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

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

OMB No 1545-0052

For	calen	dar year 2012 or tax year b	eginning		, and e	nding			
Na	me of	foundation					A Employ	er identification	number
		LIAM H. HARR					04-	6197960	
Nu	mber a	nd street (or P O box number if n	mail is not delivered to street	t address)		Room/suite	B Telepho	ne number	
_		WINDEMERE CI	RCLE				781	-848-31	87
		own, state, and ZIP code					C If exempt	ion application is p	ending, check here
			02184						
G	Sheck		nitial return	Initial return of a fo	ormer public o	harity	D 1. Forei	gn organizations	s, check here
		=	Final return	Amended return			2. Foreig	n organizations me	eting the 85% test, imputation
ш ,	^hook		Address change	Name change xempt private foundation		_	1		
' '	_	ction 4947(a)(1) nonexemp		Other taxable private founda	ation				tus was terminated
_ <u></u>		arket value of all assets at en		ing method: X Cash	Accr	ual		ection 507(b)(1)	
		Part II, col. (c), line 16)	· · · —	ther (specify)		uui		undation is in a (ection 507(b)(1)	60-month termination
	\$	7.535	. 792 . (Part I, colu	ımn (d) must be on cash l	basis.)		diluci 3	0011011 007 (0)(1)	(b), check here
	art I	Analysis of Revenue and	Expenses	(a) Revenue and	(b) Net in	vestment	(c) A	djusted net	(d) Disbursements
		(The total of amounts in column necessarily equal the amounts	ns (b), (c), and (d) may not in column (a))	expenses per books	inco			ncome	for charitable purposes (cash basis only)
	1	Contributions, gifts, grants,	, etc., received	3,250.	· ·· 		l		
	2	Check X if the foundation is	s not required to attach Sch B			*			
(3	Interest on savings and tempora cash investments	ary	6,248.		6,248.			STATEMENT 1
2013	4	Dividends and interest from	n securities	141,152.	14	1,152.			STATEMENT 2
ಶಾ	5a	Gross rents							
=	b	Net rental income or (loss)							
e <u> </u>	6a	Net gain or (loss) from sale of as		235,619.				· · · · · · · · · · · · · · · · · · ·	
	b	Gross sales price for all assets on line 6a	<u>390,952.</u>					REC	EIVED
~	7	Capital gain net income (from Pa	art IV, line 2)		23	<u>5,619.</u>			
ᆲᅮ	8	Net short-term capital gain						<u>šl nov (</u>	7 2012
Z	9	Income modifications Gross sales less returns						\$1 110 A	1 2013 3
SCANNEL R		and allowances	_					275 275 CS 2	***
<u>ک</u>	1	Less Cost of goods sold	-					<u> </u>	N' A I
,,,	11	Gross profit or (loss) Other income		843,556.	Q A	3,556.		0.	STATEMENT 3
	12	Total. Add lines 1 through	11	1,229,825.		<u>5,536.</u> 6,575.	<u> </u>	0.	SIAIEMENI 3
	13	Compensation of officers, direct		0.	<u> </u>	0,3,3.	1	0.	0.
	14	Other employee salaries an							
	1	Pension plans, employee b	-						
Ses	1	Legal fees					"		
ens	Ь	Accounting fees					-		
Expense	C	Other professional fees							
		Interest							
rati	18	Taxes	STMT 4	32,249.	3	2,249.		0.	0.
ıjst	19	Depreciation and depletion							
<u> </u>	20	Occupancy							
¥	21	Travel, conferences, and m	eetings						_
pue	22	Printing and publications							
Operating and Administrative	23	Other expenses	STMT 5	163,995.	2	7,800.		0.	31,500.
rati	24	Total operating and admir	nistrative						
) De		expenses. Add lines 13 thr	-	196,244.	6	0,049.		0.	31,500.
O	25	Contributions, gifts, grants	=	617,100.				·	617,100.
	26	Total expenses and disbu	rsements.						
		Add lines 24 and 25		813,344.	6	<u>0,049.</u>	ļ	0.	648,600.
	27	Subtract line 26 from line 1	12:						
	1	Excess of revenue over expense		416,481.		<u> </u>			
		Net investment income (##	·		1,16	<u>6,526.</u>	-		
223	<u> </u>	Adjusted net income (if neg	gative, enter -0-)	L.,			L	0.	<u> </u>

<u>F0</u>	m 99	U-PF (2012) WILLIAM H. HARRIS FOUND			19/960 Page 2
P	art	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End of	
=	1 4		(a) Book Value	(b) Book Value	(c) Fair Market Value
		Cash - non-interest-bearing	1 054 452	511 540	F14 F10
	1	Savings and temporary cash investments	1,254,453.	511,749.	511,749.
	3	Accounts receivable			
	١.	Less: allowance for doubtful accounts			
	4	Pledges receivable -			
	_ ا	Less: allowance for doubtful accounts			
		Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons			
	7	Other notes and loans receivable			
		Less: allowance for doubtful accounts			
sts	1 -	Inventories for sale or use		_	
Assets	1	Prepaid expenses and deferred charges			
⋖	10a	Investments - U.S. and state government obligations			
	b	Investments - corporate stock STMT 7	306,215.	314,373.	318,600.
	C	Investments - corporate bonds			
	11	Investments -land, buildings, and equipment basis			
		Less accumulated depreciation	· .		
	12	Investments - mortgage loans			
	13	Investments - other STMT 8	5,513,270.	6,283,298.	6,405,443.
	14	Land, buildings, and equipment basis ▶			
		Less accumulated depreciation		_	
	15	Other assets (describe STATEMENT 9)	0.	300,000.	300,000.
	16	Total assets (to be completed by all filers)	7,073,938.	7,409,420.	7,535,792.
	17	Accounts payable and accrued expenses			
	18	Grants payable			
ģ	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
abi	21	Mortgages and other notes payable			
Ë	1	Other liabilities (describe)			
	23	Total liabilities (add lines 17 through 22)	0.	0.	
_		Foundations that follow SFAS 117, check here			
		and complete lines 24 through 26 and lines 30 and 31.			
es	24	Unrestricted			
anc	25	Temporarily restricted		_	
Bali	1	Permanently restricted			
ᅙ	-"	Foundations that do not follow SFAS 117, check here			
Net Assets or Fund Balances		and complete lines 27 through 31.			
ō	27	Capital stock, trust principal, or current funds	0.	0.	
ets	1	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	- 0.	
ASS	1	Retained earnings, accumulated income, endowment, or other funds	7,073,938.	7,409,420.	
et/	1		7,073,938.		
Ž	30	Total net assets or fund balances	1,0/3,930.	7,409,420.	
		Takal linkillain and an anaka Kundak alaman	7 072 020	7 400 400	
_	131	Total liabilities and net assets/fund balances	7,073,938.	7,409,420.	
P	art	Analysis of Changes in Net Assets or Fund B	alances		
_	Total	not accept or fund halaness at haginning of uses. Dort II column (a) line	30		
1		net assets or fund balances at beginning of year - Part II, column (a), line	ou .		7 072 020
_	-	t agree with end-of-year figure reported on prior year's return)		1	7,073,938.
		amount from Part I, line 27a		2	416,481.
		increases not included in line 2 (itemize)		3	0.
		ines 1, 2, and 3	ann an	## 4 4	7,490,419.
		eases not included in line 2 (itemize)		TEMENT 6 5	80,999.
<u>6</u>	iotal	net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	numn (b), line 30	6	7,409,420.
000					Form 990-PF (2012)

Page 3

	cribe the kind(s) of property sold (e. arehouse; or common stock, 200 sl			(b) How acquire P - Purchase D - Donation	ed (o) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a						-	
b SEE ATTACHED	STATEMENT						
<u> </u>							
<u>d</u>							
<u>e</u>						· - · -	l
(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale			(h) Gain or (los (e) plus (f) minu	
<u>a</u> b				-			
C		1	•				
e 390,952.			155,33	3			235,619.
	ng gain in column (h) and owned by	the foundation			/IV G	ains (Col. (h) ga	
	(j) Adjusted basis		cess of col. (i)	 	col. (k	(), but not less th	an -0-) or
(i) F.M.V. as of 12/31/69	as of 12/31/69		col. (j), if any		Ĺ	osses (from col	. (h))
a							
<u>b</u>				_			
<u>C</u>							
		 	······				025 610
<u>e</u>				_			235,619.
2 Capital gain net income or (net ca	apıtal loss)	er in Part I, line ' 0- in Part I, line	7 7	} 2			235,619.
	ss) as defined in sections 1222(5) a						
If gain, also enter in Part I, line 8,		a (0).		J			
If (loss), enter -0- in Part I, line 8				J 3		N/.	A
If section 4940(d)(2) applies, leave t Was the foundation liable for the sec If "Yes," the foundation does not qua	tion 4942 tax on the distributable a lify under section 4940(e). Do not c	omplete this pa	rt.				Yes X No
	each column for each year; see the	instructions bel	fore making any er				(d)
(a) Base period years Calendar year (or tax year beginni	(b) ing in) Adjusted qualifying di	stributions	Net value of nor	(c) icharitable-use a	ssets	Dıstı (col. (b) d	(d) abution ratio divided by col. (c))
2011	7:	18,366.		6,918,	450.		.103833
2010		15 <u>,531.</u>		6,870,			.118697
2009		28,510.		6,563,			.034818
2008		59,197.	· <u>·</u>	5,972,			.095310
2007		<u>45,000.</u>		6,557,	314.		.113614
2 Total of line 1, column (d)	5					2	.466272
3 Average distribution ratio for the the foundation has been in existe		i on line 2 by 5,	or by the number (or years		3	.093254
4 Enter the net value of noncharitat	ble-use assets for 2012 from Part X	, line 5				4	7,022,652.
5 Multiply line 4 by line 3	•					5	654,890.
6 Enter 1% of net investment incor	ne (1% of Part I, line 27b)					6	11,665.
7 Add lines 5 and 6						7	666,555.
8 Enter qualifying distributions from	m Part XII, line 4					8	648,600.
	n line 7, check the box in Part VI, lin	e 1b, and comp	lete that part using	a 1% tax rate.	'	<u> 1</u>	

at Exempt covariants foundations described in section 4940(0)(2), chick here ▶		990-PF (2012) WILLIAM H. HARRIS FOUNDATION 04- rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948	6197 - see ir			Page 4
Dates to ruling or determination letter: Catach copy of letter if ancessary-see instructions	1a	Exempt operating foundations described in section 4940(d)(2), check here \(\bigcup \) and enter "N/A" on line 1.	T -			
b Domestic Gundelstons that meet the section 4940(c) requirements in Part V, check here □ and enter 1% 1						
of Part I, line 27b 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-) 3 3 23, 331. 4 Subulie A, (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 5 Tax based on investment income. Subtract line 4 from line 3.1 zero or less, enter -0- 5 Credits/Payments: 2 2012 estimated tax payments and 2011 overpayment credited to 2012 6 Exempt foreign organizations - tax withheld at source 6 Tax paid with application for extension of time to the (form 8868) 6 Exempt foreign organizations - tax withheld at source 6 Tax paid with application for extension of time to the (form 8868) 7 Total credits and payments. Add lines 6a through 6d 8 Enter any penalty for underpayment of estimated tax. Check here [X] if Form 2220 is attached 9 Tax due. If the total of lines 5 and 6 is more than line 2, enter amount ower plant 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 10 Overpayment. If line 7 is more than the total of lines 5 and 6, enter the amount overpaid 10 Overpayment. If line 7 is more than the total of lines 5 and 5 enter the amount overpaid 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 11 Overpayment. If line 7 is more than the total children of the form 100 of the 100 o	b			2	3,3	31.
2 Tax under section 511 (domestic section 4947(a)(1) trusts and tixable foundations only. Others enter -0-) 2 Add lines 1 and a 2 3 3,331. 4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 5 Tax based on investment income. Subtract line 4 from line 3. It zero or less, enter -0- 5 Credits/Payments; a 2012 estimated tax payments and 2011 overpayment credited to 2012 6 1 11,200. 6		of Part I, line 27b				_
3 Add lines 1 and 2 Subtitla K (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter-0-) Tax based on investment income. Subtract line 4 from line 3. If zero or less, orier -0- Tax based on investment income. Subtract line 4 from line 3. If zero or less, orier -0- Tax based on investment income. Subtract line 4 from line 3. If zero or less, orier -0- Tax based on investment income. Subtract line 4 from line 3. If zero or less, orier -0- Expand with appellanch for extension of time to the (Form 8668) Expand with appellanch for extension of time to the (Form 8668) Expand with appellanch for extension of time to the (Form 8668) Expand with appellanch for extension of time to the (Form 8668) Expand with appellanch for extension of time to the (Form 8668) Expand with appellanch for extension of time to the (Form 8668) Expand with appellanch for extension of the time to the (Form 8668) Expand with appellanch for extension of the time to the (Form 8668) Expand with appellanch for extension of the time to the (Form 8668) Expand with appellanch for extension of the time to the (Form 8668) Expand with appellanch for extension of the time to the (Form 8668) Expand with appellanch for extension of the time to the (Form 8668) Expand with appellanch for extension of the time to the (Form 8668) Expand with appellanch for extension of the time to the (Form 8668) Expand with application of the standard time amount of the 10 to the Control of the 20 to the 20 to the Control of the 20 to the 20 to the 10 to the 20 to the 20 to the 10 to the 20 to the 20 to the 20 to the 10 to the 20 t	C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).				
4 0.0. 1 Tax based on investment income. Subtract line 4 from line 3. if zero or less, enter -0- 5 23,331. 6 Credist/Payments: a 2012 estimated tax payments and 2011 overpayment credited to 2012 6 Evernit froreign organizations: -bax withhold at source 6 Tax based on investment income. Subtract line 4 from 18069) 6 Evernit froreign organizations: -bax withhold at source 6 Tax based on the programments and 2011 overpayment credited to 2012 6 Evernit froreign organizations: -bax withhold at source 6 Tax based on the programments and 2011 overpayment credited to 2012 6 Evernit froreign organizations: -bax withhold at source 6 Tax based on the programments and 2011 overpayment credited to 2012 6 Evernit froreign organizations: -bax withhold at source 6 Tax based on the programments and 2011 overpayment credited to 2012 6 Evernit froreign organizations: -bax withhold at Source 6 Tax based on the programments and 2011 overpayment credited to 2012 6 Evernit froreign organizations: -bax withhold at Source 7 Total credits and payments. Add lines 5 at foreign to 2012 8 Evernit froreign organizations: -bax withhold at Source 8 Total credits and payments. Add lines 5 at Tax based on the programments. Add lines 5 at Tax based on the programments. Add lines 5 and 8 is more than 100 of the 2019 overpayment. If line 7 is more than the total of lines 5 and 8 is more than 100 overpayment. If line 7 is more than 100 over	2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)				0.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- 6 Credits/Pyments: a 2012 estimated tax payments and 2011 overpayment credited to 2012 6 Exempt foreign organizations - tax withheld at source 7 Tax due, 1 Am application for recisions of time to the (Form 8868) 6 Backup withholding erroneously withheld 7 Total credits and payments. Add fines fia through 6d 7 Total credits and payments. Add fines fia through 6d 8 Entler any penalty for underpayment of estimated fax. Check here	3	Add lines 1 and 2	<u></u>	2	3,3	31.
6 Credito-Payments: a 2012 estimated tax payments and 2011 overpayment credited to 2012 b Exempt foreign organizations - tax withheld at source c Tax pad with application for extension of time to the (Form 8868) 6 c 16,000. 6 d 17 7 Total credits and payments. Add lines 5a through 60 8 Enter any penalty for underspayment of estimated tax. Check here ☑ if Form 2220 is attached 8 10.9. 9 Tax due, If the total of lines 5 and 8 is more than line 7, enter amount owed 10 Overpayment. If line i's more than the total of lines 5 and 8, enter the amount overpaid 10 Overpayment. If line i's more than the total of lines 5 and 8, enter the amount overpaid 11 0, 2, 760. Part VII-A Statements Regarding Activities 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? 1b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)? 1b If the answer is "Yes" to 1 or 11b, attach a detailed discorption of the activities and copies of any materials published or distributed by the foundation in cornection with the activities. 1c Did the foundation file Form 11aPoPLO. If or this year? 2 If the reimbursement (fall any) of tax on political expenditures (section 4955) imposed during the year. 2 If On the foundation in Eyeman 11aPoPLO in the year? 3 If Yes, "attach a detailed description of the activities. 3 Is as the foundation made any changes, not previously propried to the IRS; in its governing instrument, articles of incorporation, or bylavis, or other similar instruments? If Yes, "attach a conformed copy of the changes 4 Ib If Yes, "attach a detailed description of the activities. 4 Is the foundation made any changes, not previously reported to the IRS; in its governing instrument,	4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)				
a 2012 estimated tax payments and 2011 overpayment credited to 2012 b Exempt foreign organizations - tax withheld at source c [ax paid with application for extension of time to fite (Form 8868) d Backup withholding erroneously withheld 7 Total credits and payments. Add thes Sa through 66 8 Enter any penalty for underpayment of estimated tax. Check here [X] if Form 2220 is attached 9 Tax due. If the total of lines S and 8 is more than line 7, enter amount owed 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount owed 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount owerpaid 11 Enter the amount of line 10 to be: Oredited to 2013 estimated tax. 12 During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campagn? 12 During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campagn? 13 During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campagn? 14 During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campagn? 15 During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campagn? 15 During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campagn? 15 During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campagn? 16 Line answer is "Yes" to 1 a or 10, attach a detailed description of the activities. 16 During the tax year, did the foundation intervene in any political cam	5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		2	3,3	<u>31.</u>
b Exempl foreign organizations - fax withheld at source of Tax paid with application for extension of time to file (Form 8868) d Backup withholding erroneously withheld 7 Total credits and payments. Add lines 6a through 6d 7 Total credits and payments. Add lines 6a through 6d 8 1.09. 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 9 Total credits and payment of estimated tax. Check here \[\begin{align*} al						
c Tax paid with application for extension of time to file (Form 8868) d Backup withholding groneously withhold 8 Enter any penalty for underpayment of estimated tax. Check here Start form 2220 is attached 8 109. 9 Tax due. If the total of files 5 and 8 is more than her 7, enter amount owed 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount owed 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount ower 11 Lenter the amount of line 10 to be Credited to 2013 estimated tax. > 3,760. Refunded 11 1 0. Part VII-A Statements Regarding Activities 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? 1b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)? 1b If the answer is "Yes" to Ta 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. 1c Did the foundation. In the state of the state of the activities and copies of any materials published or distributed by the foundation. In connection with the activities. 1c Line 1	a	2012 estimated tax payments and 2011 overpayment credited to 2012 6a 11,200.				
d Backup withholding erroneously withheld 7 Total credits and payments. Add lines 6a through 6d 8 Enter any penalty for under payment of estimated tax. Check here ☑ if Form 2220 is attached 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 10 Overgayment. If line 7 is more than the total of lines 5 and 8, instert the amount overpaid 11 Enter the amount of line 10 to be: Credited to 2013 estimated tax ▶ 3, 760. Refunded ▶ 11 0. Part VII-A Statements Regarding Activities 1 a During the tax year, did the foundation attempt to mitience any national, state, or local legislation or did it participate or intervene in any political campaign? 1 bit of spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)? 1 If the answer is Yes' to 1 aor 1b, attach a detailed description of the activities and copies of any materials published or distributed by the Foundation in connection with the activities. 2 bit of the foundation in Expendition of the activities and copies of any materials published or distributed by the Foundation in Expendition of the activities. 3 Has the foundation in Expendition of the activities. 4 If Yes, attach a detailed description of the activities. 5 Lefter the rembursement (if any) and by the foundation during the year for political expenditure tax imposed on foundation managers. ▶ \$ 0. 2 (2) On foundation managers. ▶ \$ 0. 2 (3) On foundation managers. ▶ \$ 0. 4 (4) On the foundation made any changes, not previously reported to the IRS? If Yes, attach a detailed description of the activities. 4 a Did the foundation have unrelated business gross income of \$1,000 or more during the year? If Yes, attach the statement required by General Instruction 7 the year? If Yes, a statech the statement required by General Instruction 7 the year and the required to the statement required by General Instruction 7 the Yes, attach explanat		· · · · · · · · · · · · · · · · · · ·				
8 Enter any penalty for underpayment of estimated tax. Check here ☑ if Form 2220 is attached 9 1ax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 11						
8 Enter any penalty for underpayment of estimated tax. Check here				_		
S Tax Que. If the total of lines 5 and 8 is more than the total of lines 5 and 8, enter the amount overpaid 10 3,760.			<u> </u>	2	<u>7,2</u>	00.
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 2013 estimated tax ▶ 3, 760 . Refunded ▶ 11 0. Part VII-A Statements Regarding Activities 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? 1b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)? 1b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)? 1b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)? 1b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)? 1c Did it 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 on connection with the activities and copies of any materials published or distributed by the foundation in the interview seed on foundation in the interview of the interview seed of the interview and copies of any materials published or distribution. ▶ \$ 0. (2) On foundation managers. ▶ \$ 0. • Enter the rembursement (if any) paid by the foundation during the year? 1c					1	<u>09.</u>
11 Eiter the amount of line 10 to be: Credited to 2013 estimated tax ▶ 3 , 76 0 . Refunded ▶ 11		to the control of the	 			
Part VIII-A Statements Regarding Activities 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? 1a		· · ·			<u>3,7</u>	
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? b Did it spend more than \$100 during the year (either directly) or indirectly) for political purposes (see instructions for definition)? if the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities. c Did the foundation file Form 1120-PDL for this year? d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. ▶ \$ 0 . (2) On foundation managers. ▶ \$ 0 . e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ▶ \$ 0 . 2 Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities. 3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes 4 Did the foundation have unrelated business gross income of \$1,000 or more during the year? b If "Yes," attach a detailed description of the view year? b If "Yes," attach a titled a tax return on Form 990-T for this year? If "Yes," attach the statement required by General Instruction T 6 Are the requirements of section \$50(6) (relating to sections 4941 through 4945) satisfied either: • 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, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? If "Yes," complete Part II, col (c), and Part XV 8						0.
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Ba Enter the states to which the foundation reports or with which it is registered (see instructions) ▶	7			7	<u> </u>	
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Form 990-PF (2012) WILLIAM H. HARRIS FOUNDA			04-61979	60 Page 6
Part VII-B Statements Regarding Activities for Which	Form 4720 May Be I	Required (contin	ued)	
5a During the year did the foundation pay or incur any amount to:				
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	n 4945(e))?	Y	es X No	
(2) Influence the outcome of any specific public election (see section 4955); of	or to carry on, directly or indir			
any voter registration drive?			es X No	
(3) Provide a grant to an individual for travel, study, or other similar purposes		Y	es X No	
(4) Provide a grant to an organization other than a charitable, etc., organizatio	n described in section			
509(a)(1), (2), or (3), or section 4940(d)(2)?		Ye	es 🗓 No	
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or	for		
the prevention of cruelty to children or animals?		Y	es X No	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify uni	der the exceptions described	ın Regulations		
section 53.4945 or in a current notice regarding disaster assistance (see instru	ictions)?		N/A	5b
Organizations relying on a current notice regarding disaster assistance check h	nere			
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption f	rom the tax because it mainta	ıned		
expenditure responsibility for the grant?	Ŋ	I/A 🔲 Y	es 🔲 No	
If "Yes," attach the statement required by Regulations section 53.494	5-5(d)			
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on			
a personal benefit contract?			es X No	İ
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?		(Sb 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	shelter transaction?	Ye	es X No	
b If "Yes," did the foundation receive any proceeds or have any net income attribi	utable to the transaction?		N/A	7b
Part VIII Information About Officers, Directors, Trust	ees, Foundation Ma	nagers, Highly	<u></u>	
1 List all officers, directors, trustees, foundation managers and their				
() News and address	(b) Title, and average hours per week devoted	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense
(a) Name and address	to position	(If not paid, enter -0-)	and deferred compensation	account, other allowances
WILLIAM H. HARRIS, M.D.	TRUSTEE			·
665 CONCORD AVE., BELMONT, MA 02478				
	0.00	0.	0.	0.
JOHANNA H. HARRIS	TRUSTEE			-
665 CONCORD AVE., BELMONT, MA 02478				
	0.00	0.	0.	0.
2 Compensation of five highest-paid employees (other than those inc	luded on line 1). If none,	enter "NONE."		
() No	(b) Title, and average		(d) Contributions to employee benefit plans	(e) Expense
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	and deferred compensation	account, other allowances
NONE	, , , , , , , , , , , , , , , , , , , ,			
		<u> </u>		
	1			
		<u> </u>		
	1			
				
	1			
Total number of other employees paid over \$50,000		J.	<u> </u>	
Total number of outer employees paid user pourous	····		Form	990-PF (2012)
			FUIIII	(2012)

Form 990-PF (2012) WILLIAM H. HARRIS FOUNDATION	04-61	L 97960 Page 7
Part VIII Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)	on Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter "	NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
	<u></u>	
Total number of others receiving over \$50,000 for professional services		▶ 0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical number of organizations and other beneficiaries served, conferences convened, research papers product	Il information such as the ed, etc.	Expenses
1		
SEE STATEMENT 10		0.
2 AND SUPPORT OF HIGHER EDUCATION, CONSERVATION	AND	
ENVIRONMENTAL ORGANIZATIONS.		0
3		0.
·		
4		
Part IV-R Common of Drawers Polated Investments		
Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the tax year on lin	es 1 and 2.	Amount
1 N/A	7 31.0 21	- Timodik
2		
All other program-related investments. See instructions.		
3		
Total Add been 1 through 2		

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Form **990-PF** (2012)

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	ndation	s, see instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
а	Average monthly fair market value of securities	1a	6,246,495.
Ь	Average of monthly cash balances	1b	6,246,495. 883,101.
C	Fair market value of all other assets	1c	
d		1d	7,129,596.
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	7,129,596.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	106,944.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	7,022,652.
6	Minimum investment return. Enter 5% of line 5	6	351,133.
P	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.)	ıd certai	n
1	Minimum investment return from Part X, line 6	1	351,133.
2a	Tax on investment income for 2012 from Part VI, line 5 23,331.		
b	Income tax for 2012. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	23,331.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	327,802.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	327,802.
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	327,802.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	648,600.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	648,600.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	income. Enter 1% of Part I, line 27b	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	648,600.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation (qualifies	for the section

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Page 9

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2011	(c) 2011	(d) 2012
Distributable amount for 2012 from Part XI.	,,	<u> </u>		
line 7				327,802.
2 Undistributed income, if any, as of the end of 2012				
a Enter amount for 2011 only			0.	
b Total for prior years:		·		
,,,		0.		
3 Excess distributions carryover, if any, to 2012:				
a From 2007 434 , 089 .				
b From 2008 283,461.				
c From 2009				
d From 2010 493,170.				
e From 2011 394,731.				
f Total of lines 3a through e	1,605,451.			
4 Qualifying distributions for 2012 from				
Part XII, line 4: ► \$ 648,600.				
a Applied to 2011, but not more than line 2a			0.	
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			207 200
d Applied to 2012 distributable amount	200 700			327,802.
e Remaining amount distributed out of corpus	320,798.			
5 Excess distributions carryover applied to 2012 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	1,926,249.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2011. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2012. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2013				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2007				
not applied on line 5 or line 7	434,089.	·		
9 Excess distributions carryover to 2013				
Subtract lines 7 and 8 from line 6a	1,492,160.			
10 Analysis of line 9:				
a Excess from 2008 283, 461.				
b Excess from 2009				
c Excess from 2010 493,170.				
d Excess from 2011 394,731.				
e Excess from 2012 320,798.				Form 990-PF (2012)

Part XIV Private Operating F	H. HARRIS		II A guartian (I)	, 04-61	9/960 Page 10
				N/A	
1 a If the foundation has received a ruling of					
foundation, and the ruling is effective fo			. ▶ └──	40.40(.)(0)	40()(5)
b Check box to indicate whether the found		ig toundation described		4942(j)(3) or49	42(j)(5)
2 a Enter the lesser of the adjusted net	Tax year (a) 2012	(b) 2011	Prior 3 years (c) 2010	(d) 2009	(e) Total
income from Part I or the minimum	(a) 2012	(D) 2011	(6) 2010	(u) 2003	(e) rotar
investment return from Part X for					
each year listed b 85% of line 2a					
c Qualifying distributions from Part XII,	_		-		
line 4 for each year listed					
d Amounts included in line 2c not	 				
used directly for active conduct of					
exempt activities					
e Qualifying distributions made directly					
for active conduct of exempt activities.					
Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the			 		
alternative test relied upon:					
a "Assets" alternative test - enter:(1) Value of all assets					
(2) Value of assets qualifying					
under section 4942(j)(3)(B)(i) b "Endowment" alternative test - enter					
2/3 of minimum investment return					
shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter:					
(1) Total support other than gross					
investment income (interest,					
dividends, rents, payments on securities loans (section					
512(a)(5)), or royalties)			<u> </u>		
(2) Support from general public					
and 5 or more exempt organizations as provided in					
section 4942(j)(3)(B)(iii)		<u></u>			
(3) Largest amount of support from					
an exempt organization					
(4) Gross investment income	<u> </u>			1 105 000	
Part XV Supplementary Info			if the foundation	nad \$5,000 or mo	re in assets
		uctions.)			
1 Information Regarding Foundation	•	than 100/ of the total con	tributions received by the	formulation hafara the along	
a List any managers of the foundation wh year (but only if they have contributed r			and another received by the	Touridation before the clos	e of ally tax
SEE STATEMENT 11		-			
b List any managers of the foundation who other entity) of which the foundation ha			(or an equally large porte	on of the ownership of a pa	irtnership or
NONE					
2 Information Regarding Contribut	ion, Grant, Gift, Loan,	Scholarship, etc., P	rograms:		
Check here 🕨 🗓 if the foundation of					
the foundation makes gifts, grants, etc.	· - -			omplete items 2a, b, c, and	d.
a The name, address, and telephone num	ber or e-mail of the perso	n to whom applications	should be addressed:		
SEE STATEMENT 12					
b The form in which applications should t	e submitted and informat	ion and materials they s	should include:		
c Any submission deadlines:					
d Any restrictions or limitations on const	e cuch ac hu geographic	Il argae charitable fields	kinds of institutions	other factors:	
d Any restrictions or limitations on award	s, such as by geographica	n arcas, charnable nelus	, หแบร บา เหรินเนนิบกร, 0f (omer laciols.	

Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Purpose of grant or show any relationship to Foundation Amount any foundation manager status of contribution Name and address (home or business) or substantial contributor recipient a Paid during the year BRYN MAWR COLLEGE EXEMPT EDUCATION LISTTOTAL 40000 30,000. FARM NECK FOUNDATION, INC EXEMPT CONSERVATION 1,000. HARRIS ORTHO BIOMECH + BIOMAT LAB EXEMPT RESEARCH STUDIES 100,000. HAVERFORD COLLEGE EXEMPT EDUCATION LISTTOTAL 0 275,000. MANOMET N/A EXEMPT CONSERVATION LISTTOTAL 0 50,000. SEE CONTINUATION SHEET(S) Total ▶ 3a 617,100. b Approved for future payment NONE Total

Part XVI-A **Analysis of Income-Producing Activities**

Enter gross amounts unless otherwise indicated. Unrelated business income		ed by section 512, 513, or 514	(e)	
1 Program service revenue: (a) Business code Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income	
a				
b				
c				
d				
e	<u> </u>		 -	
f .	1	<u> </u>		
g Fees and contracts from government agencies				
2 Membership dues and assessments				
3 Interest on savings and temporary cash				
investments	14	6,248.	6.248.	
4 Dividends and interest from securities	14	141,152.	6,248. 141,152.	
5 Net rental income or (loss) from real estate:				
a Debt-financed property				
b Not debt-financed property				
6 Net rental income or (loss) from personal				
property				
7 Other investment income	14	843,556.	843,556.	
8 Gain or (loss) from sales of assets other	_	010/3301	013/3301	
than inventory	18	235,619.	235,619.	
9 Net income or (loss) from special events		200,020	203,0231	
10 Gross profit or (loss) from sales of inventory				
11 Other revenue:				
a				
b				
C				
d				
e	: -			
12 Subtotal. Add columns (b), (d), and (e)	0.	1,226,575.	1,226,575.	
13 Total Add line 12, columns (b), (d), and (e)		13	2,453,150.	
(See worksheet in line 13 instructions to verify calculations.)				
Part XVI-B Relationship of Activities to the Accomplishment	of Exempt	Purposes		
	-	<u>-</u>		
Line No. Explain below how each activity for which income is reported in column (e) of Pai the foundation's exempt purposes (other than by providing funds for such purpo		ted importantly to the accomp	lishment of	
the foundation's exempt purposes (other than by providing funds for such purpo	JSES).	····		
			<u>•</u>	
				
				
			-	
		-		
				
		·		
	 -			
		. <u>-</u>		
				
223621 12-05-12			Form 990-PF (2012)	

Part			AM H. HAI		UNDATION and Transactions	and Relations		6197960 ocharitabl		ige 13
Part	<u> </u>	Exempt Organ		nsiers 10 a	and transactions	and Relations	nips with Noi	ncnaritable	B	
1 Dic	the org	ganization directly or indi	rectly engage in any	y of the followin	ig with any other organizat	ion described in sect	ion 501(c) of		Yes	No
					27, relating to political orga	ınızatıons?				
		from the reporting found	ation to a noncharit	able exempt or	ganization of:					
	Cash							1a(1)		_X_
	Other							1a(2)	-	X
		sactions:						41.44		3.7
		of assets to a noncharita						1b(1)		X
		ases of assets from a no	=	organization			-	1b(2)		X
		l of facilities, equipment, oursement arrangements						1b(3)		X
		or loan guarantees	,					1b(4) 1b(5)		X
		rmance of services or me	emhershin or fundra	aisina salicitatia	ene			1b(6)		X
• •		facilities, equipment, ma	·	•				10,07		X
			- :		edule. Column (b) should a	llways show the fair n	narket value of the o		sets.	
				-	ed less than fair market va		-		,	
) the value of the goods,				•	0 0	•		
(a) Line r	0	(b) Amount involved	(c) Name o	of noncharitable	e exempt organization	(d) Description	of transfers, transactio	ns, and sharing a	rangeme	nts
				N/A						
					·					
-										
	_		 							
			<u> </u>					_		
	-		ļ							
	+		 							
	+									
					·					
	+		+							
	+-									
2a Is 1	he four	idation directly or indirec	tly affiliated with, or	r related to, one	or more tax-exempt orgai	nizations described				
		501(c) of the Code (othe	-		· · ·			Yes	X	No
b_lf"	Yes," co	mplete the following sch	redule.							
		(a) Name of org	ganızatıon		(b) Type of organization		(c) Description of re	lationship		
		N/A								
		_								
		 								
	Linder	nanaltina of narring I declare	that I have avamined to	hio roturn, includir	g accompanying schedules an	d statements, and to the	best of my knowledge			
Sian					n taxpayer) is based on all info			May the IRS return with th	discuss t	ihis er
Sign Here		1/Ktan	et de		11/2/13	tono	40B	shown below	(see ins	tr)?
	Sign	ature of officer or trustee	P		Date		160	_ LX Yes	· L	⊔ No
	Joign	Print/Type preparer's n		Preparer's s		Date	Check If	PTIN		
		RICHARD D.			•		self- employed			
Paid		BRUHMULLER		RICHAR	D D. BRUHMU	10/29/13	. ,	P00301	538	
Prep	arer	Firm's name ► WAL				,_ ,_ , , , , , , , ,	Firm's EIN ▶ 0			
Use				/	- · - ·					
Firm's address ► 501 PROVIDENCE HIGHWAY										

223622 12-05-12

NORWOOD, MA 02062

Phone no.

(617) 447-2700

Form **990-PF** (2012)

Part IV Capital Gains and Lo	sses for Tax on Investment Income				
(a) List and 2-story bi	describe the kind(s) of property soluck warehouse; or common stock, 2	ld, e.g., real estate, 00 shs. MLC Co.	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a VANGUARD ST IN	VEST GRADE		P	12/21/09	04/09/12
b FLAG VENTURES	II K-1		P		
c FLAG VENTURES	III K-1		P		
d FLAG VENTURES	III K-1		P		
e FLAG VENTURES	IV K-1		P		
f FLAG VENTURES	IV K-1		P		
g BARLOW FUNDAME	NTAL MGRS K-1		P		
h BARLOW FUNDAME			P		
CAPITAL GAINS	DIVIDENDS				
_k					
_1					
_m					
n					
0					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) (e) p	Gain or (loss) lus (f) minus (g)	
a 150,000.		148,510.	-		1,490.
b		6,583.			-6,583.
С		240.			-240.
d 2,873.					<u>2,873.</u>
e 1,249.			· · · · · · · · · · · · · · · · · · ·		1,249.
f 98,283.					<u>98,283.</u>
g 15,664.	-				15,664.
h 98,148.					98,148.
24,735.					24,735.
J					
<u>k</u>					
<u> </u>					·
m					
<u>n</u>				•	
Complete only for assets shown	ng gain in column (h) and owned by	the foundation on 12/31/60	(I) L oo	/fuerr est /b\\	
Complete only for assets shown	(i) Adjusted basis	(k) Excess of col. (i)		ses (from col. (h)) of col. (h) gain ove	
(i) F.M.V. as of 12/31/69	as of 12/31/69	over col. (j), if any	but n	ot less than "-0-")	
<u>a</u>					1,490.
b					<u>-6,583.</u>
<u>c</u>					<u>-240.</u>
d					2,873.
<u>e</u>					1,249.
<u>f</u>					98,283.
<u>g</u>					15,664.
<u>h</u>	· · ·	-			98,148.
<u> </u>					24,735.
<u> </u>					
<u>k</u>			-		
<u> </u>			-		
<u>m</u>					
<u>n</u>				***	
0					
2 Capital gain net income or (net ca		,	2		235,619.
	ss) as defined in sections 1222(5) ar	nd (6):			
If gain, also enter in Part I, line 8, If (loss), enter "-0-" in Part I, line 8		J	3	N/A	

Part XV Supplementary Information **Grants and Contributions Paid During the Year (Continuation)** If recipient is an individual, show any relationship to any foundation manager or substantial contributor Foundation Purpose of grant or status of contribution Amount Name and address (home or business) recipient MARTHA'S VINEYARD HOSPITAL EXEMPT RESEARCH STUDIES 250. MASS AUDUBON SOCIETY EXEMPT CONSERVATION LISTTOTAL 0 1,250. MCLEAN HOSPITAL EXEMPT RESEARCH STUDIES 5,000. MERCESBURG ACADEMY EXEMPT EDUCATION 3,000. MISC CONTRIBUTIONS EXEMPT 4,600. MORGAN MEMORIAL EXEMPT 1,000. MUSEUM OF SCIENCE EXEMPT RESEARCH STUDIES 1,000. EXEMPT RESEARCH STUDIES ORHTOPAEDIC RESEARCH + EDUCATION FDN 1,000. OWL RESEARCH INSTITUTE EXEMPT CONSERVATION 10,000. PLANNED PARENTHOOD FEDERATION EXEMPT 1,500. Total from continuation sheets 161,100.

Part XV Supplementary Information				
3 Grants and Contributions Paid During the Ye				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	status of recipient	Contribution	Amount
RALPH LOWELL SOCIETY		EXEMPT	CONSERVATION	
				3,000.
THE NATURE CONSERVANCY IN MASSACHUSETTS		EXEMPT	CONSERVATION LISTTOTAL 0	120,000.
			, , , , , , , , , , , , , , , , , , , ,	120,000.
THE TRUSEES OF RESERVATIONS		EXEMPT	10/20/10	
			DICK - 10/30/12	
			11:04AM WORKSHEET	F00
			PRIVATE FOUNDATION	500.
BETHEL WOODS CENTER FOR THE ARTS		EXEMPT		
				3,000.
MUSEUM OF FINE ARTS		EXEMPT		3,000,
				3,000,
FRIENDS OF SENGEKONTAKET		EXEMPT		
				1,000.
HABITAT FOR HUMANITY		EXEMPT		1,000.
				1,000.
NATIONAL WILDLIFE FUND		EXEMPT		
				1,000.
		-		
Total from continuation sheets				

FORM 990-PF INTEREST ON SAVINGS A	ND TEMPORARY C	ASH :	INVESTMENTS	STATEMENT	1
SOURCE				AMOUNT	
BANK OF AMERICA			-	1	08.
FIDELITY				_	5.
FLAG VENTURE II FLAG VENTURE III					61. 59.
FLAG VENTURE IV				1,0	
FUNDAMENTAL MANAGERS				3,4	
IRS					11.
SOVEREIGN BANK TD BANK					84. 64.
TOTAL TO FORM 990-PF, PART I, LINE	3, COLUMN A		=	6,2	48.
FORM 990-PF DIVIDENDS AND	INTEREST FROM	SEC	JRITIES	STATEMENT	2
SOURCE	GROSS AMOUNT		PITAL GAINS DIVIDENDS	COLUMN (A AMOUNT	.)
BLACKROCK ALL CAP ENERGY	91.		0.		91.
FIDELITY	146,589.		24,735.	121,8	
FLAG VENTURE II	612.		0.		12.
FLAG VENTURE III	195.		0.		95.
FLAG VENTURE IV FUNDAMENTAL MGRS	2,646. 15,732.		0. 0.	2,6 15,7	
VANGUARD MMR PRIME	22.		ő.		22.
TOTAL TO FM 990-PF, PART I, LN 4	165,887.		24,735.	141,1	52.
FORM 990-PF	THER INCOME			STATEMENT	3
	(A)		(B)	(C)	
DESCRIPTION			NET INVEST- MENT INCOME		
FLAG III K-1 OTHER INCOME		1.	1	•	0.
PARTNERS HEALTHCARE SYS - ROYALTIE	•		839,496		0.
FLAG IV K-1 OTHER INCOME FUNDAMENTAL MANAGERS K-1 OTHER	2,!	589.	2,589	•	0.
INCOME	1,	454.	1,454	•	0.
FLAG II- K-1- OTHER INCOME		16.	16	•	0.
TOTAL TO FORM 990-PF, PART I, LINE	- 11		843,556	-	0.

FORM 990-PF	TAX	ES	STATEMENT 4		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
FOREIGN TAXES PAID STATE ANNUAL REPORT FEDERAL TAX PAYMENTS	1,832. 250. 30,167.	1,832. 250. 30,167.	0. 0. 0.	0. 0. 0.	
TO FORM 990-PF, PG 1, LN 18	32,249.	32,249.	0.	0.	
FORM 990-PF	OTHER EXPENSES		ST	ATEMENT 5	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
INVESTMENT FEES BOOKKEEPING OFFICE EXPENSE INSURANCE	30,876. 50,000. 271. 391.	25,000. 0. 0.	0. 0. 0.	0. 25,000. 0. 0.	
PORTFOLIO DEDUCTIONS - FLAG VENTURE PARTNERS II PORTFOLIO DEDUCTIONS - FLAG VENTURES IV	1,203. 13,730.	0.	0.	0.	
PORTFOLIO DEDUCTIONS - FLAG VENTURE PARTNERS III OTHER DEDUCTIONS -	3,646.	0.	0.	0.	
FUNDAMENTAL INVESTMENT INTEREST -	41,057.	0.	0.	0.	
FUNDAMENTAL MANAGERS FUND, LP TAX PREPARATION HONARAIUM	13,521. 4,300. 5,000.	0. 2,800. 0.	0. 0. 0.	0. 1,500. 5,000.	

163,995.

27,800.

0.

31,500.

TO FORM 990-PF, PG 1, LN 23

			-
FORM 990-PF OTHER DECREASES IN NI	ET ASSETS OR F	UND BALANCES	STATEMENT 6
DESCRIPTION			AMOUNT
UNREALIZED GAINS/LOSSES ON PARTNERSI NONDEDUCTIBLES FROM K-1S	HIP INVESTMENT	rs	80,980.
TOTAL TO FORM 990-PF, PART III, LINI	E 5		80,999.
FORM 990-PF CORI	PORATE STOCK		STATEMENT 7
DESCRIPTION	"	BOOK VALUE	FAIR MARKET VALUE
VANGUARD INTERNATIONAL FUND		314,373.	318,600.
TOTAL TO FORM 990-PF, PART II, LINE	318,600.		
FORM 990-PF OTHER	R INVESTMENTS		STATEMENT 8
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
FLAG VENTURE PARTNERS II FLAG VENTURE PARTNERS IV FUNDAMENTAL MANAGERS FUND GUGGENHEIM RUSSELL TOP 50 BLACKROCK ALL CAP GLOBAL VANGUARD BD INDEX FD INTERMED TAP FUND FIDELITY DIVERSIFIED INT'L VANGUARD SHORT TERM INV GRADE VANGUARD BD INDEX FD INTERMED DOUBLELINE TOTAL RETURN BOND FD THE FX STRATERGY FUND CLASS I JOHN HANCOCK GL ABSO RETURN STRATS CL I	FMV FMV FMV FMV FMV FMV FMV FMV FMV FMV	182,248. 117,051. 540,170. 1,089,731. 849,971. 385,379. 349,429. 365,301. 290,848. 506,486. 677,135. 522,788. 203,995.	182,248. 117,051. 540,170. 1,089,731. 908,181. 360,412. 414,775. 315,041. 315,887. 514,342. 726,753. 523,745. 194,949.
TOTAL TO FORM 990-PF, PART II, LINE	13	6,283,298.	6,405,443.

FORM 990-PF	OTHER ASSETS		STATEMENT 9
DESCRIPTION	BEGINNING OF YR BOOK VALUE	END OF YEAR BOOK VALUE	FAIR MARKET VALUE
DISTRIBUTION FROM BARLOW IN TRANSIT	0.	300,000.	300,000.
TO FORM 990-PF, PART II, LINE 15	0.	300,000.	300,000.
ACTIVITY ONE SUPPORT OF ORTHOPAEDIC BIOMECHANI RESEARCH AT THE MASS. GENERAL HOS NATIONAL SEMINARS AND CONFERENCES	PITAL, PARTICIPA	ATION IN	
PAPERS			EXPENSES
TO FORM 990-PF, PART IX-A, LINE 1			0.

PART XV - LINE 1A

LIST OF FOUNDATION MANAGERS

NAME OF MANAGER

FORM 990-PF

WILLIAM H. HARRIS, M.D. JOHANNA H. HARRIS

STATEMENT

11

FORM 990-PF GRANT APPLICATION SUBMISSION INFORMATION STATEMENT 12 PART XV, LINES 2A THROUGH 2D

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

SEE NOTE BELOW

FORM AND CONTENT OF APPLICATIONS

SEE NOTE BELOW

ANY SUBMISSION DEADLINES

NONE

RESTRICTIONS AND LIMITATIONS ON AWARDS

THE FOUNDATION GENERALLY MAKES CONTRIBUTIONS IN SUPPORT OF EDUCATION, CONSERVATION AND MEDICAL RESEARCH, CHOSEN BY THE TRUSTEES PRESELECTED CHARITABLE ORGANIZATIONS.

Form **8868**

(Rev. January 2013) 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.

eful 5.2.13

OMB No. 1545-1709

If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (en page 2 of this form) Do not complete Part II unless you have already been granted an automatic 3-month extension on a providing file Form 8868 in Composition (Page 2) (and the China) (Page 2) (but an electronically file Form 8868 in China (Page 2) (but an electronically file Form 8868 in China (Page 2) (but an electronically file Form 8868 in China (Page 2) (but an electronically file Form 8868 in China (Page 2) (but an electronic filing of the form 99.0) are an additional for automatic 3-month electronic filing of the form 1870, Information Return for Transfers Associated With Cartain 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, we way a spowfile and click or a -file for Chardness & Nanprodiffs. Part I	• If you	are filing for an Automatic 3-Month Extension, complet	te only Pa	rt I and check this box		•	X
Do not complete Part Il unifess you have akeady been grained an automatic 3-month extension on a proviously filed Form 8888. Electronic filing 6-filed, You can electronically file form 8888 from 890 from 8888 from 890 from 8888 from 890 from 8888 from 890 from 89	-				this form).		
Electronic filing (#-fille), You can electronically file Form 8888 if you need a 3-month automatic streams in 6 (if worths for a corporation required to file of months for a corporation 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 IRBs on page from 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRBs on page from 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRBs on page from 8870 and compilete Part I only A order corporations (including 1120-C filers), partnerships, RBMICS, and trusts must use Form 7004 to request an extension of time to file income lax returns. A other corporations (including 1120-C filers), partnerships, RBMICS, and trusts must use Form 7004 to request an extension of time to file income lax returns. Number, strest, and room or suits no. If a P.O box, see instructions. Purpose of the Page					m 8868.		
required to file Form 990-T), or an additional (not automatic) #month extension of time, You can electronically file Form 8888 to require an extension of time to file any of the form sites of Part of Part I 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, with tww in a goverlete and clock on a -6% for Chantes & Nonprodits. Part I In Automatic 3 - Month Extension of Time. Only submit original (no copies needed).							oration
of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfera Associated With Cortain Personal Benefit Contracts, which must be sent to the IRBs in page from the centre of the interview of the IRBs on page from the Contract of the IRBs on th							
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, veriti www.rs.gove/filing and cisic on e-file for Chanetae & Nonprofiles. Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed). A corporation required to file Form 990-T and requesting an automatic 8-month extension - check this box and complete Part I only All other corporations (including 1120-C filers), partnerships, FRMicis, and trusts must use Form 7004 to request an extension of time to file inchemic text returns. Type or the inchemic text returns. Type or the inchemic text returns. Part I only WILLIAM H. HARRIS FOUNDATION O4 -6197960 WILLIAM H. HARRIS FOUNDATION O4 -6197960 WILLIAM H. HARRIS FOUNDATION Social security number (SNN) 19 WINDEMERE CIRCLE City, town or post office, sate, and ZIP code For a foreign address, see instructions. BRAINTREE A 02184 Enter the Return code for the return that this application is for (tile a separate application for each return) O 4 Application Return Code Is For Code Is Form 990-1 (Form 990-1) Form 990-1 (Form 990-1) Form 990-1 (Form 990-1) Form 990-1 (Form 990-1) Form 990-1 (Form 990-1) Form 990-1 (Form 990-1) The books are in the care of P 19 WINDEMERE CIRCLE - BRAINTREE, MA 02184 Telephone No P 791-948-3187 Form 990-1 (sec. 401(a) or 408(a) toust) Form 990-1 (sec. 401(a) or 408(a) t							
Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed).							
Part Automatic 3-Month Extension of Time. Only submit original (no copies needed).				,			
Part Lonly				submit original (no copies ne	eded).		
All other corporations (including 1120-C filers), pertnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns. Type or print WILLIAM H. HARRIS FOUNDATION O4-6197960 Number, street, and room or suite no. If a P.O box, see instructions. 19 WINDEMERS CIRCLE City, town or post offices, state, and ZIP code For a foreign address, see instructions. RRAINTREE MA 02184 Enter the Return code for the return that this application is for (file a separate application for each return) Return ls For Code Form 990 or Form 990 EZ O1 Form 990 or Form 990 EZ O2 Form 1041-A Porm 990 or Form 990 EZ O3 Form 990	A corpo	oration required to file Form 990-T and requesting an autor	natic 6-mo	onth extension - check this box and	complete		
Type or print WILLIAM H. HARRIS FOUNDATION 04-6197960 WILLIAM H. HARRIS FOUNDATION 04-6197960 Number, streat, and room or suite no. If a P.O box, see instructions. 19 WINDEMERE CIRCLE City, town or post office, state, and ZIP code For a foreign address, see instructions. 19 WINDEMERE MA 02184 Enter the Return code for the return that this application is for (file a separate application for each return) Application Is For Code Is For Code Is For Ocde Somm 990 or Form 990-EZ 10 Form 990 or Form 990-EZ 11 Form 990 or Form 990-EZ 12 Form 990 or Form 990-EZ 13 Form 990-F 14 Form 990-F 15 Form 990-F 16 Form 990-F 17 Form 990-F 18 Form 990-F 19 WINDEMERE CIRCLE BEDITH WEINBERG The books are in the care of 19 WINDEMERE CIRCLE BRAINTREE, MA 02184 Telephone No. 18 See 38 See 318 Town 98 See 18 See 19 See 19 See 19 See 19 See 19 See 19 See 19 See 18 Se						🕨	· []
Print Pri			ICs, and t	rusts must use Form 7004 to reques	t an exten	sion of time	
WILLIAM H. HARRIS FOUNDATION 04-6197960	Type o	Name of exempt organization or other filer, see instru-	ctions.		Employer	identification num	iber (EIN) or
Number, street, and room or suite no. If a P.O box, see instructions. 19 WINDEMERE CIRCLE Instructions BRAINTREE, MA 02184 Enter the Return code for the return that this application is for (file a separate application for each return) Application BRAINTREE, MA 02184 Enter the Return code for the return that this application is for (file a separate application for each return) Application BRAINTREE, MA 02184 Enter the Return code for the return that this application is for (file a separate application for each return) O	print					04 64000	c 0
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Enter the Return code for the return that this application is for (file a separate application for each return) Secondary	due date	Number, street, and room or suite no. If a P.O. box, s	ee instruc	tions.	Social se	curity number (SSI	·N)
Enter the Return code for the return that this application is for (file a separate application for each return) Application			oreign add	lress, see instructions.			
Application Return S For Code Is For		BRAINTREE, MA 02184	,				
Application Return S For Code Is For							
Series	Enter th	ne Return code for the return that this application is for (file	a separa	te application for each return)			0 4
Form 990 or Form 990 EZ O1 Form 990 T (corporation) O2 Form 990 BL O2 Form 1041-A O3 Form 4720 O3 Form 4720 O3 Form 4720 O4 Form 5027 O5 Form 990 FF O4 Form 5227 O5 Form 6069 O6 Form 8870 O7 Form 990 T (trust other than above) O6 Form 8870 O7 Form 990 T (trust other than above) O6 Form 8870 O7 Form 990 T (trust other than above) O6 Form 8870 O7 Form 990 T (trust other than above) O7 Form 990 T (trust other than above) O8 Form 6069 O7 Form 990 T (trust other than above) O8 Form 8870 O7 Form 990 T (trust other than above) O8 Form 8870 O7 Form 990 T (sec. 401(a) or 408(a) trust) O7 Form 990 T (trust other than above) O8 Form 8870 O7 Form 990 T (sec. 401(a) or 408(a) trust) O8 Form 809 T (sec. 401(a) or 408(a) trust) O8 Form 809 T (sec. 401(a) or 40	Applica	ation	Return	Application			Return
Form 990-EZ O1 Form 990-T (corporation) O7	Is For		Code	Is For			Code
Form 4720 (individual) O3 Form 4720 Form 990-PF O4 Form 5227 D5 Form 6069 D7 Form 990-T (trust other than above) O6 Form 8870 D12 EDITH WEINBERG The books are in the care of ▶ 19 WINDEMERE CIRCLE - BRAINTREE, MA 02184 Telephone No. ▶ 781-848-3187 Telephone No. ▶ 781-848-3187 FAX No. ▶ If this 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 ▶ and attach a list with the names and EINs of all members the extension is for 1 request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until AUGUST 15 , 2013 To file the exempt organization return for the organization named above. The extension is for the organization's return for ▶ X calendar year 2012 or The tax year entered in line 1 is for less than 12 months, check reason. Initial return Final return Change in accounting period The tax year entered in line 1 is for less than 12 months, check reason. Initial return Final return Change in accounting period The tax year entered in line 1 is for less than 12 months, check reason. Initial return Final return Change in accounting period The tax year entered in line 1 is for less than 12 months, check reason. Initial return Final return Change in accounting period The tax year entered in line 1 is for less than 12 months, check reason. Initial return Final return Change in accounting period The tax year entered in line 1 is for less than 12 months, check reason. Initial return Final return Change in accounting period The tax year entered in line 1 is for less than 12 months, check reason. Initial return Final return Change in accounting period The tax year entered in line 1 is for less than 12 months, check reason. Initial return Final return Change in accounting period The tax year entered in line 1 is for less than 12 months, check reason. Initia		90 or Form 990-EZ	01	Form 990-T (corporation)			07
Form 990-PF	Form 9	90-BL	02	Form 1041-A			08
Form 990-T (sec. 401(a) or 408(a) trust) Solid Form 6069	Form 4	720 (individual)	03	Form 4720			09
Form 990-T (trust other than above) BDITH WEINBERG The books are in the care of ▶ 19 WINDEMERE CIRCLE - BRAINTREE, MA 02184 Telephone No. ▶ 781-848-3187 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 part of the group, check this box If this is for part of the group, check this box If this is for part of the group, check this box If request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until AUGUST 15, 2013 It request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until AUGUST 15, 2013 It the organization's return for If the exempt organization return for the organization named above. The extension is for the organization's return for If the tax year entered in line 1 is for less than 12 months, check reason. 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 pnor year overpayment allowed as a credit. 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. 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.	Form 9	90-PF	04	Form 5227			10
EDITH WEINBERG The books are in the care of ▶ 19 WINDEMERE CIRCLE - BRAINTREE, MA 02184 Telephone No.▶ 781-848-3187 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 request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until AUGUST 15, 2013 , to file the exempt organization return for the organization named above. The extension is for the organization's return for ▶ X calendar year 2012 or ▶ □ tax year beginning , and ending and ending and ending	Form 9	90-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11
The books are in the care of ▶ 19 WINDEMERE CIRCLE - BRAINTREE, MA 02184 Telephone No. ▶ 781-848-3187 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 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 this is for part of the group, check this box I request an automate 3-month (6 months for a corporation required to file Form 990-T) extension of time until AUGUST 15, 2013 Is for the organization's return for X calendar year 2012 or X calendar year 2012 or X calendar year 2012 or Change in accounting period 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. 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. 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.	Form 9	90-T (trust other than above)	06	Form 8870			12
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 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)			IRCLE	- BRAINTREE, MA 0	2184		
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					0111 00/9		

For Privacy Act and Paperwork Reduction Act Notice, see instructions.

paper

Form 8866 (Rev. 1-2013)					Page 2	
• If you are filing for an Additional (Not Automatic) 3-Month Ex	tension, d	complete only Part II and check this	box .		► X	
Note. Only complete Part II if you have already been granted an a				3868.		
• If you are filing for an Automatic 3-Month Extension, comple						
Part II Additional (Not Automatic) 3-Month E			al (no c	opies n	eeded).	
<u> </u>					er, see instructions	
Type or Name of exempt organization or other filer, see instru	ections	23(6) (110) 0			ation number (EIN) or	
print	0110110		Citipio) oi	npioyer identification transcript (2.14) or		
File by the WILLIAM H. HARRIS FOUNDATION	NT .			04-6	5197960	
F					mber (SSN)	
filing your return See 19 WINDEMERE CIRCLE	00 111011 00	tions.	000103 00	Juney 110	(00,1)	
instructions City, town or post office, state, and ZIP code For a fo	oreign add	Iress see instructions				
BRAINTREE, MA 02184	oreign auc	ress, see instructions.				
DIGITATION, IN UZIU		· · · · · · · · · · · · · · · · · · ·				
Enter the Return code for the return that this application is for (file		to application for each return)			0 4	
the Return code for the return that this application is for this	c a separa	te application for each returny .		••	(<u>v s</u>)	
Analication	Return	Application			Return	
Application Is For		i ''			Code	
Form 990 or Form 990-EZ	Code 01	is For			Code	
	02	Form 1041 A			08	
Form 990-BL	03	Form 1041-A Form 4720			09	
Form 4720 (individual)	03					
Form 990-PF	05	Form 5227			10	
Form 990-T (sec. 401(a) or 408(a) trust)	06	Form 6069			11	
Form 990-T (trust other than above)	1	Form 8870		 -	12	
STOP! Do not complete Part II if you were not already granted	an autor	natic 3-month extension on a previ	ously file	d Form	8868.	
EDITH WEINBERG	TDATE	DDATHINDER MA O	2104			
• The books are in the care of • 19 WINDEMERE C	TKCTF		2104			
Telephone No ▶ <u>781-848-3187</u>	46 - 11	FAX No				
If the organization does not have an office or place of business.						
If this is for a Group Return, enter the organization's four digit Management of the control of the c	-	· · · · · · · · · · · · · · · · · · ·			- · ·	
box . If it is for part of the group, check this box			all memb	<u>ers the e</u>	xtension is for.	
	NOVEM.	BER 15, 2013.				
5 For calendar year 2012, or other tax year beginning		, and ending				
6 If the tax year entered in line 5 is for less than 12 months, c	neck reas	on: Initial return	Final r	etum		
Change in accounting period						
7 State in detail why you need the extension	TNI OD	DED TO COMPLETE THE	7 M 3 V	DEM	TDN	
ADDITIONAL K-1S ARE REQUIRED :	IN OR.	DER TO COMPLETE THE	TAX	RET	JRN	
	······································					
					·	
8a If this application is for Form 990-BL, 990-PF, 990-T, 4720,	or 6069, e	nter the tentative tax, less any		l .	0.000	
nonrefundable credits. See instructions.			8a	\$	27,200.	
b If this application is for Form 990-PF, 990-T, 4720, or 6069,	-					
tax payments made include any prior year overpayment all	lowed as a	a credit and any amount paid			0.00	
previously with Form 8868.			8b	\$	<u>27,200.</u>	
c Balance due. Subtract line 8b from line 8a. Include your pa	•	th this form, if required, by using		١.	•	
EFTPS (Electronic Federal Tax Payment System). See instr			8c	\$	0.	
_		st be completed for Part II o	-			
Under penalties of perjury, I declare that I have examined this form, including it is true, correct, and complete, and that I am authorized to prepare this form.	iing accom	panying schedules and statements, and to	the best o	t my know	riedge and belief,	
	~	Δ_	_	. M	1211/2-12	
Signature > Rechard Dw Malle Jale >	<u> </u>	<u> </u>	Date		154 15012	
				For	m 8868 (Rev. 1-2013)	