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Form **990-PF** Department of the Treasury

Return of Private Foundation
or Section 4947(a)(1) Nonexempt Charitable Trust
Treated as a Private Foundation
Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements.

OMB No. 1545-0052

2011

Fo	or cal	endar year 2011 or tax year beginning			, 2011,	and endin	g	•	, 20
	Name	of foundation					Α	Employer identific	ation number
	THE	KATHARINE BRADFORD FOUNDA	CION JH068	8				04-3	3545090
	Numb	per and street (or P O. box number if mail is not de	vered to street add	ress)		Room/suite	e B	Telephone number	(see instructions)
	C/0	NICHOLS & PRATT 50 CONGRE	SS STREET					(61)	7) 523-6800
_		r town, state, and ZIP code		·					
							C	If exemption applicati pending, check here	on is
	BOS'	TON, MA 02109						ponume, one or	
G	Che	ck all that apply: Initial return	Initi	al return	of a former p	ublic charit	у р	1. Foreign organization	ons, check here
		Final return	<u> </u>	ended ret				2. Foreign organization	
_	_	Address change		ne chang				computation	
H		ck type of organization: X Section 5		-			E	If private foundation :	status was terminated
Ŧ		ection 4947(a)(1) nonexempt charitable trust			ivate foundat			under section 507(b)	(1)(A), check here . D
ı		 	counting metho		ash Acc	rual	F		a 60-month termination
		ear (from Part II, col. (c), line ► \$ 309,004. (Pai	Other (specify) I, column (d) m		cach hacie		-	under section 507(b)	(1)(8), check here . ►
r		► \$ 309,004. (Par Analysis of Revenue and Expenses (7)	<u> </u>	iust de Oi	i casii basis.)			1	(d) Disbursements
	ait i	total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions).)	(a) Revenu expenses books	per	(b) Net inve incon	1		djusted net income	for charitable purposes (cash basis only)
	1 2	Contributions, gifts, grants, etc., received (stach schedule) If the foundation is not required to attach Sch B							
	3	Interest on savings and temporary cash investment							
	4	Dividends and interest from securities	. 1	1,136.	1	1,136.			STMT 1
	5a	Gross rents			ı				
	ь	Net rental income or (loss)							
<u>.</u>	6a	Net gain or (loss) from sale of assets not on line 10		<u>6,517.</u>					
	Ь	Gross sales price for all assets on line 6a 55,836	<u> </u>				•		
Revenue	7	Capital gain net income (from Part IV, line 2)	•			6,517.			
	8	Net short-term capital gain							
	9	Income modifications · · · · · · · · · · · · · · · · · · ·	•						
		and allowances · · · ·	- 					-	t t
	l .	Less Cost of goods sold .	- 						
	11	Gross profit or (loss) (attach schedule) Other income (attach schedule)	-						
	12	Total. Add lines 1 through 11		7,653.	1	7,653.		- "	
_	13	Compensation of officers, directors, trustees, etc		1,384.		761.			623
	14	Other employee salaries and wages	:	-,		NONE		NONE	
es		Pension-plens employee terefits				NONE		NONE	
ens	16a	legal fees (attach-schedule)							
ğ	ь	Accounting fees (attach schedule) STMT 2		688.		282.		NONE	403
ē	c	Other professional fees (ettach schedule)							
aţi	17								
istr	18	Taxes tattach schedule (see the dule) and depletion	•	532.		252.			
Ę	19	Depreciation (attach schedule) and depletion	•						
Ą	20	Occupancy	•			,,,,,			
힏	21	Travel, conferences, and meetings				NONE		NONE	
ā	22	Printing and publications		2.5		NONE		NONE	
턐	23	Other expenses (attach schedule) STMT. 4		35.					35
Operating and Administrative Expenses	24	Total operating and administrative expense		2,639.		1,295.		NONE	1 061
9	25	Add lines 13 through 23		$\frac{2,639}{5,040}$		1,473.		NOME	1,061 45,040
	25 26	Contributions, gifts, grants paid		7,679		1,295.		NONE	46,101
_	27	Subtract line 26 from line 12:	3			<u> </u>		HONE	40,101
	a a		3	0,026.					
	i	Net investment income (if negative, enter -(5,020.	1	6,358.			
	1	Adjusted net income (if negative, enter -0-)			-	,			

Đ.	art II	Balance Sheets	Attached schedules and amounts in the description column should be for end-of-year	Beginning of year	End of	year
<u>.</u>	:111	Datalice Silects	amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash ; non-interest-beari	ng			
		Savings and temporary o	cash investments	10,912.	8,237.	8,237
	3 `	Accounts receivable 📐				
		Less: allowance for doub	otful accounts >			
		Less: allowance for doub	otful accounts ►			
			officers, directors, trustees, and other			
			ach schedule) (see instructions)			
		• •	eceivable (attach schedule)	· · · · · · · · · · · · · · · · · · ·		
			otful accounts ►NONE	•		•
			se			
ã			eferred charges			
Assets			- F	80,087.	50,516.	52,755
٩			government obligations (attack action)	180,229.		
					102,440.	240,012
	11	Investments - corporate Investments - land, building and equipment: basis Less: accumulated deprecia (attach schedule)	· · · · · · · · · · · · · · · · · · ·			
	13 14	Investments - other (atta Land, buildings, and	loans			
	15	Other assets (describe	>)			
ļ			completed by all filers - see the			
		instructions. Also, see pa	age 1, item I)	271,228.	241,201.	309,004
			ccrued expenses			
Š						
itie			ers, trustees, and other disqualified persons			
Liabilities		·	otes payable (attach schedule)			
Ë			e ►)			ŧ
	23	Total liabilities (add line	es 17 through 22)			•
		Foundations that foll and complete lines 2	low SFAS 117, check here 24 through 26 and lines 30 and 31.			:
cea						
lan	25					
Ba	26	Permanently restricted ,				
Fund			not follow SFAS 117, plete lines 27 through 31. ▶ X			
ō	27	Capital stock, trust princ	cipal, or current funds	271,228.	241,201.	
ets	28 29 30 31	Paid-in or capital surplus, or	r land, bldg , and equipment fund	··· · · ·		
SS	29	Retained earnings, accumul	lated income, endowment, or other funds 🔒 🚬			ı
¥ /	30	Total net assets or fund	d balances (see instructions)	271,228.	241,201.	
ž	31	Total liabilities and	net assets/fund balances (see			
_				271,228.	241,201.	
			anges in Net Assets or Fund			
1	Total	net assets or fund b	palances at beginning of year - Part	II, column (a), line 30 (must agree with	
			l on prior year's return)			271,228.
2	Enter	amount from Part I, I	line 27a		2	-30,026.
3	Othe	r increases not includ	ed in line 2 (itemize) ▶		3	
4	Add	ines 1, 2, and 3			4	241,202.
5	Decre	eases not included in	line 2 (itemize) ► SEE STA	rement 7	5	1.
			lances at end of year (line 4 minus lin			241,201.
_						Form 990-PF (2011)

P	art IV Capital Gains	and Losses for Tax on Inve	stment Income				
		d describe the kind(s) of property sold (e		(b) How acquired P-Purchase	(c) Date acquired	(d) Date sold (mo , day, yr.)	
	2-story b	D-Donation	(mo., day, yr.)	(ino, day, yr.,			
<u>1a</u>	····	SECURITIES					
_ <u>b</u>					· · · · · · · · · · · · · · · · · · ·		
_ <u>c</u>							
<u>d</u>		·		1			
<u>e</u>		(0 D	(g) Cost or other basis		(h) C-i (l-		
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)			
_	55,836.		49,319.			6,517.	
_a b			40,510.			0,517.	
C	~						
d							
_ <u>_</u>							
		showing gain in column (h) and owned	by the foundation on 12/31/69	(1)	Gains (Col. (h) g	ain minus	
	UVE MAY 4.12/21/60	(j) Adjusted basis	(k) Excess of col. (i)		(k), but not less	than -0-) or	
	(i) F.M.V. as of 12/31/69	as of 12/31/69	over col. (j), if any		Losses (from co	ol. (h))	
_a						6,517.	
_ <u>b</u>							
_ <u>c</u>	·						
_d							
<u>e</u>							
2	Capital gain net income or	(net capital loss)	gain, also enter in Part I, line 7 } (loss), enter -0- in Part I, line 7			6 517	
				2		6,517.	
3		or (loss) as defined in sections 122 t I, line 8, column (c) (see instr					
				3			
ъ				<u> </u>			
Wa		the section 4942 tax on the distrib		ase perio	d?	ີ Yes ່X No	
_	·	not qualify under section 4940(e). I		any ontr	ios		
_	(a)	ount in each column for each year;		any entr	(d)		
_	Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	1	Distribution ration (col. (b) divided by	atio	
_	2010	48,978.	325,991.		(COI. (D) GIVIGEG 5)	0.150243	
_	2009	97,901.	338,379.			0.289324	
_	2008	63,621.	430,652.			0.147732	
	2007	46,802.	520,966.			0.089837	
	2006	38,807.	503,221.			0.077117	
	Total of line 1, column (d			2		0.754253	
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 foun	dation has been in existence if less	than 5 years	3		0.150851	
4	Enter the net value of nor	scharitable-use assets for 2011 fror	m Part X, line 5	4		312,453.	
5	Multiply line 4 by line 3			5		47,134.	
6	Enter 1% of net investmen	nt income (1% of Part I, line 27b)		6		164.	
_	Auditor 5 15			_		47 000	
7	Add lines 5 and 6			7		47,298.	
_	Take analikitan disk in di	and from Dark VIII II 4				16 101	
8	If line 8 is equal to or gr Part VI instructions.	ons from Part XII, line 4 eater than line 7, check the box i	n Part VI, line 1b, and complete 1	that part	using a 1% ta	46,101. x rate. See the	

Pari	VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see in	struc	tions)
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1			
	Date of ruling or determination letter: (attach copy of letter if necessary - see instructions)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check		3	327.
	here and enter 1% of Part I, line 27b			
C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of	_		
	Part I, line 12, col. (b).			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 2			
3	Add lines 1 and 2		3	327.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 4		N	<u>IONE</u>
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0		3	<u> 327.</u>
6	Credits/Payments:			,
а	2011 estimated tax payments and 2010 overpayment credited to 2011 6a 140 .			
b	Exempt foreign organizations - tax withheld at source			2
C	Tax paid with application for extension of time to file (Form 8868) 6c NONE			
d	Backup withholding erroneously withheld			
7	Total credits and payments. Add lines 6a through 6d		1	<u> 140.</u>
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		1	<u> 187.</u>
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			
11	Enter the amount of line 10 to be: Credited to 2012 estimated tax ▶ Refunded ▶ 11			
Par	VII-A Statements Regarding Activities	T		F ·· · · ·
1a		 	Yes	No
	or intervene in any political campaign?	1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19 of the	ا ۔۔ ا		v
	instructions for definition)?	1b		X
	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.	ا ۔ ا	~	v
	Did the foundation file Form 1120-POL for this year?	1c		Х
a	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			
_	(1) On the foundation ▶\$ (2) On foundation managers. ▶ \$ Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed	1 1		
•	on foundation managers. > \$			ĺ
2		2		x
-	If "Yes," attach a detailed description of the activities.			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of			ĺ
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		x
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		Х
ь	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?	5		_ X
	If "Yes," attach the statement required by General Instruction T.			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:	l		
	By language in the governing instrument, or	i I		
	• 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	<u>X</u>	
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	X	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)			
	MA			
Ь	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	8Ь	X	ļ
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 2011 or the taxable year beginning in 2011 (see instructions for Part XIV)? If "Yes," complete		į	
	Part XIV	9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names			
	and addresses	10		X
	F	~ Q C	O-PF	(2011)

rorm	990-PF (2011) 04-3343090			rage 3
Par	t 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)	11		<u> </u>
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified			
	person had advisory privileges? If "Yes," attach statement (see instructions)	12		<u> </u>
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address ► N/A			
14	The books are in care of ▶ NICHOLS & PRATT, LLP Telephone no. ▶ (617) 523-6	800		
	Located at ► 50 CONGRESS ST, BOSTON, MA ZIP+4 ► 02109			
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			
16	At any time during calendar year 2011, did the foundation have an interest in or a signature or other authority		Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1. If "Yes," enter the name of			
	the foreign country			
Par	t 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
1 a	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 X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			
	disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No	1		:
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X 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)?			
	(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.)			,
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 instructions)?	1b		
	Organizations relying on a current notice regarding disaster assistance check here			
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that			
	were not corrected before the first day of the tax year beginning in 2011?	1c		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 2011, did the foundation have any undistributed income (lines 6d and			1
	6e, Part XIII) for tax year(s) beginning before 2011?			
	If "Yes," list the years	,		
t	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.)	2b	ļ	X
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			,
			l	
3	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
	at any time during the year?			
t	olf "Yes," did it have excess business holdings in 2011 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	1	1	!
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the	1	}	'
	foundation had excess business holdings in 2011.)	3b	<u> </u>	
48	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	ļ	X
ŧ	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 2011?	4b	1	X

						<u>-</u>
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Par	VII-B Statements Regarding Activities for	Which Form 47	20 May Be Requi	red (continued)		
5a	During the year did the foundation pay or incur any amoun (1) Carry on propaganda, or otherwise attempt to influence	e legislation (section			•	
	 (2) Influence the outcome of any specific public election directly or indirectly, any voter registration drive? (3) Provide a grant to an individual for travel, study, or other than a grant to an organization other than a grant to an organization other than a grant to an organization of the than a grant to an organization of the travel. 	er similar purposes? charitable, etc., org	anization described i	Yes X No	•	
	section 509(a)(1), (2), or (3), or section 4940(d)(2)? (se (5) Provide for any purpose other than religious, cha purposes, or for the prevention of cruelty to children or	ritable, scientific,	iterary, or educations	Yes X No		
Ь	If any answer is "Yes" to 5a(1)-(5), did any of the 1 Regulations section 53.4945 or in a current notice regarding Organizations relying on a current notice regarding disaste	ng disaster assistand	e (see instructions)?	· · · · · · · · · · · · · · · · · · ·	<u>5b</u>	
	If the answer is "Yes" to question 5a(4), does the forbecause it maintained expenditure responsibility for the graph of "Yes," attach the statement required by Regulations section.	oundation claim ex ant? on 53.4945-5(d).	emption from the ta	X . Yes No		
	Did the foundation, during the year, receive any fundation a personal benefit contract?			. Yes X No		
ь	Did the foundation, during the year, pay premiums, directly If "Yes" to 6b, file Form 8870.				<u>6b</u>	X
	At any time during the tax year, was the foundation a party If "Yes," did the foundation receive any proceeds or have a		•		7b	
	Information About Officers, Directors, and Contractors					<u> </u>
1	List all officers, directors, trustees, foundation ma					
	(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		se account, owances
SEE	STATEMENT 8		1,384.	-0-		-0-
<u> </u>	Compensation of five highest-paid employees "NONE."	(other than thos	e included on line		ons). If n	one, enter
(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		se account, owances

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE		NONE	NONE	NONE
Total number of other employees paid over \$50,000 .			<u> </u>	▶ NONE

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3 Five highest-paid independent contractors for professional services (see instruction	ns). If none, enter "NONE	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		NONE
TOTAL		110112
		· · ·
otal number of others receiving over \$50,000 for professional services		NON:
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical informations and other beneficiaries served, conferences convened, research papers produced, etc.	nation such as the number of	Expenses
1 <u>NONE</u>		
2		
3		
4		
Part IX-B Summary of Program-Related Investments (see instructions)		
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2		Amount
1 <u>NONE</u>		
2		
All other program-related investments. See instructions.		
3 NONE		
Total. Add lines 1 through 3		

Pa	rt X Minimum Investment Return (All domestic foundations must complete this part. Forei see instructions.)	gn founda	tions,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,	l T	
	purposes:		
а	Average monthly fair market value of securities	1a	304,186.
b	Average of monthly cash balances	1b	13,025.
C		1c	NONE
d		1d	317,211.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	NONE
3		3	317,211.
4	Subtract line 2 from line 1d		
		4	4,758.
5	instructions) Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	312,453.
6	Minimum investment return. Enter 5% of line 5	6	15,623.
Pa	rt XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating		13/0131
	foundations and certain foreign organizations check here and do not complete this	part.)	
1	Minimum investment return from Part X, line 6	1	15,623.
2a			
ь		1	
c	Add lines 2a and 2b	2c	327.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	15,296.
4	Recoveries of amounts treated as qualifying distributions	4	NONE
5	Add lines 3 and 4	5	15,296.
6	Deduction from distributable amount (see instructions)	6	NONE
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,		
•	line 1 · · · · · · · · · · · · · · · · · ·	7	15,296.
_			137270.
Pa	rt XII Qualifying Distributions (see 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	46,101.
ь		1b	
2	Program-related investments - total from Part IX-B Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
-	purposes	2	NONE
3	Amounts set aside for specific charitable projects that satisfy the:		110112
a	Suitability test (prior IRS approval required)	3a	NONE
b	Cash distribution test (attach the required schedule)	3b	NONE
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	46,101.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.		±0/101.
•	Enter 1% of Part I, line 27b (see instructions)	5	N/A
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	46,101.
•	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when ca		
	qualifies for the section 4940(e) reduction of tax in those years.		

Form **990-PF** (2011)

Page 9

	990-PF (2011)				Page 9
Pa	t XIII Undistributed Income (see instru	ictions)			
1	Distributable amount for 2011 from Part XI,	(a) Corpus	(b) Years prior to 2010	(c) 2010	(d) 2011
	line 7				15,296.
2	Undistributed income, if any, as of the end of 2011:				
а	Enter amount for 2010 only			NONE	
Ь	Total for prior years: 20 09 , 20, 20		NONE		
3	Excess distributions carryover, if any, to 2011:				
а	From 2006				
b	From 2007				
c	From 2008				
d	From 2009 82,066.				
e	From 2010 32,958.				
f	Total of lines 3a through e	194,958.			
4					
	line 4: ▶ \$46,101.				
а	Applied to 2010, but not more than line 2a			NONE	
	Applied to undistributed income of prior years				•
	(Election required - see instructions)		NONE		
C	Treated as distributions out of corpus (Election	MONTE			
_	required - see instructions)	NONB			15 206
d	Applied to 2011 distributable amount	20 005			15,296.
_0	Remaining amount distributed out of corpus	30,805 L			NONE
5	Excess distributions carryover applied to 2011 (If an amount appears in column (d), the same	NONB		-	NONE
6	amount must be shown in column (a).) Enter the net total of each column as indicated below:				
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	225,763.			
	Prior years' undistributed income. Subtract				
	line 4b from line 2b		NONE		
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		NONE		
d	Subtract line 6c from line 6b. Taxable				
	amount - see instructions		NONE		
0	Undistributed income for 2010. Subtract line 4a from line 2a. Taxable amount - see			NONE	
	instructions			NONE	
f	Undistributed income for 2011. Subtract lines				
	4d and 5 from line 1. This amount must be				NONE
_	Amounts treated as distributions out of corpus		··· · · · · · · · · · · · · · · · · ·		MOME
7	to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (see instructions)	NONE			
_		110111			
8	Excess distributions carryover from 2006 not applied on line 5 or line 7 (see instructions)	15,018		•	
		15,010.			
9	Excess distributions carryover to 2012. Subtract lines 7 and 8 from line 6a	210,745.			
10	Analysis of line 9:	210,140.			
ı V	Excess from 2007				
a h	Excess from 2008				
	Excess from 2009 82,066.				
d	Excess from 2010				
A	Excess from 2010				
				<u> l</u>	Form 990-PF (2011)

	1990-PF (2011)				2242020	1000 10
Pai	rt XIV Private Oper	ating Foundations (see instructions an	d Part VII-A, question	n_9)_	NOT APPLICABL
	If the foundation has					-
14		-				
	foundation, and the ruling					
Ь	Check box to indicate who	ether the foundation is a p	private operating found	ation described in section	4942(i)(3) or 4942(j)(5)
	•	Tax year	-	Prior 3 years		
2 a	Enter the lesser of the ad-		(L) 2010	(c) 2009	(d) 2008	(e) Total
	justed net income from Part	(a) 2011	(b) 2010	(6) 2009	(8) 2008	
	I or the minimum investment return from Part X for each					1
	year listed			1		1
	year 113100	-				1
Ь	85% of line 2a			- 	·	
c	Qualifying distributions from Part				l .	
	XII, line 4 for each year listed					
d	Amounts included in line 2c not				<u> </u>	
u	used directly for active conduct	l				
	of exempt activities				<u> </u>	
e	Qualifying distributions made				1	
	directly for active conduct of					
	exempt activities Subtract line				Ì	
	2d from line 2c			ļ		
3	Complete 3a, b, or c for the	1				i
	alternative test relied upon:			ļ.		
а	"Assets" alternative test - enter					
	(1) Value of all assets					
	(2) Value of assets qualifying				1	
	under section					1
ь	4942(j)(3)(B)(i)					
0	"Endowment" alternative test-	1		1		i
	enter 2/3 of minimum invest- ment return shown in Part X,					,
					İ	
	line 6 for each year listed					-
C	"Support" alternative test - enter				ł	
	(1) Total support other than			•	i	
	gross investment income	1				
	(interest, dividends, rents, payments on securities			l		İ
	loans (section 512(a)(5)),					
	or royalties)					
	(2) Support from general				1	
	public and 5 or more				i	1
	exempt organizations as provided in section 4942	1				1
	(j)(3)(B)(ui)					
	(3) Largest amount of sup-					İ
	port from an exempt				1	
	organization				-	
	(4) Gross investment income		<u> </u>	<u> </u>	<u> </u>	<u> </u>
Pa	rt XV Supplement	ary Information (Co	omplete this part	t only if the found	ation had \$5,000	or more in assets
	at any time	during the year - see	instructions.)			
4	Information Regarding					
1		-				
a	List any managers of	the foundation who h	iave contributed mo	re than 2% of the tota	ai contributions receiv	rea by the foundation
	before the close of any	y tax year (but only if tr	ney have contributed	more than \$5,000). (S	see section 507(a)(2).)	
	KATHARINE	DDXDEODD				
	KAIHARINE	BRADFORD	100/	of the steel of a core	estion for an equali	Llorge portion of the
Þ	List any managers of	the foundation who	own 10% or more	of the stock of a corp	oration (or an equali	y large portion of the
	ownership of a partner	rship or other entity) of	which the foundation	on has a 10% or greate	r interest.	
	/-					
	N/A Information Regarding					
2	Information Regarding	g Contribution, Grant,	Gift, Loan, Scholars	hip, etc., Programs:		
	Check here ► X if	the foundation only i	makes contributions	to preselected char	itable organizations :	and does not accent
	unceliaited requests f	or funda if the found	otion makes sifts s	rante etc lees instruc	tions) to individuals of	or organizations under
				iants, etc. (see mistruc	tions, to maividuals t	organizations under
	other conditions, com					
8	The name, address, ar	d telephone number o	f the person to who	n applications should l	be addressed:	
	•	•	•			
_	T	P 42 - 1 - 1 1 1 1			abasilal in alsonias	
b	The form in which app	olications should be sul	omitted and informa	tion and materials they	snoula include:	
	Ananahariaria da it				 	
C	Any submission deadl	ines:				
	Any restrictions or I	imitatione on awarda	euch as by good	ranhical areas charit	ahla fields kinds of	institutions or other
a	factors:	iiiiidiiuiis Uli awdrus,	, audii da by yeog	iapilicai aitas, ciidili	guid licius, killus Ul	manunona, or oner
	1001013.					

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 Purpose of grant or contribution Amount Amount Purpose of grant or contribution Purpos								
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount				
Name and address (home or business)	or substantial contributor	recipient	contribution					
a Paid during the year								
				1				
SEE STATEMENT 14								
	İ							
				1				
				1				
	l		<u> </u>					
Total	<u> </u>		▶ 3a	45,040.				
b Approved for future payment		}						
]					
			1					
		-						
Total	<u> </u>		> 3b	<u> </u>				

t XVI-A Analysis of Income-Produc		ated business income	Excluded by	section 512, 513, or 514	(e)
nter gross amounts unless otherwise indicated.		(b)	(c)	(d)	Related or exempt function income
Program service revenue:	Business code	Amount	Exclusion code	Amount	(See instructions.)
<u> </u>					
					
Fees and contracts from government agencies					
Membership dues and assessments					
nterest on savings and temporary cash investments				11 126	
Dividends and interest from securities			14	11,136.	
Net rental income or (loss) from real estate: Debt-financed property					
Not debt-financed property					
Net rental income or (loss) from personal property					
Other investment income					
Gain or (loss) from sales of assets other than inventory			18	6,517.	
Net income or (loss) from special events			+		
Gross profit or (loss) from sales of inventory Other revenue: a					
o					
1					
·					
		+			
Subtotal. Add columns (b), (d), and (e) Fotal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculat XVI-B Relationship of Activities	ulations) to the Ac	complishment of E	xempt Purp	oses	17,65
Subtotal. Add columns (b), (d), and (e)	ulations) to the Ac	complishment of E	xempt Purp	oses of Part XVI-A contribu	17,65
Subtotal. Add columns (b), (d), and (e) Fotal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculat XVI-B Relationship of Activities Explain below how each activit	ulations) to the Ac	complishment of E	xempt Purp	oses of Part XVI-A contribu	17,65
Subtotal. Add columns (b), (d), and (e) Fotal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculat XVI-B Relationship of Activities Explain below how each activit	ulations) to the Ac	complishment of E	xempt Purp	oses of Part XVI-A contribu	17,65
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Subtotal. Add columns (b), (d), and (e) Fotal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculat XVI-B Relationship of Activities Explain below how each activit	ulations) to the Ac	complishment of E h income is reported at purposes (other than	xempt Purp in column (on by providing	oses of Part XVI-A contribu	17,65
Subtotal. Add columns (b), (d), and (e) Fotal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculat XVI-B Relationship of Activities Explain below how each activit	ulations) to the Ac	complishment of E h income is reported at purposes (other than	xempt Purp in column (on by providing	oses of Part XVI-A contribu	17,65
Subtotal. Add columns (b), (d), and (e) Fotal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculat XVI-B Relationship of Activities Explain below how each activit	ulations) to the Ac	complishment of E h income is reported at purposes (other than	xempt Purp in column (on by providing	oses of Part XVI-A contribu	17,65
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Subtotal. Add columns (b), (d), and (e) Fotal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculat XVI-B Relationship of Activities Explain below how each activit	ulations) to the Ac	complishment of E h income is reported at purposes (other than	xempt Purp in column (on by providing	oses of Part XVI-A contribu	17,65
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Subtotal. Add columns (b), (d), and (e) Fotal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculat XVI-B Relationship of Activities Explain below how each activit	ulations) to the Ac	complishment of E h income is reported at purposes (other than	xempt Purp in column (on by providing	oses of Part XVI-A contribu	17,65

Form 990-PF (2011)	 	04-3545090	Pag
Part XVII Information Regarding Exempt Organizations	To and Transactions	and Relationships	With Noncharitable

1	Did the	e,organization directl	ly or indirect	ly engage in	any of the	following	with	any other orga	nization o	described		Yes	No
		ion 501(c) of the Co	•		•	_							
		zations?						·	•	•			
	-	ers from the reporting	foundation	to a noncha	ritable exemp	ot organiz	ation (of:					
		sh	_		-	_					1a(1)		X
		ner assets									1a(2)		X
		transactions:									11(1)		
		les of assets to a non-	charitable ex	empt organi	zation						1b(1)		Х
	(2) Pui	rchases of assets from	n a noncharit	tahla ayamn	t organization						1b(2)		X
		ntal of facilities, equip									1b(3)		<u>X</u>
		imbursement arrange									1b(4)		X
		ans or loan guarantee									1b(5)		$\frac{x}{x}$
		formance of services											$\frac{x}{X}$
											1b(6)		X
		g of facilities, equipm									1c		
		answer to any of the											
		in any transaction or											
			I			· 1	-	_					
(a) Lin	e no.	(b) Amount involved	(c) Name o	of noncharitable	exempt organiza	ation	(d) D	escription of transfe	ers, transact	ions, and shar	ng arrai	ngeme	nts
	-												
									<u></u>				
•													
				-	ı								
	Î						_						
								 · · · · ·					
	\neg			-				,					
29	le tha	foundation directly	or indirectly	affiliated wi	th or related	d to one	or m	ore tay-eyemni	organiza	etione		· ·	
		ped in section 501(c)									\neg	es Z	No.
		" complete the follow			30001011 30 110	υ _/ (υ/, υ:	. 3001			L	۰۰ '۰	JJ4	4 140
	1 1 03	(a) Name of organization			(b) Type of organ	nization			c) Descripti	on of relations	hin		
		,-,			(0) ()			<u> </u>					
							-	 					
				- 									
													
	Unde												
Sign		r penalties of perjury, I decla ct, and complete Declaration of	f preparer (other the	an taxpayer) is bar	rn, including accor sed on all information	npanying sch on of which pr	eparer h	ano statements, and t as any knowledge	o the best o	r my knowleag	e and b	ellet, it	is true,
_		11	- Let	- <i>n</i> I	5/1	_	-	7		May the IRS	discus	s this	return
Here			colone.	4	//4/)	<u> </u>		rustee		with the pri	eparer :		balow
	Sigi	nature of officer or trustee		Da	ste .		Title			(see Instruction	/B)? <u>X</u>	Yes	No
		Deine /Tome		15.11	1)	The state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the s			Y*11.		
Paid		Print/Type preparer's		Profa	rer's signature			Date	Che		PTIN		
Prep	arer	GORDON POWER		1/6	nan,	m		05/11/2	/11/2012 self-employed P00260194				
•			OMSON RE			OUNTIN	<u>G)</u>		Firm's Ell	v ▶ 75-:	<u> 1297</u>	386	
use	Only	Firm's address ► 35	THOMSON	PLACE,	1ST FL								
			STON, M			022	10		Phone no	617-8	<u> 56-2</u>	811	
											orm 99		(2011)

FORM 990PF, PART I - DIVIDENDS AND INTEREST FROM SECURITIES

NET INVESTMENT INCOME	602. 504. 504. 504. 504. 518. 519. 519. 519. 519. 709. 709. 709. 1,219. 1,188.	
REVENUE AND EXPENSES PER BOOKS	602. 504. 504. 304. 514. 128. 608. 519. 519. 519. 1,219. 1,136.	
DESCRIPTION	ATET INC ABBOTT LABS BP PLC SPONS ADR CISCO SYSTEMS INC DENTSPLY INTERNATIONAL INC EMERSON ELEC CO EXXONMOBIL CORP EXCONMOBIL CORP ISHARES MSCI PACIFIC EX-JAPAN INDEX JOHNSON & JOHNSON JOHNSON CONTROLS INC MERCK & CO INC NOVARTIS AG SPONSORED ADR PEPSICO INC PRAXAIR INC PROCTER & GAMBLE CO SIGMA ALDRICH CORP SOUTHERN COMPANY UNILEVER PLC SPONS ADR U.S. TREASURY NOTES 4.750% 5/15/14 U.S. TREASURY NOTES 4.750% 5/15/14	

JH0688

STATEMENT

JH0688

FORM 990PF, PART I - ACCOUNTING FEES

CHARITABLE PURPOSES	125.	403	16 10 10 11 11 11 11 11 11 11 11
ADJUSTED NET INCOME		NON	11 11 11 11 11 11 11 11 11 11
NET INVESTMENT INCOME	87.	 - -	11 11 11 11 11 11 11 11 11
REVENUE AND EXPENSES PER BOOKS		889	10 11 11 11 11 11 11 11 11 11 11
DESCRIPTION	AUDIT & ACCOUNTING FEES (ALLOC TAX PREPARATION FEE (NON-ALLOC	TOTALS	

TAXES
ı
н
PART
990PF,
FORM

NET INVESTMENT INCOME	248.	252.
REVENUE AND EXPENSES PER BOOKS	248. 140. 140. 3.	532.
DESCRIPTION	FOREIGN TAXES FEDERAL TAX PAYMENT - PRIOR YE FEDERAL ESTIMATES - PRINCIPAL FOREIGN TAXES ON QUALIFIED FOR FOREIGN TAXES ON NONQUALIFIED	TOTALS

JH0688

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- OTHER EXPENSES FORM 990PF, PART I

DESCRIPTION

EXPENSES PER BOOKS REVENUE AND

35.

OTHER ALLOCABLE EXPENSE-INCOME

PURPOSES

CHARITABLE

TOTALS

35.

35.

20

STATEMENT

FORM 990PF, PART II - U.S. AND STATE OBLIGATIONS

ENDING FMV 	52,755.
ENDING BOOK VALUE	50,516.
	TOTALS
DESCRIPTION	SEE ATTACHED

JH0688

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CORPORATE STOCK	
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ART	ij
ΡĄ	II
	ij
됴	ii
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Σ	ij
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Ē	ii

ENDING FMV 	248,012.
ENDING BOOK VALUE	182,448.
	A. T. A. T. O. F.
DESCRIPTION	SEE ATTACHED

JH0688

FORM 990PF,	PART	III	-	OTHER	DECREASES	IN	NET	WORTH	OR	FUND	BALANCES	
=========	=====	====	==	=====		===:	====	=====	====	=====	======	
DESCRIPTION											AMOUNT	
ROUNDING												1.
					TOT	AL						1.
											========	===

FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

OFFICER NAME:

PRESTON SAUNDERS

ADDRESS:

50 CONGRESS ST

BOSTON, MA 02109

TITLE:

TRUSTEE (SEE FOOTNOTE)

476. COMPENSATION

OFFICER NAME:

LEONARD PATENAUDE

ADDRESS:

50 CONGRESS ST

BOSTON, MA 02109

TITLE:

TRUSTEE (SEE FOOTNOTE)

908.

OFFICER NAME:

KATHARINE BRADFORD

ADDRESS:

50 CONGRESS ST

BOSTON, MA 02109

TITLE:

TRUSTEE (SEE FOOTNOTE)

OFFICER NAME:

ELIZABETH B BORDEN

ADDRESS:

50 CONGRESS ST

BOSTON, MA 02109

TITLE:

TRUSTEE (SEE FOOTNOTE)

FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES _____

OFFICER NAME:

AMANDA D BRADFORD

ADDRESS:

50 CONGRESS ST BOSTON, MA 02109

TITLE:

TRUSTEE (SEE FOOTNOTE)

TOTAL COMPENSATION:

1,384.

RECIPIENT NAME:

AMERICAN FARM LAND TRUST

ADDRESS:

1200 18TH STREET N.W SUITE 800

WASHINGTON, DC 20036

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

SUPPORT PROGRAMS

RECIPIENT NAME:

ANIMAL UMBRELLA, INC.

ADDRESS:

PO BOX 2675

ACTON, MA 01720

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

SUPPORT PROGRAMS

RECIPIENT NAME:

BUDDY DOG HUMANE SOCIETY

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

SUPPORT PROGRAMS

RECIPIENT NAME:

EYE OF THE STORM EQUINE

ADDRESS:

PO BOX 218

STOW, MA 01775

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

SUPPORT PROGRAMS

10

THE KATHARINE BRADFORD FOUNDATION JH0688 04-3545090 FORM 990PF, PART XV, LINE 3 - CONTRIBUTIONS, GIFTS, GRANTS PAID RECIPIENT NAME: HOYT FOUNDATION ADDRESS: 241 MASHAPAUG ROAD HOLLAND, MA RELATIONSHIP: NONE PURPOSE OF GRANT: SUPPORT PROGRAMS AMOUNT OF GRANT PAID 1,000. RECIPIENT NAME: MERRIMAC RIVER FELINE RESCUE ADDRESS: 63 ELM STREET SALISBURY, MA 01952 **RELATIONSHIP:** NONE PURPOSE OF GRANT: SUPPORT PROGRAMS AMOUNT OF GRANT PAID 6,040. RECIPIENT NAME: NORTH SHORE ELDER SERVICES ADDRESS: 152 SYLVAN ST DANVERS, MA 01923 **RELATIONSHIP:** NONE PURPOSE OF GRANT: SUPPORT PROGRAMS AMOUNT OF GRANT PAID 1,000. RECIPIENT NAME: SUZANNE ROSSETTI MEMORIAL FUND ADDRESS: 436 LINCOLN AVE SAUGUS, MA 01908 **RELATIONSHIP:**

AMOUNT OF GRANT PAID

STATEMENT 11

NONE

PURPOSE OF GRANT: ART EXHIBIT

5,000.

RECIPIENT NAME: HAMILTON-WENHAM REGIONAL HIGH SCHOOL ADDRESS: 775 BAY RD HAMILTON, MA 01982 RELATIONSHIP: NONE PURPOSE OF GRANT: SUPPORT PROGRAMS AMOUNT OF GRANT PAID 7,500. RECIPIENT NAME: ESSEX COUNTY TRAIL ASSOC. RELATIONSHIP: NONE PURPOSE OF GRANT: SUPPORT PROGRAMS AMOUNT OF GRANT PAID 1,000. RECIPIENT NAME: CITY ON A HILL FOUNDATION AMOUNT OF GRANT PAID 2,000. RECIPIENT NAME: THE TRUSTEES OF RESERVATIONS ADDRESS: APPLETON FARMS CAMPAIGN BEVERLY, MA 01915-1530 AMOUNT OF GRANT PAID 500. RECIPIENT NAME:

AMOUNT OF GRANT PAID

ADDRESS:

WALKER HOME FOR CHILDREN

1968 CENTRAL AVENUE NEEDHAM, MA 02492

500.

THE KATHARINE BRADFORD FOUNDATION JH0688 04-3545090 FORM 990PF, PART XV, LINE 3 - CONTRIBUTIONS, GIFTS, GRANTS PAID _______ RECIPIENT NAME: NORFOLK LAND TRUST ADDRESS: P.O. BOX 363 NORFOLK, CT 06058-0363 AMOUNT OF GRANT PAID 2,000. RECIPIENT NAME: HAMILTON-WENHAM FRIENDS OF THE ARTS AMOUNT OF GRANT PAID 5,000.

TOTAL GRANTS PAID:

45,040. ==========

FEDERAL FOOTNOTES

LEONARD PATENAUDE, PRESTON H. SAUNDERS, KATHARINE BRADFORD, ELIZABETH B. BORDEN AND AMANDA D. BRADFORD SERVE AS THE TRUSTEES OF THE KATHARINE BRADFORD FOUNDATION. A PORTION OF THE OVERALL TRUSTEES' FEES IS FOR THE SERVICES OF LEONARD PATENAUDE AND PRESTON H. SAUNDERS AS PROFESSIONAL TRUSTEES. THE REMAINING PORTION OF THE TRUSTEES' FEES IS FOR THE TRUSTEES' MANAGEMENT OF THE INVESTMENTS OF THE FOUNDATION. THE TRUSTEES MEET PERIODICALLY TO REVIEW GRANT PROPOSALS AND CARE FOR THE ADMINISTRATIVE ASPECTS OF THE FOUNDATION. THE TRUSTEES DEVOTE SEVERAL HOURS EACH QUARTER TO THESE VARIOUS TASKS.

SCHEDULE D (Form 1041)

Department of the Treasury Internal Revenue Service

Capital Gains and Losses

▶ Attach to Form 1041, Form 5227, or Form 990-T. See the Instructions for Schedule D (Form 1041) (also for Form 5227 or Form 990-T, if applicable).

OMB No. 1545-0092

2011

Name of estate or trust				Employer identifica		
THE KATHARINE BRADFORD FOUND	04-3545	090				
Note: Form 5227 filers need to complete only						
Part I Short-Term Capital Gains and I	_osses - Assets	Held One Ye	ar or Less			(0.0-1
(a) Description of property (Example: 100 shares 7% preferred of "Z" Co)	(b) Date acquired (mo , day, yr.)	(c) Date sold (mo., day, yr.)	(d) Sales price	(e) Cost or other b (see instructions		(f) Gain or (loss) for the entire year Subtract (e) from (d)
1a						
				ļ		
b Enter the short-term gain or (loss), if any,	from Schedule D-	-1, line 1b			1b	
2 Short-term capital gain or (loss) from For	ms 4684, 6252, 6	6781, and 8824			2	
 Net short-term gain or (loss) from partner Short-term capital loss carryover. Enter 					3	
Carryover Worksheet					4 ()
5 Net short-term gain or (loss). Combin column (3) on the back		-			5	
(a) Description of property (Example: 100 shares 7% preferred of "Z" Co.)	(b) Date acquired (mo., day, yr.)		(d) Sales price	(e) Cost or other b		(f) Gain or (loss) for the entire year Subtract (e) from (d)
6a						
b Enter the long-term gain or (loss), if any,	from Schedule D-	1, line 6b			6b	6,517
7 Long-term capital gain or (loss) from Fore	ms 2439, 4684, 6	3252, 6781, an	d 8824		7	
8 Net long-term gain or (loss) from partner	· · · · · · · -	8				
9 Capital gain distributions		9				
10 Gain from Form 4797, Part I					10	
11 Long-term capital loss carryover. Ente Carryover Worksheet	r the amount, if	f any, from lin	e 14 of the 2010	Capital Loss	11	<u> </u>
12 Net long-term gain or (loss). Combine	lines 6a through	n 11 in columi	n (f). Enter here an	d on line 14a,		
column (3) on the back					12	6,517 D (Form 1041) 2011
or raperwork neduction Act Motice, see the Insti	uctions for Form 10	J4 I.		2cu	suul 6	D (COIN 1041) 2011

Sched	lule D (Form 1041) 2011					Page 2
Par	Summary of Parts I and II	(1) Be	eneficiaries'	(2) Estate	e's	(2) Total
	Caution: Read the instructions before completing this part.	(se	ee instr.)	or trust	s	(3) Total
13	Net short-term gain or (loss)			ļ		
14	Net long-term gain or (loss):					
а	Total for year					6,517.
b	Unrecaptured section 1250 gain (see line 18 of the wrksht.) 14b	•				
C	28% rate gain					
15	Total net gain or (loss). Combine lines 13 and 14a ▶ 15					6,517.
	: If line 15, column (3), is a net gain, enter the gain on Form 1041, line 4 (or Fo					
	, go to Part V, and do not complete Part IV. If line 15, column (3), is a net loss, comple	te Part IV	and the Capita	al Loss Carryove	r Wor	ksheet, as necessary.
Par						
16	Enter here and enter as a (loss) on Form 1041, line 4 (or Form 990-T, Part I,					
8	The loss on line 15, column (3) or b \$3,000			1] 1	6 ()
Carry	i: If the loss on line 15, column (3), is more than \$3,000, or if Form 1041, page 1, i c over Worksheet in the instructions to figure your capital loss carryover.	ine 22 (or	Form 990-1, 1	ine 34), is a los	s, con	nplete the Capital Loss
Par			' '	 .		
	1041 filers. Complete this part only if both lines 14a and 15 in column (2) are ga	ins, or an an	nount is enter	ed in	Part I or Part II and
	is an entry on Form 1041, line 2b(2), and Form 1041, line 22, is more that	_				
	ion: Skip this part and complete the Schedule D Tax Worksheet in the instru					
	ther line 14b, col. (2) or line 14c, col. (2) is more than zero, or					
	oth Form 1041, line 2b(1), and Form 4952, line 4g are more than zero.	_				
	990-T trusts. Complete this part only if both lines 14a and 15 are ga					
	orm 990-T, and Form 990-T, line 34, is more than zero. Skip this part and c her line 14b, col. (2) or line 14c, col. (2) is more than zero.	ompiete	tne Scheaule	D Iax Work	snee	t in the instructions
					1	
17	Enter taxable income from Form 1041, line 22 (or Form 990-T, line 34)	17				
18	Enter the smaller of line 14a or 15 in column (2)					
	but not less than zero					
19	Enter the estate's or trust's qualified dividends					
	from Form 1041, line 2b(2) (or enter the qualified			İ		
20	dividends included in income in Part I of Form 990-T) 19 Add lines 18 and 19					
20				1		
21	If the estate or trust is filing Form 4952, enter the			1		
22	amount from line 4g; otherwise, enter -0	22	,	ŀ		
23	Subtract line 22 from line 17. If zero or less, enter -0-	23	+	· ·	İ	
23	Subtract line 22 from line 17. If 2610 of less, enter -0-	23	<u>' </u>			
24	Enter the smaller of the amount on line 17 or \$2,300	24				
25	Is the amount on line 23 equal to or more than the amount on line 24?	• •				
23	Yes. Skip lines 25 and 26; go to line 27 and check the "No" box.	1				
	No. Enter the amount from line 23	25				
26	Subtract line 25 from line 24					
27	Are the amounts on lines 22 and 26 the same?	· · · - ·				
	Yes. Skip lines 27 thru 30, go to line 31. No. Enter the smaller of line 17 or line 22	27		,		
28	Enter the amount from line 26 (If line 26 is blank, enter -0-)	28	:		ŀ	
		===				
29	Subtract line 28 from line 27	29	ı			
30	Multiply line 29 by 15% (.15)				30	
31	Figure the tax on the amount on line 23. Use the 2011 Tax Rate Sc				- 1	
	(see the Schedule G instructions in the instructions for Form 1041)				31	
		•	• •			
32	Add lines 30 and 31			;	32	
33	Figure the tax on the amount on line 17. Use the 2011 Tax Rate Sc					<u> </u>
	(see the Schedule G instructions in the instructions for Form 1041)			3	33	
34	Tax on all taxable income. Enter the smaller of line 32 or line 33 here					
	G, line 1a (or Form 990-T, line 36)		<u>.</u>	<u> </u>	34	···

Schedule D (Form 1041) 2011

Page 2

THE KATHARINE BRADFORD FOU			The showing of the state. Side	04-35450	90
Part II Long-Term Capital Gains and			n One Year		
(a) Description of property (Example: 100 sh. 7% preferred of "Z" Co.)	(b) Date acquired (mo., day, yr.)	(c) Date sold (mo , day, yr)	(d) Sales price	(e) Cost or other basis (see instructions)	(f) Gain or (loss) Subtract (e) from (d)
6a 30000. FHLB		00/15/0011	30,000,00	20 572 00	420.00
2/15/11	05/22/2001	02/15/2011	30,000.00	29,572.00	428.00
300. DENTSPLY INTERNATIONA	11/13/2007	05/27/2011	11,686.00	12,477.00	-791.00
500. EMC CORP MASS					6 000 00
	12/06/2005	05/27/2011	14,150.00	7,270.00	6,880.00
				:	
		<u> </u>			

6b Total. Combine the amounts in column (f). Enter here and on Schedule D, line 6b .

FORM 990-PF - PART IV
CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

Kind of F				ription		0 D	Date acquired	Date sold
Gross sale price less	Depreciation allowed/	Cost or other	FMV as of	Adj. basis as of	Excess of FMV over	Ī	Gain or	
expenses of sale	allowable	basis	12/31/69	12/31/69	adj basis		(loss)	
ļ		30000. FHLB			5% 2/15		05/22/2001	02/15/201
30,000.00		PROPERTY TY 29,572.00	PE: SECURI.	ITED			428.00	
		300. DENTSP PROPERTY TY					11/13/2007	05/27/201
11,686.00		12,477.00	FE. SECORI.	ITES			-791.00	
		500. EMC CO PROPERTY TY		TIES			12/06/2005	05/27/203
14,150.00		7,270.00	11, 526611.				6,880.00	
TAL GAIN(I	oss)					-	6,517. ======	
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	t							
į								
:							:	
							!	

Asset Detail

Statement of Value and Activity

December 1, 2011 - December 31, 2011

Asset Detail

Description	Shares/Par Value	Tax Cost	Market Value	Current Yield	Est. Ann. Income	% of Mkt. Val.
Cash & Equivalents Money Market Funds Federated US Treasury Cash Rsv Fd-I CUSIP: 60934N682	8,237	\$8,237.20	\$8,237.20	0.00%	\$0.39	2.67%
Total Cash & Equivalents		\$8,237.20	\$8,237.20		\$0.39	2.67%
Equity Consumer Discretionary Johnson Controls Inc CUSIP: 478366107	200	\$7,888.58	\$6,252.00	2.30%	\$144.00	2.02%
		\$7,888.58	\$6,252.00		\$144.00	2.02%
Consumer Staples Pepsico Inc	150	\$6,777.50	\$9,952.50	3.10%	\$309.00	3.22%
Procter & Gamble Co	400	\$12,497.37	\$26,684.00	3.15%	\$840.00	8.64%
Unilever PLC Spons ADR CUSIP: 904767704	540	\$11,961.99	\$18,100.80	3.70%	8669.60	5.86%
		\$31,236.86	\$54,737.30		\$1,818.60	17.72%
Energy BP PLC Spons ADR CUSIP: 055622104	300	\$15,451.95	\$12,822.00	3.93%	\$504.00	4.15%





Statement of Value and Activity December 1, 2011 - December 31, 2011

Description	Shares/Par Value	Tax Cost	Market Value	Current Yield	Est. Ann. Income	% of Mkt. Val.
Exconmobil Corp CUSIP: 30231G102	100	\$14.96	\$8,476.00	2.22%	\$188.00	2.74%
		\$15,466.91	\$21,298.00		\$692.00	%68'9
Health Care Abbott Labs	300	\$16,380.99	\$16,869.00	3.41%	\$576.00	5.46%
CUSIP: 002824100 Johnson & Johnson	100	\$5,588.78	\$6,558.00	3.48%	\$228.00	2.12%
Merck & Co Inc	400	\$526.93	\$15,080.00	4.46%	\$672.00	4.88%
CUSIP: 58933Y105 Novartis AG Sponsored ADR CUSIP: 66987V109	300	\$17,346.00	\$17,151.00	3.51%	\$601.50	5 55%
		\$39,842.70	\$55,658.00		\$2,077.50	18.01%
Industrials Emerson Elec Co	400	\$11,322.00	\$18,636.00	3.43%	\$640.00	6.03%
GOSIF: 291011104 General Electric Corp	009	\$28.04	\$10,746.00	3.80%	\$408.00	3.48%
		\$11,350.04	\$29,382.00		\$1,048.00	9.51%
Technology Cisco Systems Inc CUSIP: 17275R102	300	\$5,490.00	\$5,424.00	1.33%	\$72.00	1.76%
		\$5,490.00	\$5,424.00		\$72.00	1.76%

0012643 - 1200057

Asset Detail (continued)

Statement of Value and Activity

December 1, 2011 - December 31, 2011

Description	Shares/Par Value	Tax Cost	Market Value	Current Yield	Est. Ann. Income	% of Mkt. Val.
Basic Materials Praxair Inc	150	\$11,587.50	\$16,035.00	1.87%	\$300.00	5.19%
CUSIP: 74005P104 Sigma Aldrich Corp CUSIP: 826552101	200	\$10,303.00	\$12,492.00	1.15%	\$144.00	4.04%
		\$21,890.50	\$28,527.00		\$444.00	9.23%
Telecommunication Services AT&T Inc CUSIP: 00206R102	700	\$21,966.00	\$21,168.00	5.82%	\$1,232.00	6.85%
		\$21,966.00	\$21,168.00		\$1,232.00	6.85%
Utilities Southern Company CUSIP: 842587107	300	\$10,539.00	\$13,887.00	4.08%	\$567.00	4.49%
		\$10,539.00	\$13,887.00		\$567.00	4.49%
Equity Mutual Funds iShares MSCI Pacific Ex-Japan Index CUSIP: 464286665	300	\$16,777.00	\$11,679.00	4.41%	\$515.10	3.78%
		\$16,777.00	\$11,679.00		\$515.10	3.78%
Total Equity	4	\$182,447.59	\$248,012.30	,	\$8,610.20	80.26%



Statement of Value and Activity

Asset Detail (continued)

December 1, 2011 - December 31, 2011

Description	Shares/Par Value	Tax Cost	Market Value	Current Yield	Current Yield Est. Ann. Income	% of Mkt. Val.
Fixed Income Government Securities United States Treasury Notes	25,000	\$25,593.75	\$25,141.50	4.85%	\$1,218.75	8.14%
DTD 02/15/2002 4.875% 02/15/2012 CUSIP: 9128277L0 United States Treasury Notes DTD 05/15/2004 4.750% 05/15/2014	25,000	\$24,921.88	\$27,613.25	4.30%	\$1,187.50	8.93%
CUSIP: 912828CJ7		\$50,515.63	\$52,754.75		\$2,406,25	\$70.7\$
= Total All Assets		\$241,200.42	\$309,004.25		\$11,016.84	100.00%