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Form **990-PF**

Department of the Treasury  
Internal Revenue Service

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

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

OMB No 1545-0052  
**2009**

For calendar year 2009, or tax year beginning 01-01-2009 , and ending 12-31-2009

G

Check all that apply

☐ Initial return

☐ Initial return of a former public charity

☐ Final return




☐ Amended return

☐ Address change



☐ Name change

Use the IRS label. Otherwise, print or type. See Specific Instructions.	Name of foundation KENWOOD FOUNDATION MPB 7552021240		A Employer identification number 04-6012784	
	Number and street (or P O box number if mail is not delivered to street address) Room/suite 45 SCHOOL ST 5TH FLOOR		B Telephone number (see page 10 of the instructions) (617) 523-1635	
	City or town, state, and ZIP code BOSTON, MA 02108		C If exemption application is pending, check here <input type="checkbox"/> D 1. Foreign organizations, check here <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation <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			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"/>	
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) \$ 333,476		J Accounting method <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) (Part I, column (d) must be on cash basis.)		

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see page 11 of the instructions) )		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc , received (attach schedule)	132,768			
	2 Check <input type="checkbox"/> if the foundation is <b>not</b> required to attach Sch. B				
	3 Interest on savings and temporary cash investments				
	4 Dividends and interest from securities. . . . .	3,582	3,582		
	5a Gross rents . . . . .				
	b Net rental income or (loss) _____				
	6a Net gain or (loss) from sale of assets not on line 10	54,115			
	b Gross sales price for all assets on line 6a _____ 54,975				
	7 Capital gain net income (from Part IV, line 2) . . . .		54,115		
	8 Net short-term capital gain . . . . .				
	9 Income modifications . . . . .				
	10a Gross sales less returns and allowances				
Operating and Administrative Expenses	b Less Cost of goods sold . . . . .				
	c Gross profit or (loss) (attach schedule) . . . . .				
	11 Other income (attach schedule) . . . . .				
	12 <b>Total.</b> Add lines 1 through 11 . . . . .	190,465	57,697		
	13 Compensation of officers, directors, trustees, etc	0	0		0
	14 Other employee salaries and wages . . . . .				
	15 Pension plans, employee benefits . . . . .				
	16a Legal fees (attach schedule) . . . . .	350	315		35
	b Accounting fees (attach schedule) . . . . .	2,465	2,465		0
	c Other professional fees (attach schedule) . . . . .	1,116	1,004		112
	17 Interest . . . . .				
	18 Taxes (attach schedule) (see page 14 of the instructions)	542	24		0
	19 Depreciation (attach schedule) and depletion . . . .				
	20 Occupancy . . . . .				
	21 Travel, conferences, and meetings . . . . .				
	22 Printing and publications . . . . .				
	23 Other expenses (attach schedule) . . . . .	11,929	70		0
	24 <b>Total operating and administrative expenses.</b>				
	Add lines 13 through 23 . . . . .	16,402	3,878		147
	25 Contributions, gifts, grants paid . . . . .	132,600			132,600
	26 <b>Total expenses and disbursements.</b> Add lines 24 and 25	149,002	3,878		132,747
	27 Subtract line 26 from line 12				
	a <b>Excess of revenue over expenses and disbursements</b>	41,463			
	b <b>Net investment income</b> (if negative, enter -0-)		53,819		
	c <b>Adjusted net income</b> (if negative, enter -0-)				

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	Beginning of year	End of year	
			(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1	Cash—non-interest-bearing . . . . .			
	2	Savings and temporary cash investments . . . . .	49,123	17,929	17,928
	3	Accounts receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	4	Pledges receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	5	Grants receivable . . . . .			
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see page 15 of the instructions) . . . . .			
	7	Other notes and loans receivable (attach schedule) ▶ _____ Less allowance for doubtful accounts ▶ _____			
	8	Inventories for sale or use . . . . .			
	9	Prepaid expenses and deferred charges . . . . .			
	10a	Investments—U S and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule) . . . . .	105,622	 111,171	188,718
	c	Investments—corporate bonds (attach schedule). . . . .	20,137	 20,137	20,103
	11	Investments—land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
	12	Investments—mortgage loans . . . . .			
	13	Investments—other (attach schedule) . . . . .	106,727	 106,727	106,727
	14	Land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
Liabilities	15	Other assets (describe ▶ _____)			
	16	Total assets (to be completed by all filers—see the instructions Also, see page 1, item I)	281,609	255,964	333,476
	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 (attach schedule) . . . . .			
	22	Other liabilities (describe ▶ _____)			
	23	Total liabilities (add lines 17 through 22) . . . . .	0	0	
Net Assets or Fund Balances		Foundations that follow SFAS 117, check here ▶ <input type="checkbox"/> and complete lines 24 through 26 and lines 30 and 31.			
	24	Unrestricted . . . . .			
	25	Temporarily restricted . . . . .			
	26	Permanently restricted . . . . .			
		Foundations that do not follow SFAS 117, check here ▶ <input checked="" type="checkbox"/> and complete lines 27 through 31.			
	27	Capital stock, trust principal, or current funds . . . . .	-254,279	-321,505	
	28	Paid-in or capital surplus, or land, bldg , and equipment fund	0	0	
	29	Retained earnings, accumulated income, endowment, or other funds	535,888	577,469	
	30	Total net assets or fund balances (see page 17 of the instructions) . . . . .	281,609	255,964	
	31	Total liabilities and net assets/fund balances (see page 17 of the instructions) . . . . .	281,609	255,964	

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	281,609
2	Enter amount from Part I, line 27a . . . . .	2	41,463
3	Other increases not included in line 2 (itemize) ▶ _____ 	3	118
4	Add lines 1, 2, and 3 . . . . .	4	323,190
5	Decreases not included in line 2 (itemize) ▶ _____ 	5	67,226
6	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 . . . . .	6	255,964

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 )
1 a	PUBLICLY TRADED SECURITIES	P		
b				
c				
d				
e				

(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 54,975		860	54,115
b			
c			
d			
e			

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

(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	(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
a			54,115
b			
c			
d			
e			

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	54,115
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) (see pages 13 and 17 of the instructions) If (loss), enter -0- in Part I, line 8 . . . . .		3	

Part V

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

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

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

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? ☐ Yes ☒ No  
If "Yes," the foundation does not qualify under section 4940(e) Do not complete this part

1 Enter the appropriate amount in each column for each year, see page 18 of the instructions before making any entries

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2008	140,492	361,941	0 388163
2007	167,780	415,092	0 404200
2006	157,720	406,397	0 388093
2005	277,042	416,061	0 665869
2004	298,393	442,117	0 674919

2 Total of line 1, column (d). . . . .	2	2 521244
3 Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years . . . . .	3	0 504249
4 Enter the net value of noncharitable-use assets for 2009 from Part X, line 5. . . . .	4	310,751
5 Multiply line 4 by line 3. . . . .	5	156,696
6 Enter 1% of net investment income (1% of Part I, line 27b). . . . .	6	538
7 Add lines 5 and 6. . . . .	7	157,234
8 Enter qualifying distributions from Part XII, line 4. . . . .	8	132,747

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 on page 18

Part VIExcise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the 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 or determination letter _____ (attach copy of letter if necessary—see instructions)			
b		Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input type="checkbox"/> and enter 1% of Part I, line 27b . . . . .		1	1,076
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	1,076
4		Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)		4	0
5		Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0- . . . . .		5	1,076
6		Credits/Payments			
a		2009 estimated tax payments and 2008 overpayment credited to 2009	6a	1,944	
b		Exempt foreign organizations—tax withheld at source . . . . .	6b		
c		Tax paid with application for extension of time to file (Form 8868)	6c		
d		Backup withholding erroneously withheld . . . . .	6d		
7		Total credits and payments Add lines 6a through 6d. . . . .		7	1,944
8		Enter any penalty for underpayment of estimated tax Check here <input type="checkbox"/> if Form 2220 is attached		8	
9		Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed . . . . .		9	
10		Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid. . . . .		10	868
11		Enter the amount of line 10 to be Credited to 2010 estimated tax 868	Refunded	11	0

Part VII-AStatements Regarding Activities

1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? . . . . .		Yes	No
		1a		No
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19 of the instructions for definition)? . . . . .			No
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.			
c	Did the foundation file Form 1120-POL for this year?. . . . .	1c		No
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation \$ 0 (2) On foundation managers \$ 0			
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers \$ 0			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS? . . . . . If "Yes," attach a detailed description of the activities.	2		No
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes . . . . .	3		No
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?. . . . .	4a		No
b	If "Yes," has it filed a tax return on Form 990-T for this year?. . . . .	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year? . . . . . If "Yes," attach the statement required by General Instruction T.	5		No
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? . . . . .	6	Yes	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	7	Yes	
8a	Enter the states to which the foundation reports or with which it is registered (see page 19 of the instructions) MA			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation .	8b	Yes	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV on page 27)? If "Yes," complete Part XIV . . . . .	9		No
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10		No

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 page 20 of the instructions).	11		No
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008?	12		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address N/A	13	Yes	
14	The books are in care of WELCH & FORBES LLC Telephone no (617) 523-1635 Located at 45 SCHOOL ST 5TH FLOOR BOSTON MA ZIP+4 02108			
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		

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? Yes No (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?. Yes No (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes No (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes 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)?. Yes 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 ). Yes 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.	1b		No
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 2009?.	1c		No
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 2009, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2009?. If "Yes," list the years 20____, 20____, 20____, 20____			
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 page 20 of the instructions ).	2b		
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here 20____, 20____, 20____, 20____			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?. Yes No			
b	If "Yes," did it have excess business holdings in 2009 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 2009.).	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		No
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 2009?	4b		No

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))?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
	(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
	(3) Provide a grant to an individual for travel, study, or other similar purposes?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
	(4) Provide a grant to an organization other than a charitable, etc , organization described in section 509(a)(1), (2), or (3), or section 4940(d)(2)? (see page 22 of the instructions).	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> 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?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
b	If any answer is "Yes" to 5a(1)–(5), did <b>any</b> of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see page 22 of the instructions)? Organizations relying on a current notice regarding disaster assistance check here.	5b		
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? <i>If "Yes," attach the statement required by Regulations section 53.4945–5(d).</i>			
6a	Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?			
b	Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? <i>If "Yes" to 6b, file Form 8870.</i>	6b		No
7a	At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?			
b	If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?	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 (see page 22 of the instructions).				
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
See Additional Data Table				
2 Compensation of five highest-paid employees (other than those included on line 1—see page 23 of the instructions). If none, enter "NONE."				
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				
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 (see page 23 of the instructions). If none, enter "NONE".		
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services. . . . .		0

Part IX-A

Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1	
2	
3	
4	

Part IX-B Summary of Program-Related Investments (see page 23 of the instructions)	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1	
2	
All other program-related investments. See page 24 of the instructions.	
3	
Total. Add lines 1 through 3. . . . .	0

Part X

Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see page 24 of the instructions.)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc , purposes		
a	Average monthly fair market value of securities. . . . .	1a	208,756
b	Average of monthly cash balances. . . . .	1b	0
c	Fair market value of all other assets (see page 24 of the instructions). . . . .	1c	106,727
d	Total (add lines 1a, b, and c). . . . .	1d	315,483
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation). . . . .	1e	0
2	Acquisition indebtedness applicable to line 1 assets. . . . .	2	0
3	Subtract line 2 from line 1d. . . . .	3	315,483
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see page 25 of the instructions). . . . .	4	4,732
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	310,751
6	Minimum investment return. Enter 5% of line 5. . . . .	6	15,538

Part XI

Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☒ and do not complete this part.)

1	Minimum investment return from Part X, line 6. . . . .	1	15,538
2a	Tax on investment income for 2009 from Part VI, line 5. . . . .	2a	1,076
b	Income tax for 2009 (This does not include the tax from Part VI ). . . . .	2b	
c	Add lines 2a and 2b. . . . .	2c	1,076
3	Distributable amount before adjustments Subtract line 2c from line 1. . . . .	3	14,462
4	Recoveries of amounts treated as qualifying distributions. . . . .	4	0
5	Add lines 3 and 4. . . . .	5	14,462
6	Deduction from distributable amount (see page 25 of the instructions). . . . .	6	0
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1. . . . .	7	14,462


Part XII

Qualifying Distributions (see page 25 of the instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc , purposes		
a	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26. . . . .	1a	132,747
b	Program-related investments—total from Part IX-B. . . . .	1b	0
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc , purposes. . . . .	2	
3	Amounts set aside for specific charitable projects that satisfy the		
a	Suitability test (prior IRS approval required). . . . .	3a	
b	Cash distribution test (attach the required schedule). . . . .	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	132,747
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b (see page 26 of the instructions). . . . .	5	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4. . . . .	6	132,747
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 page 26 of the instructions)

		(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
1 Distributable amount for 2009 from Part XI, line 7					14,462
2 Undistributed income, if any, as of the end of 2008					
a Enter amount for 2008 only. . . . .				0	
b Total for prior years 20____, 20____, 20____			0		
3 Excess distributions carryover, if any, to 2009					
a From 2004. . . . .					102,485
b From 2005. . . . .					20,843
c From 2006. . . . .					
d From 2007. . . . .					
e From 2008. . . . .					140,492
f Total of lines 3a through e. . . . .		263,820			
4 Qualifying distributions for 2009 from Part XII, line 4 ▶ \$ 132,747					
a Applied to 2008, but not more than line 2a				0	
b Applied to undistributed income of prior years (Election required—see page 26 of the instructions)			0		
c Treated as distributions out of corpus (Election required—see page 26 of the instructions). . .		 132,747			
d Applied to 2009 distributable amount. . . . .					0
e Remaining amount distributed out of corpus		0			
5 Excess distributions carryover applied to 2009 (If an amount appears in column (d), the same amount must be shown in column (a).)		14,462			14,462
6 Enter the net total of each column as indicated below:					
a Corpus Add lines 3f, 4c, and 4e Subtract line 5		382,105			
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 page 27 of the instructions . . .			0		
e Undistributed income for 2008 Subtract line 4a from line 2a Taxable amount—see page 27 of the instructions . . . . .				0	
f Undistributed income for 2009 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2010 . . . . .					0
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see page 27 of the instructions) . . . . .		0			
8 Excess distributions carryover from 2004 not applied on line 5 or line 7 (see page 27 of the instructions) . . . . .		88,023			
9 Excess distributions carryover to 2010. Subtract lines 7 and 8 from line 6a . . . . .		294,082			
10 Analysis of line 9					
a Excess from 2005. . . . .					20,843
b Excess from 2006. . . . .					
c Excess from 2007. . . . .					
d Excess from 2008. . . . .					140,492
e Excess from 2009. . . . .					132,747

Part XIV

Private Operating Foundations (see page 27 of the instructions and Part VII-A, question 9)

1a

If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2009, enter the date of the ruling.

b

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

☐ 4942(j)(3) or ☐ 4942(j)(5)

2a	Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed . . . . .	Tax year	Prior 3 years			(e) Total
		(a) 2009	(b) 2008	(c) 2007	(d) 2006	
b	85% of line 2a . . . . .					
c	Qualifying distributions from Part XII, line 4 for each year listed . . . . .					
d	Amounts included in line 2c not used directly for active conduct of exempt activities . . . . .					
e	Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c . . . . .					
3	Complete 3a, b, or c for the alternative test relied upon					
a	"Assets" alternative test—enter					
	(1) Value of all assets . . . . .					
	(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b	"Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed. . . . .					
c	"Support" alternative test—enter					
	(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) . . . . .					
	(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii). . . . .					
	(3) Largest amount of support from an exempt organization					
	(4) Gross investment income					

Part XV

Supplementary Information (Complete this part only if the organization had \$5,000 or more in assets at any time during the year—see page 27 of 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 Additional Data Table

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

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 page 28 of the 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

b

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

c

Any submission deadlines

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)				
a Paid during the year See Additional Data Table				
Total . . . . .			▶ 3a	132,600
b Approved for future payment				
Total . . . . .			▶ 3b	0

Enter gross amounts unless otherwise indicated	Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See page 28 of the instructions )
	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	
<b>1</b> Program service revenue					
<b>a</b> _____					
<b>b</b> _____					
<b>c</b> _____					
<b>d</b> _____					
<b>e</b> _____					
<b>f</b> _____					
<b>g</b> Fees and contracts from government agencies					
<b>2</b> Membership dues and assessments. . . . .					
<b>3</b> Interest on savings and temporary cash investments					
<b>4</b> Dividends and interest from securities. . . . .			14	3,582	
<b>5</b> Net rental income or (loss) from real estate					
<b>a</b> Debt-financed property. . . . .					
<b>b</b> Not debt-financed property. . . . .					
<b>6</b> Net rental income or (loss) from personal property					
<b>7</b> Other investment income. . . . .					
<b>8</b> Gain or (loss) from sales of assets other than inventory			18	54,115	
<b>9</b> Net income or (loss) from special events					
<b>10</b> Gross profit or (loss) from sales of inventory. . .					
<b>11</b> Other revenue <b>a</b> _____					
<b>b</b> _____					
<b>c</b> _____					
<b>d</b> _____					
<b>e</b> _____					
<b>12</b> Subtotal. Add columns (b), (d), and (e). . . . .		0		57,697	0
<b>13 Total.</b> Add line 12, columns (b), (d), and (e). . . . . <b>13</b>					57,697

[illegible]

## Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

<b>1</b> Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?			<b>Yes</b>	<b>No</b>
<b>a</b> Transfers from the reporting foundation to a noncharitable exempt organization of				
<b>(1)</b> Cash. . . . .		<b>1a(1)</b>		<b>No</b>
<b>(2)</b> Other assets. . . . .		<b>1a(2)</b>		<b>No</b>
<b>b</b> Other transactions				
<b>(1)</b> Sales of assets to a noncharitable exempt organization. . . . .		<b>1b(1)</b>		<b>No</b>
<b>(2)</b> Purchases of assets from a noncharitable exempt organization. . . . .		<b>1b(2)</b>		<b>No</b>
<b>(3)</b> Rental of facilities, equipment, or other assets. . . . .		<b>1b(3)</b>		<b>No</b>
<b>(4)</b> Reimbursement arrangements. . . . .		<b>1b(4)</b>		<b>No</b>
<b>(5)</b> Loans or loan guarantees. . . . .		<b>1b(5)</b>		<b>No</b>
<b>(6)</b> Performance of services or membership or fundraising solicitations. . . . .		<b>1b(6)</b>		<b>No</b>
<b>c</b> Sharing of facilities, equipment, mailing lists, other assets, or paid employees. . . . .		<b>1c</b>		<b>No</b>
<b>d</b> If the answer to any of the above is "Yes," complete the following schedule. Column <b>(b)</b> should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column <b>(d)</b> the value of the goods, other assets, or services received.				

[illegible]

**2a** Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? . . . . . ☐ Yes ☒ No

b If "Yes," complete the following schedule		
(a) Name of organization	(b) Type of organization	(c) Description of relationship

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer or fiduciary) is based on all information of which preparer has any knowledge.			
*****	2010-05-03	*****	
Signature of officer or trustee	Date	Title	

Paid Preparer's Use Only	Preparer's Signature  John D Craven	Date	Check if self-employed <input checked="" type="checkbox"/>	Preparer's identifying number (see <b>Signature</b> on page 30 of the instructions)
	Firm's name (or yours if self-employed), address, and ZIP code	WELCH & FORBES LLC 45 SCHOOL STREET BOSTON, MA 021083204		EIN
			Phone no (617) 523-1635	

Schedule B

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

Department of the Treasury  
Internal Revenue Service

Schedule of Contributors

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

OMB No 1545-0047

2009

<b>Name of organization</b> KENWOOD FOUNDATION MPB 7552021240	<b>Employer identification number</b> 04-6012784
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Organization type (check one)

<b>Filers of:</b>	<b>Section:</b>
Form 990 or 990-EZ	<input type="checkbox"/> 501(c)( ) (enter number) organization
	<input type="checkbox"/> 4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation
	<input type="checkbox"/> 527 political organization
Form 990-PF	<input checked="" type="checkbox"/> 501(c)(3) exempt private foundation
	<input type="checkbox"/> 4947(a)(1) nonexempt charitable trust treated as a private foundation
	<input type="checkbox"/> 501(c)(3) taxable private foundation

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

General Rule—

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

Special Rules

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

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

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

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

Name of organization KENWOOD FOUNDATION MPB 7552021240	Employer identification number  04-6012784
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Part I Contributors (see instructions)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
____	See Additional Data Table  _____  _____  _____	  \$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/>  (Complete Part II if there is a noncash contribution )
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
____	_____  _____  _____	  \$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/>  (Complete Part II if there is a noncash contribution )
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
____	_____  _____  _____	  \$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/>  (Complete Part II if there is a noncash contribution )
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
____	_____  _____  _____	  \$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/>  (Complete Part II if there is a noncash contribution )
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
____	_____  _____  _____	  \$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/>  (Complete Part II if there is a noncash contribution )
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
____	_____  _____  _____	  \$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/>  (Complete Part II if there is a noncash contribution )
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
____	_____  _____  _____	  \$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/>  (Complete Part II if there is a noncash contribution )
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
____	_____  _____  _____	  \$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/>  (Complete Part II if there is a noncash contribution )

Name of organization KENWOOD FOUNDATION MPB 7552021240	Employer identification number 04-6012784
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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
_____	See Additional Data Table	\$ _____	_____
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_____		\$ _____	_____
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_____		\$ _____	_____
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_____		\$ _____	_____
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_____		\$ _____	_____
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_____		\$ _____	_____
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_____		\$ _____	_____

Name of organization KENWOOD FOUNDATION MPB 7552021240	Employer identification number 04-6012784
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Part III

**Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations aggregating more than \$1,000 for the year.** (Complete columns (a) through (e) and the following line entry )

For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc , contributions of **\$1,000 or less** for the year (Enter this information once See instructions ) ➤ \$

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
—	<div></div> <div></div> <div></div>	<div></div> <div></div> <div></div>	<div></div> <div></div> <div></div>
	(e) Transfer of gift		
	<div>Transferee's name, address, and ZIP 4</div> <div>Relationship of transferor to transferee</div> <div></div> <div></div> <div></div>		
—	<div></div> <div></div> <div></div>	<div></div> <div></div> <div></div>	<div></div> <div></div> <div></div>
	(e) Transfer of gift		
	<div>Transferee's name, address, and ZIP 4</div> <div>Relationship of transferor to transferee</div> <div></div> <div></div> <div></div>		
—	<div></div> <div></div> <div></div>	<div></div> <div></div> <div></div>	<div></div> <div></div> <div></div>
	(e) Transfer of gift		
	<div>Transferee's name, address, and ZIP 4</div> <div>Relationship of transferor to transferee</div> <div></div> <div></div> <div></div>		
—	<div></div> <div></div> <div></div>	<div></div> <div></div> <div></div>	<div></div> <div></div> <div></div>
	(e) Transfer of gift		
	<div>Transferee's name, address, and ZIP 4</div> <div>Relationship of transferor to transferee</div> <div></div> <div></div> <div></div>		

Additional Data

Software ID:

Software Version:

EIN: 04-6012784

Name: KENWOOD FOUNDATION MPB 7552021240

Form 990 Schedule B, Part I - Contributors (See Specific Instructions):

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
<div>1</div>	<div>EDITH LACROIX DABNEY</div> <div>C/O WELCH FORBES LLC 45 SCHOOL ST</div> <div>BOSTON, MA 02108</div>	<div>\$ 64,500</div>	<div>Person <input checked="" type="checkbox"/></div> <div>Payroll <input type="checkbox"/></div> <div>Noncash <input type="checkbox"/></div> <div>(Complete Part II if there is a noncash contribution )</div>
<div>2</div>	<div>JAMES T KNOWLES</div> <div>C/O WELCH FORBES LLC 45 SCHOOL ST</div> <div>BOSTON, MA 02108</div>	<div>\$ 10,032</div>	<div>Person <input type="checkbox"/></div> <div>Payroll <input type="checkbox"/></div> <div>Noncash <input checked="" type="checkbox"/></div> <div>(Complete Part II if there is a noncash contribution )</div>
<div>3</div>	<div>JEAN KNOWLES HEDLUND</div> <div>C/O WELCH FORBES LLC 45 SCHOOL ST</div> <div>BOSTON, MA 02108</div>	<div>\$ 4,351</div>	<div>Person <input type="checkbox"/></div> <div>Payroll <input type="checkbox"/></div> <div>Noncash <input checked="" type="checkbox"/></div> <div>(Complete Part II if there is a noncash contribution )</div>
<div>4</div>	<div>JAMES T KNOWLES</div> <div>C/O WELCH FORBES LLC 45 SCHOOL ST</div> <div>BOSTON, MA 02108</div>	<div>\$ 10,058</div>	<div>Person <input type="checkbox"/></div> <div>Payroll <input type="checkbox"/></div> <div>Noncash <input checked="" type="checkbox"/></div> <div>(Complete Part II if there is a noncash contribution )</div>
<div>5</div>	<div>JEAN KNOWLES HEDLUND</div> <div>C/O WELCH FORBES LLC 45 SCHOOL ST</div> <div>BOSTON, MA 02108</div>	<div>\$ 4,062</div>	<div>Person <input type="checkbox"/></div> <div>Payroll <input type="checkbox"/></div> <div>Noncash <input checked="" type="checkbox"/></div> <div>(Complete Part II if there is a noncash contribution )</div>
<div>6</div>	<div>JOHN H KNOWLES JR</div> <div>C/O WELCH FORBES LLC 45 SCHOOL ST</div> <div>BOSTON, MA 02108</div>	<div>\$ 10,058</div>	<div>Person <input type="checkbox"/></div> <div>Payroll <input type="checkbox"/></div> <div>Noncash <input checked="" type="checkbox"/></div> <div>(Complete Part II if there is a noncash contribution )</div>

Form 990 Schedule B, Part I - Contributors (See Specific Instructions):

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
7	JOHN H KNOWLES JR C/O WELCH FORBES LLC 45 SCHOOL ST  BOSTON, MA 02108  	\$ 11,380	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/>  (Complete Part II if there is a noncash contribution )
8	ROBERT M KNOWLES C/O WELCH FORBES LLC 45 SCHOOL ST  BOSTON, MA 02108  	\$ 9,027	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/>  (Complete Part II if there is a noncash contribution )
9	LEWIS L DABNEY C/O WELCH FORBES LLC 45 SCHOOL ST  BOSTON, MA 02108  	\$ 1,048	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/>  (Complete Part II if there is a noncash contribution )

Form 990 Schedule B, Part II - Noncash Property (See Specific Instructions):

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
<u>2</u>	186 SHS ABBOTT LABORATORIES	\$ <u>10,032</u>	<u>2009-12-07</u>
<u>3</u>	84 SHS ABBOTT LABORATORIES	\$ <u>4,351</u>	<u>2009-12-07</u>
<u>4</u>	156 SHS JOHNSON & JOHNSON	\$ <u>10,058</u>	<u>2009-12-07</u>
<u>5</u>	63 SHS JOHNSON & JOHNSON	\$ <u>4,062</u>	<u>2009-12-07</u>
<u>6</u>	156 SHS JOHNSON & JOHNSON	\$ <u>10,058</u>	<u>2009-12-07</u>
<u>7</u>	211 SHS ABBOTT LABORATORIES	\$ <u>11,380</u>	<u>2009-12-07</u>

Form 990 Schedule B, Part II - Noncash Property (See Specific Instructions):

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
<u>8</u>	140 SHS JOHNSON & JOHNSON	\$ <u>9,027</u>	<u>2009-12-07</u>
<u>9</u>	14 SHS EXXON MOBIL CORP	\$ <u>1,048</u>	<u>2009-11-30</u>

Additional Data

Software ID: 09000028

Software Version: 2009.03030

EIN: 04-6012784

Name: KENWOOD FOUNDATION MPB 7552021240


Form 990PF Part VIII Line 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
EDITH L DABNEY	TRUSTEE 0 00	0	0	0
45 SCHOOL STREET 5TH FLOOR BOSTON, MA 02108				
JOHN H KNOWLES JR	TRUSTEE 0 00	0	0	0
45 SCHOOL STREET 5TH FLOOR BOSTON, MA 02108				
EDITH K WILLIAMS	TRUSTEE 0 00	0	0	0
45 SCHOOL STREET 5TH FLOOR BOSTON, MA 02108				
THOMAS M WILLIAMS	TRUSTEE 0 00	0	0	0
45 SCHOOL STREET 5TH FLOOR BOSTON, MA 02108				
JEAN KNOWLES-HEDLUND	TRUSTEE 0 00	0	0	0
45 SCHOOL STREET 5TH FLOOR BOSTON, MA 02108				
JAMES T KNOWLES	TRUSTEE 0 00	0	0	0
45 SCHOOL STREET 5TH FLOOR BOSTON, MA 02108				
ROBERT M KNOWLES	TRUSTEE 0 00	0	0	0
45 SCHOOL STREET 5TH FLOOR BOSTON, MA 02108				
THEODORE E OBER	TRUSTEE 0 25	0	0	0
45 SCHOOL STREET 5TH FLOOR BOSTON, MA 02108				


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

EDITH L DABNEY
JOHN H KNOWLES JR
EDITH K WILLIAMS
THOMAS M WILLIAMS
JEAN KNOWLES-HEDLUND
JAMES T KNOWLES
ROBERT M KNOWLES
THEODORE E OBER


Form 990PF Part XV Line 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)				
<b>a</b> Paid during the year				
ACORD Food Pantry69 Willow StreetPO Box 2203Hamilton, MA 01982	NONE	PUBLIC	UNRESTRICTED	250
American Red Cross of Mass Bay139 MAIN STREET SUITE 1CAMBRIDGE, MA 02142	NONE	PUBLIC	UNRESTRICTED	1,500
Amnesty International USA5 Penn Plaza 16th FloorNew York, NY 10001	NONE	PUBLIC	UNRESTRICTED	500
Animal Rescue League of Boston10 Chandler StBoston, MA 02116	NONE	PUBLIC	UNRESTRICTED	1,000
Annisquam Village Church820 Washington StreetAnnisquam, MA 01930	NONE	PUBLIC	UNRESTRICTED	150
Belmont Hill School350 Prospect StreetBelmont, MA 02178	NONE	PUBLIC	UNRESTRICTED	750
Beverly Bootstraps Food Pantry Inc371 CABOT StreetBeverly, MA 01915	NONE	PUBLIC	UNRESTRICTED	1,000
BOSTON SYMPHONY ORCHESTRA301 MASSACUSETTS AVENUEBOSTON, MA 02115	NONE	PUBLIC	UNRESTRICTED	10,000
Brookwood SchoolPO Box 1429Manchester, MA 01944	NONE	PUBLIC	UNRESTRICTED	10,500
Buckingham Browne & Nichols School80 Gerrys Landing RoadCambridge, MA 02138	NONE	PUBLIC	UNRESTRICTED	250
Buckley School113 East 73rd StreetNew York, NY 10021	NONE	PUBLIC	UNRESTRICTED	250
CAMP KIEVEPO BOX 169NOBLEBORO, ME 04555	NONE	PUBLIC	UNRESTRICTED	100
Campaign For A Commercial-Free Childhood53 Parker Hill AvenueBoston, MA 02120	NONE	PUBLIC	UNRESTRICTED	250
CARE USA151 Ellis StreetNEAtlanta, GA 30303	NONE	PUBLIC	UNRESTRICTED	1,000
CASPAR Inc315 Highland AvenueSomerville, MA 02144	NONE	PUBLIC	UNRESTRICTED	1,000
<b>Total . . . . .</b>  <b>3a</b>				132,600


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Charles River Watershed Assn Inc 190 Park Road Weston,MA 02493	NONE	PUBLIC	UNRESTRICTED	500
Childreach PLAN USA155 Plan Way Warwick,RI 02886	NONE	PUBLIC	UNRESTRICTED	1,000
Children's Cancer Research FundPO BOX 7006 ALBERT LEA,MN 56007	NONE	PUBLIC	UNRESTRICTED	1,000
Children's Home of Poughkeepsie10 Childrens Way Poughkeepsie,NY 12601	NONE	PUBLIC	UNRESTRICTED	500
Children Incorporated4205 Dover Road Richmond,VA 23221	NONE	PUBLIC	UNRESTRICTED	1,000
Christian Children's Fund2821 Emerywood PkwyBox 26484 Richmond,VA 26484	NONE	PUBLIC	UNRESTRICTED	1,000
Christopher Reeve Foundation636 Morris TurnpikeSuite 3A Short Hills,NJ 07078	NONE	PUBLIC	UNRESTRICTED	1,000
Coalition for Buzzards Bay620 Belleville Avenue New Bedford,MA 02745	NONE	PUBLIC	UNRESTRICTED	250
Columbia University622 W 113TH ST MAIL CODE 4524 New York,NY 10025	NONE	PUBLIC	UNRESTRICTED	150
Conservation Law Foundation62 Summer Street Boston,MA 02210	NONE	PUBLIC	UNRESTRICTED	1,250
Dexter School20 Newton Street Brookline,MA 02445	NONE	PUBLIC	UNRESTRICTED	650
Doctors Without Borders333 Seventh Ave 2nd Floor New York,NY 10001	NONE	PUBLIC	UNRESTRICTED	1,000
Environmental Defense Fund1875 Connecticut AveNW Washington,DC 20009	NONE	PUBLIC	UNRESTRICTED	1,000
Epilepsy Foundation8301 Professional Place Landover,MD 20785	NONE	PUBLIC	UNRESTRICTED	1,000
Esperanza Academy198 Garden StPO Box 4175 Lawrence,MA 01843	NONE	PUBLIC	UNRESTRICTED	500
<b>Total . . . . .</b>  <b>3a</b>				132,600

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Essex County Greenbelt82 Eastern Avenue Essex, MA 01929	NONE	PUBLIC	UNRESTRICTED	500
FAMILY OF NEW PALTZ51 N CHESTNUT STREET NEW PALTZ, NY 12561	NONE	PUBLIC	UNRESTRICTED	500
First Church of Chestnut Hill26 SUFFOLK ROAD Chestnut Hill, MA 02467	NONE	PUBLIC	UNRESTRICTED	2,500
Food Bank of the Hudson Valley195 Hudson Street CornwallonHudson, NY 12520	NONE	PUBLIC	UNRESTRICTED	500
Friends of Beverly Hospital39 Herrick Street Beverly, MA 01915	NONE	PUBLIC	UNRESTRICTED	1,000
Globe Santa Fund Trust co Citizens BankPO Box 845059 Boston, MA 02284	NONE	PUBLIC	UNRESTRICTED	250
Harvard College Fund - Class Endowment Program124 Mount Auburn Street Cambridge, MA 02138	NONE	PUBLIC	UNRESTRICTED	1,250
Home for Little Wanderers271 Huntington Avenue Boston, MA 02115	NONE	PUBLIC	UNRESTRICTED	1,000
Horizons for Homeless Children1705 Columbus Avenue Roxbury, MA 02119	NONE	PUBLIC	UNRESTRICTED	250
Ipswich River Watershed Assn IncPO Box 576 Ipswich, MA 01938	NONE	PUBLIC	UNRESTRICTED	250
Jackson Laboratory610 Main Street Bar Harbor, ME 04609	NONE	PUBLIC	UNRESTRICTED	1,500
Landmark School429 Hale Street Prides Crossing, MA 01965	NONE	PUBLIC	UNRESTRICTED	250
Leukemia & Lymphoma SocietyPO BOX 4072 PITTSFIELD, MA 01202	NONE	PUBLIC	UNRESTRICTED	1,000
Make-a-Wish Foundation of the Hudson ValleyPO Box 97104 Washington, DC 20090	NONE	PUBLIC	UNRESTRICTED	500
Manchester Community CenterBox 212Harbors Point Manchester, MA 01944	NONE	PUBLIC	UNRESTRICTED	250
<b>Total . . . . .</b>  <b>3a</b>				132,600


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Name and address (home or business)				
<b>a</b> Paid during the year				
Manchester Public Library15 Union Street Manchester, MA 01944	NONE	PUBLIC	UNRESTRICTED	100
Massachusetts Audubon Society208 South Great Road Lincoln, MA 01773	NONE	PUBLIC	UNRESTRICTED	2,250
Massachusetts General Hospital165 Cambridge StSuite 600 Boston, MA 02114	NONE	PUBLIC	UNRESTRICTED	1,000
Massachusetts Society for the Prevention of Cruelty to Children99 Summer Street Boston, MA 02110	NONE	PUBLIC	UNRESTRICTED	500
McLean Hospital115 Mill Street Belmont, MA 02478	NONE	PUBLIC	UNRESTRICTED	15,000
Memorial Sloan-Kettering Cancer Center633 THIRD AVENUE 28TH FLOOR New York, NY 10017	NONE	PUBLIC	UNRESTRICTED	1,000
MGH INSTITUTE OF HEALTH PROFESSIONALS36 First Avenue Boston, MA 02129	NONE	PUBLIC	UNRESTRICTED	5,500
Mohonk PreservePO Box 715 New Paltz, NY 12561	NONE	PUBLIC	UNRESTRICTED	500
Museum of ScienceScience Park Boston, MA 02114	NONE	PUBLIC	UNRESTRICTED	2,600
NARAL Pro-Choice AmericaPO Box 18397 Washington, DC 20036	NONE	PUBLIC	UNRESTRICTED	500
National Wildlife Federation11100 Wildlife Center Drive Reston, VA 20190	NONE	PUBLIC	UNRESTRICTED	500
Nativity Preparatory School39 Lamartine Street Jamaica Plain, MA 02130	NONE	PUBLIC	UNRESTRICTED	1,000
Nature Conservancy of New York570 7TH AVE SUITE 601 New York, NY 10008	NONE	PUBLIC	UNRESTRICTED	500
Nature Conservancy205 Portland StreetSuite 4000 Boston, MA 02114	NONE	PUBLIC	UNRESTRICTED	250
NORTH SHORE UNITED WAY248 CABOT STREET BEVERLY, MA 01915	NONE	PUBLIC	UNRESTRICTED	1,000
<b>Total . . . . .</b>  <b>3a</b>				132,600

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Name and address (home or business)				
<b>a</b> Paid during the year				
Ohio Wesleyan University61 S SANDUSKY STREET Delaware, OH 43015	NONE	PUBLIC	UNRESTRICTED	250
Phillips Brooks HouseHarvard University Cambridge, MA 02138	NONE	PUBLIC	UNRESTRICTED	250
Pine Street Inn444 Harrison Avenue Boston, MA 02118	NONE	PUBLIC	UNRESTRICTED	250
PINGREE SCHOOL537 HIGHLAND STREET SOUTH HAMILTON, MA 01982	NONE	PUBLIC	UNRESTRICTED	3,500
Planned Parenthood Federation of America Inc434 W 33rd Street8th Floor New York, NY 10001	NONE	PUBLIC	UNRESTRICTED	500
Poughkeepsie Day School260 Boardman Road Poughkeepsie, NY 12603	NONE	PUBLIC	UNRESTRICTED	1,000
Salvation Army147 Berkeley Street Boston, MA 02116	NONE	PUBLIC	UNRESTRICTED	1,000
Scenic Hudson IncOne Civic Center PlazaSuite 200 Poughkeepsie, NY 12601	NONE	PUBLIC	UNRESTRICTED	500
Shore Country Day School545 Cabot Street Beverly, MA 01915	NONE	PUBLIC	UNRESTRICTED	5,500
Smith College - THE SMITH FUND33 Elm Street Northampton, MA 01063	NONE	PUBLIC	UNRESTRICTED	2,500
Southern Poverty Law Center Teaching Tolerance400 Washington Avenue Montgomery, AL 36104	NONE	PUBLIC	UNRESTRICTED	500
Spaulding Education FundPO Box 192 Manchester, MA 01944	NONE	PUBLIC	UNRESTRICTED	100
St John's EPISCOPAL Church705 Hale Street Beverly, MA 01915	NONE	PUBLIC	UNRESTRICTED	250
St Lawrence University23 Romoda Drive Canton, NY 13617	NONE	PUBLIC	UNRESTRICTED	250
St Luke's Hospital - SouthCoast Health System101 PAGE STREET New Bedford, MA 02740	NONE	PUBLIC	UNRESTRICTED	1,000
<b>Total . . . . . ▶ 3a</b>				132,600

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<b>a</b> Paid during the year				
Susan Komen FOR THE CUREPO Box 650309 Dallas, TX 75265	NONE	PUBLIC	UNRESTRICTED	500
Trustees of Reservations572 Essex Street Beverly, MA 01915	NONE	PUBLIC	UNRESTRICTED	3,500
Union of Concerned Scientists2 Brattle Square Cambridge, MA 02238	NONE	PUBLIC	UNRESTRICTED	500
Unison Arts and Learning Center68 Mountain Rest Road New Paltz, NY 12561	NONE	PUBLIC	UNRESTRICTED	500
United Way of Massachusetts Bay51 Sleeper Street Boston, MA 02210	NONE	PUBLIC	UNRESTRICTED	6,000
US Fund for UNICEF125 MAIDEN LANE New York, NY 10038	NONE	PUBLIC	UNRESTRICTED	1,000
Veterans of Foreign Wars of the US 200 Maryland Avenue NE Washington, DC 20002	NONE	PUBLIC	UNRESTRICTED	1,000
WBGH Educational Foundation125 Western Avenue Boston, MA 02134	NONE	PUBLIC	UNRESTRICTED	12,000
WBUR Radio Station Boston University 890 Commonwealth Avenue Boston, MA 02215	NONE	PUBLIC	UNRESTRICTED	250
Wellspring House302 Essex Avenue Gloucester, MA 01930	NONE	PUBLIC	UNRESTRICTED	500
Wenham Museum132 Main Street Wenham, MA 01984	NONE	PUBLIC	UNRESTRICTED	250
Westminster SchoolPO Box 337 Simsbury, CT 06070	NONE	PUBLIC	UNRESTRICTED	2,500
Wheelock College Annual Fund200 The Riverway Boston, MA 02215	NONE	PUBLIC	UNRESTRICTED	250
Winsor SchoolPO Box 414068 Boston, MA 02241	NONE	PUBLIC	UNRESTRICTED	2,500
<b>Total . . . . .</b>  <b>3a</b>				132,600

**TY 2009 Accounting Fees Schedule**

**Name:** KENWOOD FOUNDATION MPB 7552021240

**EIN:** 04-6012784

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
WELCH & FORBES LLC - TAX PREPARATION FEE	2,465	2,465		0

**TY 2009 Distribution from Corpus Election**

**Name:** KENWOOD FOUNDATION MPB 7552021240

**EIN:** 04-6012784

**Election:** IN ACCORDANCE WITH SECTIONS 4942(h)(2) AND REG 53-4942 (a)-3(d)(2), OF THE INTERNAL REVENUE CODE OF 12/31/97 AS AMENDED, THE KENWOOD FOUNDATION HEREBY ELECTS TO TREAT CERTAIN CURRENT-YEAR QUALIFYING DISTRIBUTIONS IN EXCESS OF THE IMMEDIATELY PRECEDING TAX YEAR'S UNDISTRIBUTED INCOME AS BEING MADE FROM CORPUS. IN 2009, THE FOUNDATION RECEIVED \$132,768 IN CONTRIBUTIONS OF SECURITIES FROM VARIOUS INDIVIDUALS. THE FOUNDATION'S DISTRIBUTABLE AMOUNT FOR 2008 WAS \$14,462. THE FOUNDATION MADE QUALIFYING DISTRIBUTIONS IN 2009 IN THE AMOUNT OF \$132,600. WITH RESPECT TO 2009 CONTRIBUTIONS RECEIVED, \$132,600 WAS DISTRIBUTED OUT OF CORPUS, TO WHICH THIS ELECTION APPLIES. THE EXCESS DISTRIBUTION CARRYOVER TO 2010 TOTALS \$294,082.

**TY 2009 Investments Corporate  
Bonds Schedule**

**Name:** KENWOOD FOUNDATION MPB 7552021240  
**EIN:** 04-6012784

Name of Bond	End of Year Book Value	End of Year Fair Market Value
20000 MELLON FINANCIAL CO SUB NOTE DTD 2/12/98 6/375%	20,137	20,103

**TY 2009 Investments Corporate  
Stock Schedule**

**Name:** KENWOOD FOUNDATION MPB 7552021240  
**EIN:** 04-6012784

Name of Stock	End of Year Book Value	End of Year Fair Market Value
100 SHS CENOVUS ENERGY INC	2,342	2,520
100 SHS DANAHER CORP	5,450	7,520
100 SHS ENCANA CORP	2,486	3,239
100 SHS EXXON MOBIL CORP	28	7,774
100 SHS SCHLUMBERGER LTD	7,542	6,509
125 SHS CONSTANT CONTACT	2,576	2,000
125 SHS STRYKER CORP	5,460	6,296
140 SHS NOBLE CORP	4,821	5,698
150 SHS PROCTER & GAMBLE CO	1,870	9,095
200 SHS LIFE TIME FITNESS	6,448	4,986
200 SHS PEPSICO INC	7,056	12,160
25 SHS GENZYME CORP	1,826	1,225
250 SHS ANSYS INC	6,967	10,865
250 SHS JOHNSON & JOHNSON	366	16,103
250 SHS MICROSOFT CORP	8,484	7,620
300 SHS ABBOTT LAB	173	16,197
300 SHS EXPEDITORS INTERNATIONAL	5,856	10,431
400 SHS CISCO SYSTEMS INC	11,010	9,576
450 SHS IRON MOUNTAIN INC PA	8,497	10,242
50 SHS IDEXX LABORATORIES INC	2,546	2,673
50 SHS PRAXAIR	3,502	4,016
70 SHS APACHE CORP	4,711	7,222
800 SHS CARMAX INC	7,982	19,400
97 SHS STERICYCLE INC	3,172	5,351

TY 2009 Investments - Other Schedule

**Name:** KENWOOD FOUNDATION MPB 7552021240

**EIN:** 04-6012784

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
SAVINGS BANK LIFE INS POLICY	AT COST	106,727	106,727

TY 2009 Legal Fees Schedule

**Name:** KENWOOD FOUNDATION MPB 7552021240

**EIN:** 04-6012784

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
STEFFENSEN, HERMAN & DOGGETT, LLC	350	315		35

TY 2009 Other Decreases Schedule

**Name:** KENWOOD FOUNDATION MPB 7552021240

**EIN:** 04-6012784

Description	Amount
ADJUST 2008 CONTRIBUTIONS TO TAX COST BASIS	67,226

# TY 2009 Other Expenses Schedule

**Name:** KENWOOD FOUNDATION MPB 7552021240

**EIN:** 04-6012784

Description	Revenue and Expenses per Books	Net Invest ment Income	Adjusted Net Income	Disbursements for Charitable Purposes
MASSACHUSETTS FILING FEE	70	70		0
LIFE INSURANCE PREMIUMS	11,859	0		0

TY 2009 Other Increases Schedule

**Name:** KENWOOD FOUNDATION MPB 7552021240

**EIN:** 04-6012784

Description	Amount
FEDERATED MONEY MARKET FUND INCOME POSTING - ADJUST FOR TAX	118

# **TY 2009 Other Professional Fees Schedule**

**Name:** KENWOOD FOUNDATION MPB 7552021240

**EIN:** 04-6012784

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
WELCH & FORBES LLC - CARE & MANAGEMENT OF SECURITIES	1,116	1,004		112

TY 2009 Taxes Schedule

**Name:** KENWOOD FOUNDATION MPB 7552021240

**EIN:** 04-6012784

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FOREIGN TAXES	24	24		0
FEDERAL EXCISE TAX 12/31/09	518	0		0