.	<b>STATEMENT 1</b>
	5a Gross rents				
	b Net rental income or (loss)				
	6a Net gain or (loss) from sale of assets not on line 10				
	b Gross sales price for all assets on line 6a <b>136,487.</b>				
	7 Capital gain net income (from Part IV, line 2)		109,036.		
	8 Net short-term capital gain			100,672.	
	9 Income modifications				
	10a Gross sales less returns and allowances				
	b Less Cost of goods sold				
	c Gross profit or (loss)				
	11 Other income	6,138.	0.	6,138.	<b>STATEMENT 2</b>
	12 Total. Add lines 1 through 11	2,586,048.	236,473.	234,247.	
Operating and Administrative Expenses	13 Compensation of officers, directors, trustees, etc	0.	0.	0.	0.
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees <b>STMT 3</b>	6,044.	0.	0.	6,044.
	b Accounting fees <b>STMT 4</b>	12,470.	0.	0.	12,470.
	c Other professional fees <b>STMT 5</b>	1,455,950.	0.	0.	1,455,950.
	17 Interest				
	18 Taxes <b>STMT 6</b>	2,394.	0.	0.	0.
	19 Depreciation and depletion	43,333.	0.	0.	
	20 Occupancy				
	21 Travel, conferences, and meetings	244,317.	0.	0.	244,317.
	22 Printing and publications	22,249.	0.	0.	22,249.
23 Other expenses <b>STMT 7</b>	1,389,176.	0.	0.	1,389,176.	
24 Total operating and administrative expenses. Add lines 13 through 23	3,175,933.	0.	0.	3,130,206.	
25 Contributions, gifts, grants paid	142,000.			142,000.	
26 Total expenses and disbursements. Add lines 24 and 25	3,317,933.	0.		3,272,206.	
27 Subtract line 26 from line 12:					
a Excess of revenue over expenses and disbursements	-731,885.				
b Net investment income (if negative, enter -0-)		236,473.			
c Adjusted net income (if negative, enter -0-)				234,247.	



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Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value		
Assets	1	Cash - non-interest-bearing				
	2	Savings and temporary cash investments		6,409,956.	5,703,458.	5,703,458.
	3	Accounts receivable ▶				
		Less: allowance for doubtful accounts ▶				
	4	Pledges receivable ▶				
		Less: allowance for doubtful accounts ▶				
	5	Grants receivable				
	6	Receivables due from officers, directors, trustees, and other disqualified persons				
	7	Other notes and loans receivable ▶				
		Less: allowance for doubtful accounts ▶				
	8	Inventories for sale or use				
	9	Prepaid expenses and deferred charges				
	10a	Investments - U.S. and state government obligations				
	b	Investments - corporate stock		91,089.		
	c	Investments - corporate bonds				
11	Investments - land, buildings, and equipment basis ▶					
	Less accumulated depreciation ▶					
12	Investments - mortgage loans					
13	Investments - other					
14	Land, buildings, and equipment: basis ▶	130,000.				
	Less accumulated depreciation STMT 9 ▶	108,334.	65,000.	21,666.	21,666.	
15	Other assets (describe ▶)					
16	<b>Total assets</b> (to be completed by all filers)		6,566,045.	5,725,124.	5,725,124.	
Liabilities	17	Accounts payable and accrued expenses				
	18	Grants payable				
	19	Deferred revenue				
	20	Loans from officers, directors, trustees, and other disqualified persons				
	21	Mortgages and other notes payable				
	22	Other liabilities (describe ▶)				
23	<b>Total liabilities</b> (add lines 17 through 22)		0.	0.		
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here ▶ <input checked="" type="checkbox"/>					
	and complete lines 24 through 26 and lines 30 and 31.					
	24	Unrestricted		6,566,045.	5,725,124.	
	25	Temporarily restricted				
	26	Permanently restricted				
	Foundations that do not follow SFAS 117, check here ▶ <input type="checkbox"/>					
	and complete lines 27 through 31.					
	27	Capital stock, trust principal, or current funds				
28	Paid-in or capital surplus, or land, bldg., and equipment fund					
29	Retained earnings, accumulated income, endowment, or other funds					
30	<b>Total net assets or fund balances</b>		6,566,045.	5,725,124.		
31	<b>Total liabilities and net assets/fund balances</b>		6,566,045.	5,725,124.		

Part III Analysis of Changes in Net Assets or Fund Balances

1	Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	6,566,045.
2	Enter amount from Part I, line 27a	2	-731,885.
3	Other increases not included in line 2 (itemize) ▶	3	0.
4	Add lines 1, 2, and 3	4	5,834,160.
5	Decreases not included in line 2 (itemize) ▶ TAX GAIN ON INVESTMENTS	5	109,036.
6	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	5,725,124.

**Part IV Capital Gains and Losses for Tax on Investment Income**

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a 333 SHARES - COLGATE PALMOLIVE CO	D	11/24/08	11/25/08
b 265 SHARES - JOHNSON & JOHNSON CO	D	01/22/97	11/25/08
c 1,500 SHARES - DOLLAR TREE INC	D	12/18/08	12/18/08
d 390 SHARES - LABORATORY CORP AMER HLDGS	D	12/22/08	12/22/08
e 156 SHARES - STRYKER CORP	D	06/02/08	06/09/08

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a 21,339.		6,772.	14,567.
b 15,709.		7,345.	8,364.
c 65,062.			65,062.
d 24,498.		11,840.	12,658.
e 9,879.		1,494.	8,385.

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	
a			14,567.
b			8,364.
c			65,062.
d			12,658.
e			8,385.

2 Capital gain net income or (net capital loss)	{ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7                 }	2	109,036.
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). If (loss), enter -0- in Part I, line 8		3	100,672.

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

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

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

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

Yes  No

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

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

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col. (b) divided by col. (c))
2007	3,557,659.	5,855,070.	.607620
2006	2,026,448.	4,406,943.	.459831
2005	3,175,195.	3,074,788.	1.032655
2004	1,151,525.	2,258,403.	.509885
2003	1,326,083.	1,364,914.	.971551

2 Total of line 1, column (d)	2	3.581542
3 Average distribution ratio for the 5-year base period - divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years	3	.716308
4 Enter the net value of noncharitable-use assets for 2008 from Part X, line 5	4	6,010,718.
5 Multiply line 4 by line 3	5	4,305,525.
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	2,365.
7 Add lines 5 and 6	7	4,307,890.
8 Enter qualifying distributions from Part XII, line 4	8	3,272,206.

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

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

1a	Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1. Date of ruling letter: _____ (attach copy of ruling letter if necessary-see instructions)		
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input type="checkbox"/> and enter 1% of Part I, line 27b	1	4,729.
c	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b)		
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2	0.
3	Add lines 1 and 2	3	4,729.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4	0.
5	<b>Tax based on investment income</b> Subtract line 4 from line 3. If zero or less, enter -0-	5	4,729.
6	Credits/Payments:		
a	2008 estimated tax payments and 2007 overpayment credited to 2008	6a	9,450.
b	Exempt foreign organizations - tax withheld at source	6b	
c	Tax paid with application for extension of time to file (Form 8868)	6c	
d	Backup withholding erroneously withheld	6d	
7	Total credits and payments. Add lines 6a through 6d	7	9,450.
8	Enter any <b>penalty</b> for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached	8	
9	<b>Tax due.</b> If the total of lines 5 and 8 is more than line 7, enter <b>amount owed</b>	9	
10	<b>Overpayment.</b> If line 7 is more than the total of lines 5 and 8, enter the <b>amount overpaid</b>	10	4,721.
11	Enter the amount of line 10 to be: <b>Credited to 2009 estimated tax</b> <input type="checkbox"/> <b>Refunded</b> <input type="checkbox"/>	11	0.

**Part VII-A Statements Regarding Activities**

	Yes	No
1a		X
1b		X
1c		X
2		X
3		X
4a		X
4b		
5		X
6	X	
7	X	
8a		
8b	X	
9	X	
10		X

**Part VII-A Statements Regarding Activities** (continued)

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)			X
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008?			X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ► WWW.BRAVEWELL.ORG	X		
14	The books are in care of ► FAMILY PHILANTHROPY ADVISORS Telephone no. ► 612-377-8400 Located at ► 1818 OLIVER AVENUE SOUTH, MINNEAPOLIS, MN ZIP+4 ► 55405			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the year		15	N/A

**Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required**

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.

	Yes	No
1a During the year did the foundation (either directly or indirectly):		
(1) Engage in the sale or exchange, or leasing of property with a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)? Organizations relying on a current notice regarding disaster assistance check here <input type="checkbox"/> N/A		
c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2008?		X
2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):		
a At the end of tax year 2008, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2008? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," list the years ►		
b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement - see instructions.) <input type="checkbox"/> N/A		
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. ►		
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b If "Yes," did it have excess business holdings in 2008 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2008) <input type="checkbox"/> N/A		
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		X
b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2008?		X

**Part VII-B** Statements Regarding Activities for Which Form 4720 May Be Required (continued)

**5a** During the year did the foundation pay or incur any amount to:

(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?  Yes  No

(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive?  Yes  No

(3) Provide a grant to an individual for travel, study, or other similar purposes?  Yes  No

(4) Provide a grant to an organization other than a charitable, etc., organization described in section 509(a)(1), (2), or (3), or section 4940(d)(2)?  Yes  No

(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?  Yes  No

**b** If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)? **N/A**  **5b**

Organizations relying on a current notice regarding disaster assistance check here

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

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

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

**b** Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? **6b**  Yes  No **X**

If you answered "Yes" to 6b, also file Form 8870

**7a** At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?  Yes  No

**b** If yes, did the foundation receive any proceeds or have any net income attributable to the transaction? **N/A** **7b**

**Part VIII** Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

**1** List all officers, directors, trustees, foundation managers and their compensation.

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
SEE STATEMENT 10		0.	0.	0.

**2** Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				

Total number of other employees paid over \$50,000 0

**Part VIII** Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)

**3** Five highest-paid independent contractors for professional services. If none, enter "NONE."

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
FAMILY PHILANTHROPY ADVISORS 1818 OLIVER AVENUE S, MINNEAPOLIS, MN 55405	PROGRAM & OPERATIONS MANAGEMENT	999,732.
GYMR 1825 CONNECTICUT AVE NW, WASHINGTON, DC 20009	PUBLIC RELATIONS	149,419.
MIDDLEMARCH FILMS 132 W 21ST ST - 6TH FLR, NEW YORK, NY 10011	PRODUCTION CONSULTANT	81,846.
TERRY MACGREGOR ASSOCIATES 2904 DOC SAVAGE DRIVE, LANGLEY, WA 98260	MEETING FACILITATION	66,411.

Total number of others receiving over \$50,000 for professional services ▶ 0

**Part IX-A** Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1  SEE STATEMENT 11	1,295,495.
2  SEE STATEMENT 12	778,776.
3 GROWING A DYNAMIC COMMUNITY OF PHILANTHROPISTS: TO CREATE, SUPPORT AND GROW A DYNAMIC COMMUNITY OF COMMITTED AND INFORMED PHILANTHROPISTS AND STRATEGIC PARTNERSHIPS.	250,649.
4  SEE STATEMENT 13	232,189.

**Part IX-B** Summary of Program-Related Investments

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
1 N/A	
2	
All other program-related investments. See instructions.	
3	
<b>Total.</b> Add lines 1 through 3 <span style="float: right;">▶</span>	0.

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

<b>1</b>	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
<b>a</b>	Average monthly fair market value of securities	<b>1a</b>	45,545.
<b>b</b>	Average of monthly cash balances	<b>1b</b>	6,056,707.
<b>c</b>	Fair market value of all other assets	<b>1c</b>	
<b>d</b>	<b>Total</b> (add lines 1a, b, and c)	<b>1d</b>	6,102,252.
<b>e</b>	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	<b>1e</b>	0.
<b>2</b>	Acquisition indebtedness applicable to line 1 assets	<b>2</b>	0.
<b>3</b>	Subtract line 2 from line 1d	<b>3</b>	6,102,252.
<b>4</b>	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	<b>4</b>	91,534.
<b>5</b>	<b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3. Enter here and on Part V, line 4	<b>5</b>	6,010,718.
<b>6</b>	<b>Minimum investment return.</b> Enter 5% of line 5	<b>6</b>	300,536.

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

<b>1</b>	Minimum investment return from Part X, line 6	<b>1</b>	
<b>2a</b>	Tax on investment income for 2008 from Part VI, line 5	<b>2a</b>	
<b>b</b>	Income tax for 2008. (This does not include the tax from Part VI.)	<b>2b</b>	
<b>c</b>	Add lines 2a and 2b	<b>2c</b>	
<b>3</b>	Distributable amount before adjustments. Subtract line 2c from line 1	<b>3</b>	
<b>4</b>	Recoveries of amounts treated as qualifying distributions	<b>4</b>	
<b>5</b>	Add lines 3 and 4	<b>5</b>	
<b>6</b>	Deduction from distributable amount (see instructions)	<b>6</b>	
<b>7</b>	<b>Distributable amount as adjusted.</b> Subtract line 6 from line 5. Enter here and on Part XIII, line 1	<b>7</b>	

**Part XII** Qualifying Distributions (see instructions)

<b>1</b>	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
<b>a</b>	Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26	<b>1a</b>	3,272,206.
<b>b</b>	Program-related investments - total from Part IX-B	<b>1b</b>	0.
<b>2</b>	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	<b>2</b>	
<b>3</b>	Amounts set aside for specific charitable projects that satisfy the:		
<b>a</b>	Suitability test (prior IRS approval required)	<b>3a</b>	
<b>b</b>	Cash distribution test (attach the required schedule)	<b>3b</b>	
<b>4</b>	<b>Qualifying distributions.</b> Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	<b>4</b>	3,272,206.
<b>5</b>	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b	<b>5</b>	0.
<b>6</b>	<b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4	<b>6</b>	3,272,206.

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



**Part XIII Undistributed Income** (see instructions)

	(a) Corpus	(b) Years prior to 2007	(c) 2007	(d) 2008
1 Distributable amount for 2008 from Part XI, line 7				0.
2 Undistributed income, if any, as of the end of 2007				
a Enter amount for 2007 only			0.	
b Total for prior years:		0.		
3 Excess distributions carryover, if any, to 2008:				
a From 2003				
b From 2004				
c From 2005				
d From 2006				
e From 2007				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2008 from Part XII, line 4: ▶ \$ <u>N/A</u>				
a Applied to 2007, but not more than line 2a			0.	
b Applied to undistributed income of prior years (Election required - see instructions)		0.		
c Treated as distributions out of corpus (Election required - see instructions)	0.			
d Applied to 2008 distributable amount				0.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2008 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:				
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	0.			
b Prior years' undistributed income. Subtract line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable amount - see instructions		0.		
e Undistributed income for 2007. Subtract line 4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2008. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2009				0.
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2003 not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2009. Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9:				
a Excess from 2004				
b Excess from 2005				
c Excess from 2006				
d Excess from 2007				
e Excess from 2008				

**Part XIV Private Operating Foundations** (see instructions and Part VII-A, question 9)

1 a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2008, enter the date of the ruling ▶ 08/30/02  
 b Check box to indicate whether the foundation is a private operating foundation described in section  4942(j)(3) or  4942(j)(5)

	Tax year				(e) Total
	(a) 2008	(b) 2007	(c) 2006	(d) 2005	
2 a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed	234,247.	240,715.	191,510.	72,990.	739,462.
b 85% of line 2a	199,110.	204,608.	162,784.	62,042.	628,543.
c Qualifying distributions from Part XII, line 4 for each year listed	3,272,206.	3,557,659.	2,026,448.	3,179,732.	12036045.
d Amounts included in line 2c not used directly for active conduct of exempt activities	142,000.	167,000.	141,754.	1,193,670.	1,644,424.
e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c	3,130,206.	3,390,659.	1,884,694.	1,986,062.	10391621.
3 Complete 3a, b, or c for the alternative test relied upon:					
a "Assets" alternative test - enter:					
(1) Value of all assets	5,725,124.	6,566,045.	5,495,756.	3,560,684.	21347609.
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					0.
b "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed	200,357.	195,169.	146,898.	102,493.	644,917.
c "Support" alternative test - enter:					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)	2,343,437.	4,457,794.	3,794,082.	3,998,592.	14593905.
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					0.
(3) Largest amount of support from an exempt organization					0.
(4) Gross investment income					0.

**Part XV Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year-see the instructions.)**

1 **Information Regarding Foundation Managers:**  
 a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2).)

**SEE STATEMENT 14**

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest.

**NONE**

2 **Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:**  
 Check here  if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d.

- a The name, address, and telephone number of the person to whom applications should be addressed:

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- b The form in which applications should be submitted and information and materials they should include:

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- c Any submission deadlines:

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- d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:

**Part XV** Supplementary Information (continued)

**3** Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<p>a <i>Paid during the year</i></p> <p>CONSORT OF ACAD HLTH CTRS FOR INTEGRATIVE MED, 420 DELAWARE ST, MPLS, MN 554</p>	<p>NONE</p>	<p>PUBLIC CHARITY</p>	<p>EDUCATIONAL</p>	<p>142,000.</p>
<p><b>Total</b> <span style="float: right;">▶ 3a</span></p>				<p>142,000.</p>
<p>b <i>Approved for future payment</i></p> <p>NONE</p>				
<p><b>Total</b> <span style="float: right;">▶ 3b</span></p>				<p>0.</p>





**Schedule B**

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

Department of the Treasury  
Internal Revenue Service

**Schedule of Contributors**

▶ Attach to Form 990, 990-EZ, and 990-PF.

OMB No 1545-0047

**2008**

Name of the organization

Employer identification number

**THE BRAVEWELL COLLABORATIVE**

**71-0879929**

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

501(c)( ) (enter number) organization

4947(a)(1) nonexempt charitable trust not treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**. (Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.)

**General Rule**

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

**Special Rules**

For a section 501(c)(3) organization filing Form 990, or Form 990-EZ, that met the 33 1/3% support test of the regulations under sections 509(a)(1)/170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on Form 990, Part VIII, line 1h or 2% of the amount on Form 990-EZ, line 1. Complete Parts I and II.

For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, aggregate contributions or bequests of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III

For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, some contributions for use *exclusively* for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000 (If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year) ▶ \$ \_\_\_\_\_

**Caution.** Organizations that are not covered by the General Rule and/or the Special Rules do not file Schedule B (Form 990, 990-EZ, or 990-PF), but they **must** answer "No" on Part IV, line 2 of their Form 990, or check the box in the heading of their Form 990-EZ, or on line 2 of their Form 990-PF, to certify that they do not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. These instructions will be issued separately.

Schedule B (Form 990, 990-EZ, or 990-PF) (2008)

Name of organization <b>THE BRAVEWELL COLLABORATIVE</b>	Employer identification number <b>71-0879929</b>
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**Part I Contributors** (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	ARTHUR EMIL 420 LEXINGTON AVENUE NEW YORK, NY 10170	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
2	BARBARA FORSTER 700 SOUTH SECOND STREET, LOFT 71 MINNEAPOLIS, MN 55401	\$ 65,062.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II if there is a noncash contribution.)
3	BLYTHE BRENDEN 80 SOUTH 8TH STREET, SUITE 900 MINNEAPOLIS, MN 55402	\$ 150,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
4	CAPITAL ONE SERVICES 909 POYDRAS STREET NEW ORLEANS, LA 70112	\$ 7,500.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
5	CHRISTY & JOHN MACK FOUNDATION 91 SUNSET LANE RYE, NY 10580	\$ 800,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
6	COLBURN AND ALANA JONES 26 ENCINA DRIVE CARMEL VALLEY, CA 93924	\$ 46,927.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II if there is a noncash contribution.)

Name of organization

Employer identification number

THE BRAVEWELL COLLABORATIVE

71-0879929

**Part I Contributors** (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
7	COMMUNITY FOUNDATION OF NORTH TEXAS 306 WEST 7TH STREET, #306 FORT WORTH, TX 76102	\$ 33,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
8	DAVID C AND LURA M LOVELL FOUNDATION 8400 NORTH NATIONAL DRIVE TUCSON, AZ 85742	\$ 141,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
9	FRANCES LEAR FOUNDATION 300 CENTRAL PARK WEST, APT 8F NEW YORK, NY 10024	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
10	GEORGE FAMILY FOUNDATION 1818 OLIVER AVENUE SOUTH MINNEAPOLIS, MN 55405	\$ 383,334.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
11	IRA BRIND 1830 RITTENHOUSE SQUARE, APT. 14A PHILADELPHIA, PA 19103	\$ 24,498.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II if there is a noncash contribution.)
12	JEWISH COMMUNAL FUND 875 PARK AVENUE NEW YORK, NY 10021	\$ 101,200.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)



Name of organization <b>THE BRAVEWELL COLLABORATIVE</b>	Employer identification number <b>71-0879929</b>
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**Part I Contributors** (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
13	<b>KARAN-WEISS FOUNDATION</b> 2800 28TH STREET, SUITE 105 SANTA MONICA, CA 90405	\$ 43,300.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
14	<b>MARIO FAMILY FOUNDATION</b> 20 GREENHOUSE DRIVE PRINCETON, NJ 08540	\$ 25,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
15	<b>MICHELE &amp; DAVID MITTELMAN FAMILY FOUNDATION</b> 16 ROLLING LANE DOVER, MA 02030	\$ 91,667.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
16	<b>SHERRY LUND</b> 520 INDIAN MOUND STREET, UNIT 1-B WAYZATA, MN 55391	\$ 63,147.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II if there is a noncash contribution.)
17	<b>THE CHARLES EVANS FOUNDATION</b> 116 VILLAGE BOULEVARD, SUITE 200 PRINCETON, NJ 08540-5700	\$ 100,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
18	<b>THE DORIS DUKE CHARITABLE FOUNDATION</b> 650 FIFTH AVENUE, 19TH FLOOR NEW YORK, NY 10019	\$ 58,837.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

Name of organization

Employer identification number

**THE BRAVEWELL COLLABORATIVE**

**71-0879929**

**Part I Contributors** (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
19	<p><b>THE WESTREICH FOUNDATION</b></p> <p>P O BOX 3601</p> <p>RANCHO SANTA FE, CA 92067</p>	<p>\$ 90,000.</p>	<p>Person <input checked="" type="checkbox"/></p> <p>Payroll <input type="checkbox"/></p> <p>Noncash <input type="checkbox"/></p> <p>(Complete Part II if there is a noncash contribution.)</p>
20	<p><b>THOMAS NIDES</b></p> <p>1585 BROADWAY</p> <p>NEW YORK, NY 10036</p>	<p>\$ 7,500.</p>	<p>Person <input checked="" type="checkbox"/></p> <p>Payroll <input type="checkbox"/></p> <p>Noncash <input type="checkbox"/></p> <p>(Complete Part II if there is a noncash contribution.)</p>
21	<p><b>TOR PETERSON</b></p> <p>ZUG, SWITZERLAND</p>	<p>\$ 50,000.</p>	<p>Person <input checked="" type="checkbox"/></p> <p>Payroll <input type="checkbox"/></p> <p>Noncash <input type="checkbox"/></p> <p>(Complete Part II if there is a noncash contribution.)</p>
		<p>\$ _____</p>	<p>Person <input type="checkbox"/></p> <p>Payroll <input type="checkbox"/></p> <p>Noncash <input type="checkbox"/></p> <p>(Complete Part II if there is a noncash contribution.)</p>
		<p>\$ _____</p>	<p>Person <input type="checkbox"/></p> <p>Payroll <input type="checkbox"/></p> <p>Noncash <input type="checkbox"/></p> <p>(Complete Part II if there is a noncash contribution.)</p>
		<p>\$ _____</p>	<p>Person <input type="checkbox"/></p> <p>Payroll <input type="checkbox"/></p> <p>Noncash <input type="checkbox"/></p> <p>(Complete Part II if there is a noncash contribution.)</p>

Name of organization

Employer identification number

THE BRAVEWELL COLLABORATIVE

71-0879929

**Part II Noncash Property** (see instructions)

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
2	1,500 SHARES - DOLLAR TREE, INC.	\$ 65,062.	12/18/08
6	156 SHARES - STRYKER CORP 266 SHARES - JOHNSON & JOHNSON 333 SHARES - COLGATE PALMOLIVE	\$ 46,927.	VARIOUS
11	390 SHARES - LABORATORY CORP	\$ 24,498.	12/22/08
16	375 SHARES - EXXON MOBIL	\$ 63,147.	12/01/08
		\$	
		\$	

FORM 990-PF DIVIDENDS AND INTEREST FROM SECURITIES STATEMENT 1

SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS	COLUMN (A) AMOUNT
US BANCORP INTEREST	127,437.	0.	127,437.
TOTAL TO FM 990-PF, PART I, LN 4	127,437.	0.	127,437.

FORM 990-PF OTHER INCOME STATEMENT 2

DESCRIPTION	(A) REVENUE PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME
ROYALTY INCOME	6,138.	0.	6,138.
TOTAL TO FORM 990-PF, PART I, LINE 11	6,138.	0.	6,138.

FORM 990-PF LEGAL FEES STATEMENT 3

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
LEGAL FEES	6,044.	0.	0.	6,044.
TO FM 990-PF, PG 1, LN 16A	6,044.	0.	0.	6,044.

FORM 990-PF ACCOUNTING FEES STATEMENT 4

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ACCOUNTING	12,470.	0.	0.	12,470.
TO FORM 990-PF, PG 1, LN 16B	12,470.	0.	0.	12,470.

FORM 990-PF	OTHER PROFESSIONAL FEES			STATEMENT 5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
CONSULTING	1,455,950.	0.	0.	1,455,950.
TO FORM 990-PF, PG 1, LN 16C	1,455,950.	0.	0.	1,455,950.

FORM 990-PF	TAXES			STATEMENT 6
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
EXCISE TAX	2,394.	0.	0.	0.
TO FORM 990-PF, PG 1, LN 18	2,394.	0.	0.	0.

FORM 990-PF	OTHER EXPENSES			STATEMENT 7
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
POSTAGE AND DELIVERY	8,963.	0.	0.	8,963.
OFFICE SUPPLIES	4,119.	0.	0.	4,119.
MARKETING	26,939.	0.	0.	26,939.
TELEPHONE	6,506.	0.	0.	6,506.
MEALS	72,774.	0.	0.	72,774.
MISCELLANEOUS EXPENSE	1,154.	0.	0.	1,154.
INSURANCE	22,362.	0.	0.	22,362.
EVENT DESIGN	4,965.	0.	0.	4,965.
PROGRAM EXPENSE	1,073,245.	0.	0.	1,073,245.
PUBLIC RELATIONS	162,399.	0.	0.	162,399.
BAD DEBT EXPENSE	5,750.	0.	0.	5,750.
TO FORM 990-PF, PG 1, LN 23	1,389,176.	0.	0.	1,389,176.

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FOOTNOTES

STATEMENT 8

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FORM 990-PF, PART I, LINE 19:

PROPERTY AND EQUIPMENT, INCLUDING WEBSITE DEVELOPMENT, IS  
STATED AT COST AND IS AMORTIZED USING THE STRAIGHT-LINE  
METHOD OVER ITS ESTIMATED USEFUL LIFE OF 3 YEARS.

43,333.

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FORM 990-PF, PART VIII:

FAMILY PHILANTHROPY ADVISORS PROVIDES ADMINISTRATIVE AND PROGRAM MANAGEMENT SERVICES TO THE BRAVEWELL COLLABORATIVE. DIANE NEIMANN IS THE EXECUTIVE DIRECTOR OF THE FOUNDATION AND EMPLOYEE OF FAMILY PHILANTHROPY ADVISORS. NO COMPENSATION IS PAID DIRECTLY TO THE EXECUTIVE DIRECTOR BY THE BRAVEWELL COLLABORATIVE

FORM 990-PF DEPRECIATION OF ASSETS NOT HELD FOR INVESTMENT STATEMENT 9

DESCRIPTION	COST OR OTHER BASIS	ACCUMULATED DEPRECIATION	BOOK VALUE	FAIR MARKET VALUE
WEB SITE DEVELOPMENT	130,000.	108,334.	21,666.	21,666.
TO 990-PF, PART II, LN 14	130,000.	108,334.	21,666.	21,666.

FORM 990-PF PART VIII - LIST OF OFFICERS, DIRECTORS TRUSTEES AND FOUNDATION MANAGERS STATEMENT 10

NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN-SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
PENNY GEORGE 1818 OLIVER AVENUE SOUTH MINNEAPOLIS, MN 55405	PAST-PRESIDENT 10.00	0.	0.	0.
LURA LOVELL 1818 OLIVER AVENUE SOUTH MINNEAPOLIS, MN 55405	DIRECTOR 1.00	0.	0.	0.
WILLIAM SARNOFF 1818 OLIVER AVENUE SOUTH MINNEAPOLIS, MN 55405	VICE PRESIDENT 10.00	0.	0.	0.
ANN LOVELL 1818 OLIVER AVENUE SOUTH MINNEAPOLIS, MN 55405	TREASURER 10.00	0.	0.	0.
SHERRY LUND 1818 OLIVER AVENUE SOUTH MINNEAPOLIS, MN 55405	SECRETARY 10.00	0.	0.	0.
CHRISTY MACK 1818 OLIVER AVENUE SOUTH MINNEAPOLIS, MN 55405	PRESIDENT 30.00	0.	0.	0.
BARBARA FORSTER 1818 OLIVER AVENUE SOUTH MINNEAPOLIS, MN 55405	DIRECTOR 1.00	0.	0.	0.
DIANE NEIMANN 1818 OLIVER AVENUE SOUTH MINNEAPOLIS, MN 55405	EXECUTIVE DIRECTOR 40.00	0.	0.	0.
TOTALS INCLUDED ON 990-PF, PAGE 6, PART VIII		0.	0.	0.



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FORM 990-PF                      SUMMARY OF DIRECT CHARITABLE ACTIVITIES                      STATEMENT 11

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ACTIVITY ONE

LEADING CLINICAL CENTERS AS MODELS FOR CHANGE:  
 TO EMPOWER AND ACCELERATE THE GROWTH OF LEADING CLINICAL  
 CENTERS OF INTEGRATIVE MEDICINE WHICH CAN SERVE AS MODELS FOR  
 CHANGE IN THE HEALTHCARE DELIVERY SYSTEM. THE "CLINICAL  
 NETWORK" IS COMPRISED OF 8 INTEGRATIVE MEDICINE CENTERS FROM  
 ACROSS THE COUNTRY THAT CONVENE SEMI-ANNUALLY TO SHARE  
 LESSONS LEARNED. THIS PROGRAM SUPPORTS THE TRAINING OF 51  
 FELLOWS IN INTEGRATIVE MEDICINE AND THE IMPLEMENTATION OF A  
 PRACTICE BASED RESEARCH NETWORK.

EXPENSES

TO FORM 990-PF, PART IX-A, LINE 1

1,295,495.

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FORM 990-PF                      SUMMARY OF DIRECT CHARITABLE ACTIVITIES                      STATEMENT 12

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ACTIVITY TWO

ESTABLISHING STRATEGIC PARTNERSHIPS:  
 TO IDENTIFY, SELECT AND COLLABORATE WITH STRATEGIC PARTNERS  
 WHO ADVANCE BRAVEWELL'S MISSION, OFFERING OPPORTUNITIES FOR  
 MAXIMUM LEVERAGE, IMPACT AND EFFECTIVENESS AT THE HIGHEST  
 STANDARD. BRAVEWELL INITIATIVES HAVE PROVEN HIGHLY EFFECTIVE  
 AND MUST NOW BE BROUGHT TO SCALE AT A NATIONAL LEVEL. THE  
 SUMMIT ON INTEGRATIVE MEDICINE AND THE PUBLIC HEALTH HAS THE  
 POTENTIAL TO ELEVATE THE WORK OF THE BRAVEWELL COLLABORATIVE  
 TO THIS LEVEL.

EXPENSES

TO FORM 990-PF, PART IX-A, LINE 2

778,776.

FORM 990-PF

SUMMARY OF DIRECT CHARITABLE ACTIVITIES

STATEMENT 13

ACTIVITY FOUR

CHANGING THE WAY PHYSICIANS ARE EDUCATED:  
TO DEVELOP AND SUPPORT THE EFFORTS WHICH BUILD THE CAPACITY  
OF PHYSICIANS TO PRACTICE INTEGRATIVE MEDICINE, TO SUPPORT  
THE INFRASTRUCTURE OF THE CONSORTIUM OF ACADEMIC HEALTH  
CENTERS FOR INTEGRATIVE MEDICINE (CAHCIM) AND TO WORK WITH  
OTHER STRATEGIC PARTNERS WITH THE POWER TO EFFECT POSITIVE  
CHANGE.

EXPENSES

TO FORM 990-PF, PART IX-A, LINE 4

232,189.

FORM 990-PF

PART XV - LINE 1A  
LIST OF FOUNDATION MANAGERS

STATEMENT 14

NAME OF MANAGER

- PENNY GEORGE
- LURA LOVELL
- WILLIAM SARNOFF
- ANN LOVELL
- SHERRY LUND
- CHRISTY MACK
- BARBARA FORSTER