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Form **990-PF**

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

De	eroal B	ent of the Treasury Revenue Service Note. The foundat	ion may	Treated as a Priva be able to use a copy of the	te Foundation s return to satisfy state rec	ortina requirements.	2011
		endar year 2011 or tax year beginning		<u> </u>	, and ending	3	
N	ame	of foundation				A Employer identificatio	n number
(CAT	THERINE E ALLIN-BRAD	SHAV	W FOUNDATION		48-1224316	5
		and street (or PO box number if mail is not delivere 2 W 67TH TERRACE	d to stree	et address)	Room/suite	B Telephone number 9132368082)
		town, state, and ZIP code				C If exemption application is p	
_		"	6208				
G	Cnec	ck all that apply: Initial return Final return		Amended return	former public charity	D 1. Foreign organization	s, check here
		Address change		Name change		2. check here and attach co	eeting the 85% test, proputation
H	_			xempt private foundation		E If private foundation sta	
<u> </u>	_	ection 4947(a)(1) nonexempt charitable trus		Other taxable private found		under section 507(b)(1	•
		Parket value of all assets at end of year J Part II, col. (c), line 16)		ting method: X Cash ther (specify)	Accrual	F If the foundation is in a under section 507(b)(1	
	► \$			umn (d) must be on cash	basis.)		(b), thete note
P	art [.]	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) in necessarily equal the amounts in column (a))	ay not	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income (d) Disbursements for charitable purpose (cash basis only)	
_	1	Contributions, gifts, grants, etc., received		5,912.		N/A	
	2	Check lifthe foundation is not required to attach	Sch B	()是这个性别多是		· 经基础 人名英格兰	
	3	Interest on savings and temporary cash investments		1,331.	1,331		STATEMENT: 1.
	4	Dividends and interest from securities	-	700.	700	•	STATEMENT: 2
	1 .	Gross rents .		N. F. There and the Bestellander and the con-	and the institution of the state of the last	व्यक्ति होकार सर्व स्थल केटघो. ४.	The second second second second
	î .	Net rental income or (loss)	1-1V	ep - Final	And the state of t	THE TOTAL STATE OF THE PARTY OF	THE RESERVE OF THE PARTY OF THE
ne	"	Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a			and the systematical artists	THE PROPERTY OF THE PROPERTY OF THE PARTY OF	The state of the s
Revenue	7	a Legalita	<u> </u>	mm-way-	0	A STATE OF THE STA	Attachment of the state of the
æ	8	Net short-term capital gain	237			ment in the Manage Britis days	Carlot Local Control Control Control
	9	Income modifications					
	10a	Gross sales less returns 11 AAA				STOREST STATE STREET	Control of the second
	l b	Less Cost of goods sold		Account of the second of the s		8,350,5,3,0	लिन्द्र राज्ये त्रशास्त्रकार राज्य
	0	Gross profit or (loss)			これは ないがん かんしゅう		
	11	Other income					于"为我们,这是"快"的
	12	Total. Add lines 1 through 11	<u>. </u>	7,943.	2,031.		रश्चिम्भूरं मुक्के हि स्वर्ध
	13	Compensation of officers, directors, trustees, etc		0.	0.	·	0.
	14		•		· · · · · · · · · · · · · · · · · · ·		
S	15	Pension plans, employee benefits	•			 	· · · · · · · · · · · · · · · · · · ·
SUS(108	Legal fees Accounting fees STMT	3	1,000.	0.		1,000.
Expenses	ָר	Other professional fees STMT		50.	50.		0.
Е	17	Interest					
.a∰	18	•	5	81.	34.		0.
nist	19	Depreciation and depletion					
Ē	20	Occupancy					
Ac	21	Travel, conferences, and meetings					
anc	22	Printing and publications					·
ing	23	Other expenses				ļ 	
rati	24	Total operating and administrative			0.4		1 000
Operating and Administrative		expenses, Add lines 13 through 23		1,131. 11,500.	84.	and there are some in	1,000.
_	ı	Contributions, gifts, grants paid	•-	11,500.	And the second of the second of the second		11,500.
	20	Total expenses and disbursements. Add lines 24 and 25		12,631.	84.	1	12,500.
	27	Subtract line 26 from line 12:		24.051.	w Marinet Frank		
		Excess of revenue over expenses and disbursemen	te	<4,688.			
		Net investment income (if negative, enter -0-)	• .	AND STREET	1,947.	A CONTRACTOR	
	c	Adjusted net income (if negative, enter -0-)	. '			N/A	The second of the second
1235 12-02		LHA For Paperwork Reduction Act Notice	e, see	instructions.			Form 990-PF (2011)

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,476.

5 Decreases not included in line 2 (itemize)

6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30

8 Enter qualifying distributions from Part XII, line 4

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.

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7 Add lines 5 and 6

6

7

6 Enter 1% of net investment income (1% of Part I, line 27b)

_	rm 990-RF (2011) CATHERINE E ALLIN-BRADSHAW FOUNDATION			4316		Page
Ŗ	art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4	1948	- see	instr	uctio	ons)
1	1a Exempt operating foundations described in section 4940(d)(2), check here ▶ and enter "N/A" on line 1.	, 150 m	75.			
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)	虁				
	b Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1%	1	1		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	39.
	of Part I, line 27b	13,775	17,50			F = 100 (
	c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).	2 2	1		75.	ريادر ادران جناية شاييد
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				39.
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				39.
6	Credits/Payments:		1,13			(TT 22)
	a 2011 estimated tax payments and 2010 overpayment credited to 2011 6a	数代記録	1 4 miles			Personal Land Park Brod
	b Exempt foreign organizations - tax withheld at source					
	c Tax paid with application for extension of time to file (Form 8868) . 6c		1			
	d Backup withholding erroneously withheld 6d 6d	1,277 14 3 1,13 7				
7	Total credits and payments. Add lines 6a through 6d	7	. 1.77	Note succession	CL 924 (085 N	Õ.
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	9				39.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10				
11	Enter the amount of line 10 to be. Credited to 2012 estimated tax ▶ Refunded ▶	11				
Pa	art VII-A Statements Regarding Activities					
18	a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene	ın		~	Yes	No
	any political campaign?		-	1a		X
t	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see 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	d or		ئى ئىدىد. ئىرىكىدىد	- 21-12-	1,5,1
	distributed by the foundation in connection with the activities.			Same in	ر د	ئد الدار نخساسه
C	Did the foundation file Form 1120-POL for this year?			10		X
C	f Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			30.7		1. 3-4
	(1) On the foundation. ► \$ 0. (2) On foundation managers. ► \$			A	i gad	10, 70,
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation			17.2	1	1
	managers. ► \$0 .			2,32	William William	7. 25 2. 22. 23
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?			2		X
	If "Yes," attach a detailed description of the activities.				75.	C '2, "
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or			23.5	ر بازد مانو هاد ز	15 - 3
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			3		X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			4a		X
	If "Yes," has it filed a tax return on Form 990-T for this year?	N,	/A	4b		<u> </u>
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.			1400		
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:				12 22	JES.
	By language in the governing instrument, or			40, 141	7. T.	1 4
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state	aw		1		r. Ist
_	remain in the governing instrument?			6	X	<u> </u>
7	Did the foundation have at least \$5,000 in assets at any time during the year?			7	X	
_	If "Yes," complete Part II, col. (c), and Part XV.					1 1 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)			25.00		
	KS			138.75	, Fig.	- 2:23
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)			a succe		S. 15
_	of each state as required by General Instruction G? If "No," attach explanation			8b	X	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calen	dar		#1.		P _G A
	year 2011 or the taxable year beginning in 2011 (see instructions for Part XIV)? If "Yes," complete Part XIV			9		X
ΙÜ	Did any persons become substantial contributors during the tax year? it "Yes," attach a schedule listing their names and addresses			10		X

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Form 990-PF (2011) CATHERINE E ALLIN-BRADSI			48-12243	316 Page 6
Part VII-B Statements Regarding Activities for Which	Form 4720 May Be	Required (conti	nued)	
 5a During the year did the foundation pay or incur any amount to: (1) Carry on propaganda, or otherwise attempt to influence legislation (section) (2) Influence the outcome of any specific public election (see section 4955); 		rectly,	/es X No	
 any voter registration drive? (3) Provide a grant to an individual for travel, study, or other similar purposes (4) Provide a grant to an organization other than a charitable, etc., organization 		. 🔲 Y	/es X No 3	
509(a)(1), (2), or (3), or section 4940(d)(2)?(5) Provide for any purpose other than religious, charitable, scientific, literary, the prevention of cruelty to children or animals?	 , or educational purposes, or	for	es X No	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify unsection 53.4945 or in a current notice regarding disaster assistance (see instruorganizations relying on a current notice regarding disaster assistance check it	uctions)?	ın Regulations	N/A. ▶□	5b
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fexpenditure responsibility for the grant? If "Yes," attach the statement required by Regulations section 53.494.	. 1	_ /	es No	
 6a Did the foundation, during the year, receive any funds, directly or indirectly, to a personal benefit contract? b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 	pay premiums on	Y	es X No	6b X
If "Yes" to 6b, file Form 8870. 7a At any time during the tax year, was the foundation a party to a prohibited tax s b If "Yes," did the foundation receive any proceeds or have any net income attributions.	helter transaction?		es X No	7b
Part VIII		nagers, Highl	<u> </u>	
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
	TRUSTEE	ļ	j	
2902 W. 67TH TERRACE	F 00			
MISSION, KS 66208	5.00	0.	0.	0.
				I
				1
		1		
		}		
Compensation of five highest-paid employees (other than those inc	luded on line 1). If none,	enter "NONE."	· · · · · · · · · · · · · · · · · · ·	
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				
				
				
	_			
	· ·			
Total number of other employees paid over \$50,000		·	>	0
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۴	art X. Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	undations, se	ee instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:	arria.	
а		1a	37,234.
b		1b	37,234. 96,713.
С	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	133,947.
е	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	133,947.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	2,009.
5	Net value of noncharitable-use assets, Subtract line 4 from line 3. Enter here and on Part V, line 4	5	131,938.
6	Minimum investment return. Enter 5% of line 5	6	6,597.
ŀΡ	art:XI: Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here and do not complete this part.)	nd certain	
-		11	6,597.
1	Minimum investment return from Part X, line 6 Tax on investment income for 2011 from Part VI, line 5 2a 39.	1.7%	0,337.
	Income tax for 2011. (This does not include the tax from Part VI.)		
	Add lines 2a and 2b	2c	39.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	6,558.
4	Recoveries of amounts treated as qualifying distributions	4	0,330.
5	Add lines 3 and 4	5	6,558.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	6,558.
<u>'</u> [[?]	art XII Qualifying Distributions (see instructions)	<u> </u>	0,3301
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	12	
-	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	12,500.
	Program-related investments - total from Part IX-B	1b	0.
	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:	interes.	· · · · · · · · · · · · · · · · · · ·
	Suitability test (prior IRS approval required)	3a	
	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	12,500.
	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		·
	income. Enter 1% of Part I, line 27b	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	12,500.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of 4940(e) reduction of tax in those years.	qualifies for the	

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Part XIII. Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2010	(c) 2010	(d) 2011
1 Distributable amount for 2011 from Part XI, line 7				6,558.
2 Undistributed income, if any, as of the end of 2011 a Enter amount for 2010 only .			6,050.	
b Total for prior years: 2009, 2008, 2007	The state of the s	0.		
3 Excess distributions carryover, if any, to 2011: a From 2006				
b From 2007 c From 2008				
d From 2009 e From 2010				
f Total of lines 3a through e 4 Qualifying distributions for 2011 from				
Part XII, line 4: > \$ 12,500. a Applied to 2010, but not more than line 2a			6,050.	
b Applied to undistributed income of prior years (Election required - see instructions)		0.		
c Treated as distributions out of corpus (Election required - see instructions)	0.	The second of th		
d Applied to 2011 distributable amount e Remaining amount distributed out of corpus	<u> जिल्ला के जिल्ला</u> • 0	Transport Land State of the Control		6,450.
5 Excess distributions carryover applied to 2011 (If an amount appears in column (d), the same amount	0.		And the second of the second o	0.
must be shown in column (a)) 6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5 b Prior years' undistributed income. Subtract		<u> </u>		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable amount - see instructions		0.		
e Undistributed income for 2010. Subtract line 4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2011. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2012				108.
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2006 not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2012. Subtract lines 7 and 8 from line 6a	0.			
0 Analysis of line 9: a Excess from 2007				
b Excess from 2008 c Excess from 2009 d Excess from 2010				
e Excess from 2011	The state of the s			Form 990-PF (2011)

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Supplementary Information				
3 Grants and Contributions Paid During the	Year or Approved for Future	Payment		
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
a Paid during the year	or substantial contributor	recipient		
a raid during the year				
UNITED AID FOUNDATION		501(C)(3)	DIRECT AID TO PEOPLE	
305 7TH AVENUE NEW YORK, NY 10001			IN CRISIS.	6,500
1011, 11 1001				
GLG MEMORIAL		501(C)(3)	CHARITABLE PURPOSES.	
7373 FOXMILL ROAD MENTOR, OH 44060				5,000.
MENIOR, ON 44000				3,000.
		İ		
		1		
	 			
	-			· · · · · · · · · · · · · · · · · · ·
Total		·	▶ 3a	11,500.
b Approved for future payment				
NONE				
				
			-	
Total			. > 3b	0.
Total	<u> </u>			n 990-PF (2011)

Enter gross amounts unless otherwise indicated.	l lincolated l	ousiness income	1 6	ded by coston E10 C10 C11	<u> </u>
			(C)	ided by section 512, 513, or 514	(e)
4.0	(a) Business	(b) Amount	sion code	(d) Amount	Related or exempt function income
1 Program service revenue:	code	·	- 0000		
a				<u> </u>	
b					
<u> </u>					i
d	 				
e			-		
g Fees and contracts from government agencies			+		
 g Fees and contracts from government agencies 2 Membership dues and assessments 	 				
3 Interest on savings and temporary cash	 -		- 		
investments			14	1,331.	
4 Dividends and interest from securities			14	700.	
5 Net rental income or (loss) from real estate:		Company of the second of the s	, ,		معري والإيماء واسترتهم أن منتقاه كمواهم.
- Dahi Gaaaaad aasaada	و المراجعة	the first and the section of the sec	45 4 4 7	I desimply the of the second of the second	The second of the day.
1 11 1 1 1 1 1 1					
6 Net rental income or (loss) from personal	-				
property					
7 Other investment income		··-·			
8 Gain or (loss) from sales of assets other			+ +		
than inventory					
9 Net income or (loss) from special events					
O Gross profit or (loss) from sales of inventory			+		
1 Other revenue:					
a			1 1		
b			11		·
C			1		
d			11		
е					, , , , , , , , , , , , , , , , , , ,
2 Subtotal. Add columns (b), (d), and (e)		0	· \$1.46	2,031.	0
				13	2,031
3 Total. Add line 12, columns (b), (d), and (e)					······································
3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculation	ns.)				
See worksheet in line 13 instructions to verify calculation		nlichment of E	vomnt	Purposos	
		plishment of E	xempt	Purposes	
Part XVI-B Relationship of Activitions No. Explain below how each activity for which	ies to the Accom	lumn (e) of Part XVI-			plishment of
Relationship of Activities	ies to the Accom	lumn (e) of Part XVI-			plishment of
Part XVI-B Relationship of Activitions No. Explain below how each activity for which	ies to the Accom	lumn (e) of Part XVI-			plishment of
Part XVI-B Relationship of Activitions No. Explain below how each activity for which	ies to the Accom	lumn (e) of Part XVI-			plishment of
Part XVI-B Relationship of Activitions No. Explain below how each activity for which	ies to the Accom	lumn (e) of Part XVI-			plishment of
Part XVI-B Relationship of Activitions No. Explain below how each activity for which	ies to the Accom	lumn (e) of Part XVI-			plishment of
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Part XVI-B Relationship of Activities Explain below how each activity for which	ies to the Accom	lumn (e) of Part XVI-			plishment of
Part XVI-B Relationship of Activities Explain below how each activity for which	ies to the Accom	lumn (e) of Part XVI-			plishment of
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Part XVI-B Relationship of Activitions No. Explain below how each activity for which	ies to the Accom	lumn (e) of Part XVI-			plishment of
Relationship of Activitions to verify calculations are No. Explain below how each activity for which the foundation's exempt purposes (other	ies to the Accom	lumn (e) of Part XVI-			plishment of
Part XVI-B Relationship of Activitions No. Explain below how each activity for which	ies to the Accom	lumn (e) of Part XVI-			plishment of
Part XVI-B Relationship of Activiti Relationship of Activiti Explain below how each activity for which the foundation's exempt purposes (other	ies to the Accom	lumn (e) of Part XVI-			plishment of
Part XVI-B Relationship of Activities Relationship of Activities Explain below how each activity for which the foundation's exempt purposes (other	ies to the Accom	lumn (e) of Part XVI-			plishment of
Part XVI-B Relationship of Activities. Explain below how each activity for which the foundation's exempt purposes (other	ies to the Accom	lumn (e) of Part XVI-			plishment of

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			To and Transactions a	nd Relationships With None	<u>ZZ4316</u> charitable		ge 13
·	Exempt Organ		i io and Transactions a	na neiationships with Non-	cnantable	,	
1 D			ollowing with any other organization	n described in section 501(c) of		Yes	No
th	e Code (other than section 501(o	c)(3) organizations) or in sec	tion 527, relating to political organi	zations?			
a Tr	ransfers from the reporting found	fation to a noncharitable exe	mpt organization of:				
(1) Cash .		••		1a(1)		X
-) Other assets .	•			1a(2)		X
	ther transactions:					1	
-) Sales of assets to a noncharita			•	1b(1)		X
) Purchases of assets from a no	• -	ation .		1b(2)		<u>X</u>
•	Rental of facilities, equipment,	• •		••	1b(3)		X
•) Reimbursement arrangements		•		1b(4)	- 1	X
-) Loans or loan guarantees	ombarahin ar fundraiaina aa'	Lieutatro no		1b(5)		X
) Performance of services or me				1b(6)		<u> </u>
	naring of facilities, equipment, ma			ays show the fair market value of the go		te l	
				e in any transaction or sharing arrangeme		,13,	
	lumn (d) the value of the goods,			s in any transaction of charing arrangement	JIII, 311011 III		
(a) Line			aritable exempt organization	(d) Description of transfers, transactions	, and sharing arra	ıngemei	nts
		N	/A		<u> </u>		
			, <u></u>		· · · · ·		
			. <u> </u>				
					 	_	
				<u> </u>			
	•	•	o, one or more tax-exempt organiza	ations described	 1.,	77	1
	section 501(c) of the Code (other		In section 52/7	•	Yes	X	I NO
<u>D</u> 11	Yes," complete the following sch (a) Name of org		(b) Type of organization	(c) Description of relat	unnshin		
	N/A	<u></u>	(b) type of organization	(c) Description of relati	ionamp		
	N/A	· · · · · · · · · · · · · · · · · · ·					
					· · ·		

	Under penalties of perjury, I declare			tatements, and to the best of my knowledge	May the IRS di	ecues th	
Sign	and belief, it is true, correct, and corr	nplete Peclaration of preparer (ot	her than taxpayer) is based on all informa	tion of which preparer has any knowledge	return with the shown below (s	prepare	er .
Here	X	- tan	10/2	WTTC 320ENT	X Yes		No
	Signature of officer or truetee		Date	Title	<u> </u>		
	Print/Type preparer's	ame Prepai	rer's signature		TIN		
	1	$\Lambda \Lambda$	1 ()	Self- employed			
Paid	ANN M. SWA	RTS ()	m M Warte		<u> 200435</u>		
Prep	arer Firm's name ► CBI	Z MHM, LEC	-	Firm's EIN ► 34	-187426	0	

Firm's address ► 11440 TOMAHAWK CREEK PARKWAY LEAWOOD, KS 66211

Phone no.

Use Only

Schedule B

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

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

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

OMB No 1545-0047

Employer identification number

2011

48-1224316 CATHERINE E ALLIN-BRADSHAW FOUNDATION Organization type (check one): Filers of: Section: 501(c)(Form 990 or 990-EZ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 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 1/3% 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, total 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 total 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, chantable, 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 on line H of its Form 990-EZ or on Part I, 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

Employer identification number

CATHERINE E ALLIN-BRADSHAW FOUNDATION

48-1224316

	MILITE DI TIBLITI DI DIGITI I COMPUTATION		<u> </u>
Part I	Contributors (see instructions). Use duplicate copies of Part I if additi	onal space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	UNITED WAY OF GREATER KANSAS CITY, INC. 1080 WASHINGTON KANSAS CITY, MO 64105	- \$5,912. -	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		- - - -	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroli Noncash (Complete Part II if there is a noncash contribution.)

Schedule B (Form 990, 990-EZ, or 990-PF) (2011) Name of organization

Employer identification number

CATHERINE E ALLIN-BRADSHAW FOUNDATION

48-1224316

	NE E ALLIN-BRADSHAW FOUNDATION Noncash Property (see instructions). Use duplicate copies of P		8-1224316
(a) No. from	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
Part I		(See IIISU uctions)	
-		\$	
(a) No. From Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
 - -		s	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
$-\begin{vmatrix} - \\ - \end{vmatrix}$		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. rom art I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
$-\begin{vmatrix} - \\ - \end{vmatrix}$		 \$	
(a) No. rom art I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	90, 990-EZ, or 990-PF) (2

123454 01-23-12

FORM 990-PF INTEREST ON SAV	INGS AND I	EMPOR <i>A</i>	RY CASH I	INVESTMENTS	STATEMENT	1
SOURCE					AMOUNT	
CHARLES SCHWAB MONEY MKT ENTERPRISE BANK TD AMERITRADE MONEY MKT					8	25. 80. 26.
TOTAL TO FORM 990-PF, PART I	, LINE 3,	COLUMN	Α		1,3	31.
FORM 990-PF DIVIDENT	OS AND INT	EREST	FROM SECU	RITIES	STATEMENT	2
SOURCE	GRO	SS AMO		ITAL GAINS	COLUMN (A AMOUNT)
CHARLES SCHWAB TD AMERITRADE		2. 698.		0.	2 698	
TOTAL TO FM 990-PF, PART I, I	N 4		700.	0.	7(00.
FORM 990-PF	ACCOUN	ring f	EES		STATEMENT	3
DESCRIPTION	(A) EXPENSES PER BOOK		(B) INVEST- I INCOME	(C) ADJUSTED NET INCOM		
ACCOUNTING SERVICES	1,00		0.		1,00	00.
TO FORM 990-PF, PG 1, LN 16B	1,00). 	0.	-	1,00	00.
FORM 990-PF O	THER PROFI	ESSION	AL FEES		STATEMENT	4
DESCRIPTION	(A) EXPENSES PER BOOKS		(B) INVEST- F INCOME	(C) ADJUSTED NET INCOM		
INVESTMENT FEES	5().	50.			0.
 TO FORM 990-PF, PG 1, LN 16C	5(50.			0.

FORM 990-PF	TAX	ES		STATEMENT 5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVE MENT INC		STED CHARITABLE
FOREIGN TAX PAID EXCISE TAX	34. 47.		34.	0.
TO FORM 990-PF, PG 1, LN 18	81.		34.	0.
FORM 990-PF U.S. AND	STATE/CITY G	OVERNMENT	OBLIGATION	S STATEMENT 6
DESCRIPTION	U.S GOV'		BOOK VALU	FAIR MARKET E VALUE
FED FARM CR BK 2.25% 4/12	X		20,1	75. 20,213.
TOTAL U.S. GOVERNMENT OBLIGA	TIONS	-	20,1	75. 20,213.
TOTAL STATE AND MUNICIPAL GO	VERNMENT OBL	IGATIONS		
TOTAL TO FORM 990-PF, PART I	I, LINE 10A	-	20,1	75. 20,213.
FORM 990-PF	CORPORATI	E STOCK		STATEMENT 7
DESCRIPTION			BOOK VALUI	FAIR MARKET VALUE
CORPORATE STOCK		-	16,90	17,035.
TOTAL TO FORM 990-PF, PART I	I, LINE 10B	-	16,90	17,035.
FORM 990-PF	CORPORATE	E BONDS		STATEMENT 8
			BOOK VALUE	FAIR MARKET VALUE
DESCRIPTION			BOOK VALUE	4111011
DESCRIPTION CORPORATE BONDS		-	16,96	

Form **8868**

(Rev. January 2012)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No. 1545-1709

• If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box							
If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form).							
Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.							
Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation							
required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension							
of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain							
Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form,							
visit www.rs.gov/efile and click on e-file for Charities & Nonprofits.							
Part	I Automatic 3-Month Extension of Time	e. Only s	submit original (no copies ne	eded)	•		
A corpo	pration required to file Form 990-T and requesting an autor	natic 6-mo	onth extension - check this box and	comple	te		
Part I o	nly				· >		
	r corporations (including 1120-C filers), partnerships, REM acome tax returns.	IICs, and t	rusts must use Form 7004 to reques	st an ex	tension of time		
Type o	rpe or Name of exempt organization or other filer, see instructions. Employer identification or other filer, see instructions.					er (EIN) or	
print						_	
File by the	CATHERINE E ALLIN-BRADSHAW FOUNDATION X 48-122431						
due date t	" 2902 W 67TH TERRACE)	
return See instructions. City, town or post office, state, and ZIP code. For a foreign address, see instructions.							
SHAWNEE MISSION, KS 66208							
Enter th	ne Return code for the return that this application is for (file	e a separa	te application for each return)			0 4	
Application			pplication			Return	
Is For		Code	Is For			Code	
Form 990		01	Form 990-T (corporation)			07	
Form 990-BL		02	Form 1041-A			08	
Form 990-EZ		01	Form 4720	rm 4720			
Form 990-PF		04	Form 5227			10	
Form 990-T (sec. 401(a) or 408(a) trust)		05	Form 6069			11	
Form 990-T (trust other than above)		06	Form 8870			12	
• The books are in the care of ► SHAWNEE MISSION, KS 66208							
Telephone No. ► 9132368082 FAX No. ►							
• If the organization does not have an office or place of business in the United States, check this box							
• If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . If this is for the whole group, check this							
box . If it is for part of the group, check this box and attach a list with the names and EINs of all members the extension is for.							
1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until							
AUGUST 15, 2012 , to file the exempt organization return for the organization named above. The extension							
is for the organization's return for:							
>	X calendar year 2011 or						
•	tax year beginning, and ending						
2 If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return Change in accounting period							
3a If	3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any						
	nonrefundable credits. See instructions.						
_	If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and						
	estimated tax payments made. Include any prior year overpayment allowed as a credit. 3b \$						
	Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required,						
	by using EFTPS (Electronic Federal Tax Payment System). See instructions. 3c \$						
Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.							