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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

**2012**  
Open to Public Inspection

For calendar year 2012, or tax year beginning 07-01-2012 , and ending 06-30-2013

|                                                                                                                                                                                                                                                                                                           |  |                                                                                                                                                                                            |  |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| Name of foundation<br>THE FISH FAMILY FOUNDATION                                                                                                                                                                                                                                                          |  | <b>A Employer identification number</b><br><br>04-6905753                                                                                                                                  |  |
| Number and street (or P O box number if mail is not delivered to street address)<br>75 STATE STREET                                                                                                                                                                                                       |  | <b>B Telephone number</b> (see instructions)<br><br>(617) 428-3775                                                                                                                         |  |
| City or town, state, and ZIP code<br>BOSTON, MA 02109                                                                                                                                                                                                                                                     |  | <b>C</b> If exemption application is pending, check here <input type="checkbox"/>                                                                                                          |  |
| <b>G</b> Check all that apply <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity<br><input type="checkbox"/> Final return <input type="checkbox"/> Amended return<br><input type="checkbox"/> Address change <input type="checkbox"/> Name change |  | <b>D 1.</b> Foreign organizations, check here <input type="checkbox"/><br><b>2.</b> Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/> |  |
| <b>H</b> Check type of organization <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation<br><input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation                                                   |  | <b>E</b> If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>                                                                       |  |
| <b>I</b> Fair market value of all assets at end of year (from Part II, col. (c), line 16) <input checked="" type="checkbox"/> \$ 11,489,166                                                                                                                                                               |  | <b>F</b> If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>                                                                    |  |
| <b>J</b> Accounting method <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual<br><input type="checkbox"/> Other (specify) _____<br>(Part I, column (d) must be on cash basis.)                                                                                                     |  |                                                                                                                                                                                            |  |

| Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions) ) |                                                                                             | (a) Revenue and expenses per books                                                          | (b) Net investment income | (c) Adjusted net income | (d) Disbursements for charitable purposes (cash basis only) |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------|---------------------------|-------------------------|-------------------------------------------------------------|
| Revenue                                                                                                                                                             | 1 Contributions, gifts, grants, etc , received (attach schedule)                            | 1,693,244                                                                                   |                           |                         |                                                             |
|                                                                                                                                                                     | 2 Check <input type="checkbox"/> if the foundation is <b>not</b> required to attach Sch B   |                                                                                             |                           |                         |                                                             |
|                                                                                                                                                                     | 3 Interest on savings and temporary cash investments                                        | 10,159                                                                                      | 10,159                    |                         |                                                             |
|                                                                                                                                                                     | 4 Dividends and interest from securities. . . . .                                           | 93,921                                                                                      | 93,921                    |                         |                                                             |
|                                                                                                                                                                     | 5a Gross rents . . . . .                                                                    |                                                                                             |                           |                         |                                                             |
|                                                                                                                                                                     | b Net rental income or (loss) _____                                                         |                                                                                             |                           |                         |                                                             |
|                                                                                                                                                                     | 6a Net gain or (loss) from sale of assets not on line 10                                    | 321,237                                                                                     |                           |                         |                                                             |
|                                                                                                                                                                     | b Gross sales price for all assets on line 6a _____ 1,405,976                               |                                                                                             |                           |                         |                                                             |
|                                                                                                                                                                     | 7 Capital gain net income (from Part IV , line 2 ) . . . .                                  |                                                                                             | 321,237                   |                         |                                                             |
|                                                                                                                                                                     | 8 Net short-term capital gain . . . . .                                                     |                                                                                             |                           |                         |                                                             |
|                                                                                                                                                                     | 9 Income modifications . . . . .                                                            |                                                                                             |                           |                         |                                                             |
|                                                                                                                                                                     | 10a Gross sales less returns and allowances                                                 |                                                                                             |                           |                         |                                                             |
| Operating and Administrative Expenses                                                                                                                               | b Less Cost of goods sold . . . . .                                                         |                                                                                             |                           |                         |                                                             |
|                                                                                                                                                                     | c Gross profit or (loss) (attach schedule) . . . . .                                        |                                                                                             |                           |                         |                                                             |
|                                                                                                                                                                     | 11 Other income (attach schedule) . . . . .                                                 |  383     | 383                       |                         |                                                             |
|                                                                                                                                                                     | 12 <b>Total.</b> Add lines 1 through 11 . . . . .                                           | 2,118,944                                                                                   | 425,700                   |                         |                                                             |
|                                                                                                                                                                     | 13 Compensation of officers, directors, trustees, etc                                       | 7,750                                                                                       | 4,250                     |                         | 3,500                                                       |
|                                                                                                                                                                     | 14 Other employee salaries and wages . . . . .                                              | 207,740                                                                                     | 9,913                     |                         | 197,827                                                     |
|                                                                                                                                                                     | 15 Pension plans, employee benefits . . . . .                                               | 8,573                                                                                       | 0                         |                         | 8,573                                                       |
|                                                                                                                                                                     | 16a Legal fees (attach schedule) . . . . .                                                  |  2,030   | 0                         |                         | 2,030                                                       |
|                                                                                                                                                                     | b Accounting fees (attach schedule) . . . . .                                               |  10,250  | 0                         |                         | 10,250                                                      |
|                                                                                                                                                                     | c Other professional fees (attach schedule) . . . . .                                       |  22,176  | 16,745                    |                         | 5,431                                                       |
|                                                                                                                                                                     | 17 Interest . . . . .                                                                       | 2,655                                                                                       | 2,655                     |                         | 0                                                           |
|                                                                                                                                                                     | 18 Taxes (attach schedule) (see instructions)                                               |  21,244  | 2,337                     |                         | 15,857                                                      |
|                                                                                                                                                                     | 19 Depreciation (attach schedule) and depletion . . . .                                     |  886     | 0                         |                         |                                                             |
|                                                                                                                                                                     | 20 Occupancy . . . . .                                                                      |                                                                                             |                           |                         |                                                             |
|                                                                                                                                                                     | 21 Travel, conferences, and meetings . . . . .                                              | 3,685                                                                                       | 0                         |                         | 3,685                                                       |
|                                                                                                                                                                     | 22 Printing and publications . . . . .                                                      |                                                                                             |                           |                         |                                                             |
|                                                                                                                                                                     | 23 Other expenses (attach schedule) . . . . .                                               |  182,315 | 92,534                    |                         | 89,761                                                      |
|                                                                                                                                                                     | 24 <b>Total operating and administrative expenses.</b><br>Add lines 13 through 23 . . . . . | 469,304                                                                                     | 128,434                   |                         | 336,914                                                     |
|                                                                                                                                                                     | 25 Contributions, gifts, grants paid . . . . .                                              | 876,273                                                                                     |                           |                         | 876,273                                                     |
|                                                                                                                                                                     | 26 <b>Total expenses and disbursements.</b> Add lines 24 and 25                             | 1,345,577                                                                                   | 128,434                   |                         | 1,213,187                                                   |
|                                                                                                                                                                     | 27 Subtract line 26 from line 12                                                            |                                                                                             |                           |                         |                                                             |
|                                                                                                                                                                     | a <b>Excess of revenue over expenses and disbursements</b>                                  | 773,367                                                                                     |                           |                         |                                                             |
|                                                                                                                                                                     | b <b>Net investment income</b> (if negative, enter -0-)                                     |                                                                                             | 297,266                   |                         |                                                             |
|                                                                                                                                                                     | c <b>Adjusted net income</b> (if negative, enter -0-)                                       |                                                                                             |                           |                         |                                                             |

| Part II Balance Sheets      |                                                                                                                               | Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions )                              | Beginning of year                                                                             | End of year    |                       |
|-----------------------------|-------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------|----------------|-----------------------|
|                             |                                                                                                                               |                                                                                                                                                  | (a) Book Value                                                                                | (b) Book Value | (c) Fair Market Value |
| Assets                      | 1                                                                                                                             | Cash—non-interest-bearing . . . . .                                                                                                              |                                                                                               |                |                       |
|                             | 2                                                                                                                             | Savings and temporary cash investments . . . . .                                                                                                 | 5,068,171                                                                                     | 4,114,968      | 4,114,968             |
|                             | 3                                                                                                                             | Accounts receivable ▶ _____<br>Less allowance for doubtful accounts ▶ _____                                                                      |                                                                                               |                |                       |
|                             | 4                                                                                                                             | Pledges receivable ▶ _____<br>Less allowance for doubtful accounts ▶ _____                                                                       |                                                                                               |                |                       |
|                             | 5                                                                                                                             | Grants receivable . . . . .                                                                                                                      |                                                                                               |                |                       |
|                             | 6                                                                                                                             | Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see page 15 of the instructions) . . . . . |                                                                                               |                |                       |
|                             | 7                                                                                                                             | Other notes and loans receivable (attach schedule) ▶ _____<br>Less allowance for doubtful accounts ▶ _____                                       |                                                                                               |                |                       |
|                             | 8                                                                                                                             | Inventories for sale or use . . . . .                                                                                                            |                                                                                               |                |                       |
|                             | 9                                                                                                                             | Prepaid expenses and deferred charges . . . . .                                                                                                  |                                                                                               |                |                       |
|                             | 10a                                                                                                                           | Investments—U S and state government obligations (attach schedule)                                                                               |                                                                                               |                |                       |
|                             | b                                                                                                                             | Investments—corporate stock (attach schedule) . . . . .                                                                                          | 0          | 259,558        | 261,903               |
|                             | c                                                                                                                             | Investments—corporate bonds (attach schedule). . . . .                                                                                           |                                                                                               |                |                       |
|                             | 11                                                                                                                            | Investments—land, buildings, and equipment basis ▶ _____<br>Less accumulated depreciation (attach schedule) ▶ _____                              |                                                                                               |                |                       |
|                             | 12                                                                                                                            | Investments—mortgage loans . . . . .                                                                                                             |                                                                                               |                |                       |
|                             | 13                                                                                                                            | Investments—other (attach schedule) . . . . .                                                                                                    | 5,051,536  | 6,519,434      | 7,110,004             |
|                             | 14                                                                                                                            | Land, buildings, and equipment basis ▶ <u>16,390</u><br>Less accumulated depreciation (attach schedule) ▶ <u>14,099</u>                          | 3,177      | 2,291          | 2,291                 |
| 15                          | Other assets (describe ▶ _____)                                                                                               |                                                                                                                                                  |                                                                                               |                |                       |
| 16                          | Total assets (to be completed by all filers—see the instructions Also, see page 1, item I)                                    | 10,122,884                                                                                                                                       | 10,896,251                                                                                    | 11,489,166     |                       |
| Liabilities                 | 17                                                                                                                            | Accounts payable and accrued expenses . . . . .                                                                                                  |                                                                                               |                |                       |
|                             | 18                                                                                                                            | Grants payable . . . . .                                                                                                                         |                                                                                               |                |                       |
|                             | 19                                                                                                                            | Deferred revenue . . . . .                                                                                                                       |                                                                                               |                |                       |
|                             | 20                                                                                                                            | Loans from officers, directors, trustees, and other disqualified persons                                                                         |                                                                                               |                |                       |
|                             | 21                                                                                                                            | Mortgages and other notes payable (attach schedule) . . . . .                                                                                    |                                                                                               |                |                       |
|                             | 22                                                                                                                            | Other liabilities (describe ▶ _____)                                                                                                             |                                                                                               |                |                       |
|                             | 23                                                                                                                            | Total liabilities (add lines 17 through 22) . . . . .                                                                                            | 0                                                                                             | 0              |                       |
| Net Assets or Fund Balances | Foundations that follow SFAS 117, check here ▶ <input type="checkbox"/> and complete lines 24 through 26 and lines 30 and 31. |                                                                                                                                                  |                                                                                               |                |                       |
|                             | 24                                                                                                                            | Unrestricted . . . . .                                                                                                                           |                                                                                               |                |                       |
|                             | 25                                                                                                                            | Temporarily restricted . . . . .                                                                                                                 |                                                                                               |                |                       |
|                             | 26                                                                                                                            | Permanently restricted . . . . .                                                                                                                 |                                                                                               |                |                       |
|                             | Foundations that do not follow SFAS 117, check here ▶ <input checked="" type="checkbox"/> and complete lines 27 through 31.   |                                                                                                                                                  |                                                                                               |                |                       |
|                             | 27                                                                                                                            | Capital stock, trust principal, or current funds . . . . .                                                                                       | 10,122,884                                                                                    | 10,896,251     |                       |
|                             | 28                                                                                                                            | Paid-in or capital surplus, or land, bldg , and equipment fund                                                                                   | 0                                                                                             | 0              |                       |
|                             | 29                                                                                                                            | Retained earnings, accumulated income, endowment, or other funds                                                                                 | 0                                                                                             | 0              |                       |
|                             | 30                                                                                                                            | Total net assets or fund balances (see page 17 of the instructions) . . . . .                                                                    | 10,122,884                                                                                    | 10,896,251     |                       |
|                             | 31                                                                                                                            | Total liabilities and net assets/fund balances (see page 17 of the instructions) . . . . .                                                       | 10,122,884                                                                                    | 10,896,251     |                       |

| Part III Analysis of Changes in Net Assets or Fund Balances |                                                                                                                                                                    |              |
|-------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|
| 1                                                           | Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year’s return) . . . . . | 1 10,122,884 |
| 2                                                           | Enter amount from Part I, line 27a . . . . .                                                                                                                       | 2 773,367    |
| 3                                                           | Other increases not included in line 2 (itemize) ▶ _____                                                                                                           | 3 0          |
| 4                                                           | Add lines 1, 2, and 3 . . . . .                                                                                                                                    | 4 10,896,251 |
| 5                                                           | Decreases not included in line 2 (itemize) ▶ _____                                                                                                                 | 5 0          |
| 6                                                           | Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 . . . . .                                                      | 6 10,896,251 |

Part IV Capital Gains and Losses for Tax on Investment Income

|                                                                                                                                   |                           |                                              |                                      |                                  |
|-----------------------------------------------------------------------------------------------------------------------------------|---------------------------|----------------------------------------------|--------------------------------------|----------------------------------|
| (a) List and describe the kind(s) of property sold (e g , real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co ) |                           | (b) How acquired<br>P—Purchase<br>D—Donation | (c) Date acquired<br>(mo , day, yr ) | (d) Date sold<br>(mo , day, yr ) |
| 1a                                                                                                                                | See Additional Data Table |                                              |                                      |                                  |
| b                                                                                                                                 |                           |                                              |                                      |                                  |
| c                                                                                                                                 |                           |                                              |                                      |                                  |
| d                                                                                                                                 |                           |                                              |                                      |                                  |
| e                                                                                                                                 |                           |                                              |                                      |                                  |

|                       |                                            |                                                 |                                              |
|-----------------------|--------------------------------------------|-------------------------------------------------|----------------------------------------------|
| (e) Gross sales price | (f) Depreciation allowed<br>(or allowable) | (g) Cost or other basis<br>plus expense of sale | (h) Gain or (loss)<br>(e) plus (f) minus (g) |
| a                     | See Additional Data Table                  |                                                 |                                              |
| b                     |                                            |                                                 |                                              |
| c                     |                                            |                                                 |                                              |
| d                     |                                            |                                                 |                                              |
| e                     |                                            |                                                 |                                              |

|                                                                                             |                                      |                                               |                                                                                              |
|---------------------------------------------------------------------------------------------|--------------------------------------|-----------------------------------------------|----------------------------------------------------------------------------------------------|
| Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 |                                      |                                               | (I) Gains (Col (h) gain minus<br>col (k), but not less than -0-) or<br>Losses (from col (h)) |
| (i) F M V as of 12/31/69                                                                    | (j) Adjusted basis<br>as of 12/31/69 | (k) Excess of col (i)<br>over col (j), if any |                                                                                              |
| a                                                                                           | See Additional Data Table            |                                               |                                                                                              |
| b                                                                                           |                                      |                                               |                                                                                              |
| c                                                                                           |                                      |                                               |                                                                                              |
| d                                                                                           |                                      |                                               |                                                                                              |
| e                                                                                           |                                      |                                               |                                                                                              |

|   |                                                                                                                                                                                                              |                                                                                     |   |         |
|---|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------|---|---------|
| 2 | Capital gain net income or (net capital loss)                                                                                                                                                                | { If gain, also enter in Part I, line 7<br>If (loss), enter -0- in Part I, line 7 } | 2 | 321,237 |
| 3 | Net short-term capital gain or (loss) as defined in sections 1222(5) and (6)<br><br>If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0-<br>in Part I, line 8 . . . . . |                                                                                     | 3 |         |

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

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

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

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? ☐ Yes ☒ No

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

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

|                                                                      |                                          |                                              |                                                           |
|----------------------------------------------------------------------|------------------------------------------|----------------------------------------------|-----------------------------------------------------------|
| (a)<br>Base period years Calendar<br>year (or tax year beginning in) | (b)<br>Adjusted qualifying distributions | (c)<br>Net value of noncharitable-use assets | (d)<br>Distribution ratio<br>(col (b) divided by col (c)) |
| 2011                                                                 | 1,623,537                                | 11,204,023                                   | 0 144907                                                  |
| 2010                                                                 | 1,626,008                                | 9,214,595                                    | 0 176460                                                  |
| 2009                                                                 | 640,135                                  | 11,599,698                                   | 0 055185                                                  |
| 2008                                                                 | 687,903                                  | 12,359,598                                   | 0 055657                                                  |
| 2007                                                                 | 609,693                                  | 12,984,970                                   | 0 046954                                                  |

|   |                                                                                                                                                                                       |   |            |
|---|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---|------------|
| 2 | Total of line 1, column (d). . . . .                                                                                                                                                  | 2 | 0 479163   |
| 3 | Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by<br>the number of years the foundation has been in existence if less than 5 years . . . . | 3 | 0 095833   |
| 4 | Enter the net value of noncharitable-use assets for 2012 from Part X, line 5. . . . .                                                                                                 | 4 | 12,598,400 |
| 5 | Multiply line 4 by line 3. . . . .                                                                                                                                                    | 5 | 1,207,342  |
| 6 | Enter 1% of net investment income (1% of Part I, line 27b). . . . .                                                                                                                   | 6 | 2,973      |
| 7 | Add lines 5 and 6. . . . .                                                                                                                                                            | 7 | 1,210,315  |
| 8 | Enter qualifying distributions from Part XII, line 4. . . . .                                                                                                                         | 8 | 1,213,187  |

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

Part VIExcise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the instructions)

|    |  |                                                                                                                                                                      |     |          |       |   |
|----|--|----------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|----------|-------|---|
| 1a |  | Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1                                          |     |          |       |   |
|    |  | Date of ruling or determination letter _____ (attach copy of letter if necessary—see instructions)                                                                   |     |          |       |   |
| b  |  | Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input checked="" type="checkbox"/> and enter 1% of Part I, line 27b . . . . . |     | 1        | 2,973 |   |
| c  |  | All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b)                                                |     |          |       |   |
| 2  |  | Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)                                                             |     | 2        | 0     |   |
| 3  |  | Add lines 1 and 2. . . . .                                                                                                                                           |     | 3        | 2,973 |   |
| 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        | 2,973 |   |
| 6  |  | Credits/Payments                                                                                                                                                     |     |          |       |   |
| a  |  | 2012 estimated tax payments and 2011 overpayment credited to 2012                                                                                                    | 6a  | 3,424    |       |   |
| b  |  | Exempt foreign organizations—tax withheld at source . . . . .                                                                                                        | 6b  |          |       |   |
| c  |  | Tax paid with application for extension of time to file (Form 8868)                                                                                                  | 6c  |          |       |   |
| d  |  | Backup withholding erroneously withheld . . . . .                                                                                                                    | 6d  |          |       |   |
| 7  |  | Total credits and payments Add lines 6a through 6d. . . . .                                                                                                          |     | 7        | 3,424 |   |
| 8  |  | Enter any penalty for underpayment of estimated tax Check here <input checked="" type="checkbox"/> if Form 2220 is attached                                          |     | 8        |       |   |
| 9  |  | Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed . . . . .                                                                              |     | 9        |       |   |
| 10 |  | Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid. . . . .                                                                   |     | 10       | 451   |   |
| 11 |  | Enter the amount of line 10 to be Credited to 2013 estimated tax                                                                                                     | 451 | Refunded | 11    | 0 |

Part VII-AStatements Regarding Activities

|    |                                                                                                                                                                                                                                                                                                                                             |    |     |    |
|----|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----|-----|----|
| 1a | During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? . . . . .                                                                                                                                                              |    | Yes | No |
|    |                                                                                                                                                                                                                                                                                                                                             | 1a |     | No |
| b  | Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19 of the instructions for definition)? . . . . .                                                                                                                                                                             |    |     | No |
|    | If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.                                                                                                                                               |    |     |    |
| c  | Did the foundation file Form 1120-POL for this year? . . . . .                                                                                                                                                                                                                                                                              | 1c |     | No |
| d  | Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year<br>(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? . . . . .<br>If "Yes," attach a detailed description of the activities.                                                                                                                                                                     | 2  |     | No |
| 3  | Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes . . . . .                                                                                                        | 3  |     | No |
| 4a | Did the foundation have unrelated business gross income of \$1,000 or more during the year? . . . . .                                                                                                                                                                                                                                       | 4a |     | No |
| b  | If "Yes," has it filed a tax return on Form 990-T for this year? . . . . .                                                                                                                                                                                                                                                                  | 4b |     |    |
| 5  | Was there a liquidation, termination, dissolution, or substantial contraction during the year? . . . . .<br>If "Yes," attach the statement required by General Instruction T.                                                                                                                                                               | 5  |     | No |
| 6  | Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either<br>• By language in the governing instrument, or<br>• By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? . . . . . | 6  | Yes |    |
| 7  | Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV                                                                                                                                                                                                            | 7  | Yes |    |
| 8a | Enter the states to which the foundation reports or with which it is registered (see instructions)<br>MA _____                                                                                                                                                                                                                              |    |     |    |
| b  | If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation .                                                                                                                               | 8b | Yes |    |
| 9  | Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2012 or the taxable year beginning in 2012 (see instructions for Part XIV)?<br>If "Yes," complete Part XIV . . . . .                                                                           | 9  |     | No |
| 10 | Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses                                                                                                                                                                                                          | 10 |     | No |

Part VII-A

Statements Regarding Activities *(continued)*

|                                                                                                                                 |                                                                                                                                                                                                     |    |     |    |
|---------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----|-----|----|
| 11                                                                                                                              | At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions).            | 11 |     | No |
| 12                                                                                                                              | Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions)            | 12 |     | No |
| 13                                                                                                                              | Did the foundation comply with the public inspection requirements for its annual returns and exemption application?                                                                                 | 13 | Yes |    |
| Website address ▶N/A                                                                                                            |                                                                                                                                                                                                     |    |     |    |
| 14                                                                                                                              | The books are in care of ▶TREF BORDEN Telephone no ▶(617) 428-3775                                                                                                                                  |    |     |    |
|                                                                                                                                 | Located at ▶THE FISH FAMILY FOUNDATION - 75 STATE STREET BOSTON MA ZIP +4 ▶02109                                                                                                                    |    |     |    |
| 15                                                                                                                              | Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> —Check here . . . . . ▶ <input type="checkbox"/>                                                      |    |     |    |
|                                                                                                                                 | and enter the amount of tax-exempt interest received or accrued during the year . . . . . ▶                                                                                                         | 15 |     |    |
| 16                                                                                                                              | At any time during calendar year 2012, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? . . . . . | 16 |     | No |
| See instructions for exceptions and filing requirements for Form TD F 90-22.1 If "Yes", enter the name of the foreign country ▶ |                                                                                                                                                                                                     |    |     |    |

Part VII-B

Statements Regarding Activities for Which Form 4720 May Be Required

|                                                                                         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |    |     |    |
|-----------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----|-----|----|
| File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |    | Yes | No |
| 1a                                                                                      | During the year did the foundation (either directly or indirectly)                                                                                                                                                                                                                                                                                                                                                                                                                                                |    |     |    |
|                                                                                         | (1) Engage in the sale or exchange, or leasing of property with a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                                                                                                                                                                                                                                                                                                                                                        |    |     |    |
|                                                                                         | (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                                                                                                                                                                                                                                                                                                                      |    |     |    |
|                                                                                         | (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                                                                                                                                                                                                                                                                                                                                                    |    |     |    |
|                                                                                         | (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No                                                                                                                                                                                                                                                                                                                                                          |    |     |    |
|                                                                                         | (5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                                                                                                                                                                                                                                                                                       |    |     |    |
|                                                                                         | (6) Agree to pay money or property to a government official? ( <b>Exception.</b> Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days ). . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                                                                                                                                                                              |    |     |    |
| b                                                                                       | If any answer is "Yes" to 1a(1)–(6), did <b>any</b> of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)? . . . Organizations relying on a current notice regarding disaster assistance check here. . . . . ▶ <input type="checkbox"/>                                                                                                                                           | 1b |     | No |
| c                                                                                       | Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2012? . . . . .                                                                                                                                                                                                                                                                                                                 | 1c |     | No |
| 2                                                                                       | Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))                                                                                                                                                                                                                                                                                                                                     |    |     |    |
| a                                                                                       | At the end of tax year 2012, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2012? . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>If "Yes," list the years ▶ 20____, 20____, 20____, 20____                                                                                                                                                                                                                      |    |     |    |
| b                                                                                       | Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to <b>all</b> years listed, answer "No" and attach statement—see instructions ). . . . .                                                                                                                                                                                    | 2b |     |    |
| c                                                                                       | If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here ▶ 20____, 20____, 20____, 20____                                                                                                                                                                                                                                                                                                                                                           |    |     |    |
| 3a                                                                                      | Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                                                                                                                                                                                                                                                                                                          |    |     |    |
| b                                                                                       | If "Yes," did it have excess business holdings in 2012 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? ( <i>Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2012.</i> ). . . . . | 3b |     |    |
| 4a                                                                                      | Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?                                                                                                                                                                                                                                                                                                                                                                                                   | 4a |     | No |
| b                                                                                       | Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2012?                                                                                                                                                                                                                                                                                 | 4b |     | No |

Part VII-B

Statements Regarding Activities for Which Form 4720 May Be Required (continued)

|    |                                                                                                                                                                                                                                |                                                                     |  |    |
|----|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------|--|----|
| 5a | During the year did the foundation pay or incur any amount to                                                                                                                                                                  |                                                                     |  |    |
|    | (1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?                                                                                                                                      | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |  |    |
|    | (2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?                                                                            | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |  |    |
|    | (3) Provide a grant to an individual for travel, study, or other similar purposes?                                                                                                                                             | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |  |    |
|    | (4) Provide a grant to an organization other than a charitable, etc , organization described in section 509(a)(1 ), (2), or (3), or section 4940(d)(2)? (see instructions).                                                    | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |  |    |
|    | (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?                                                          | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |  |    |
| b  | If any answer is "Yes" to 5a(1)–(5), did <b>any</b> of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)? | 5b                                                                  |  |    |
|    | Organizations relying on a current notice regarding disaster assistance check here.                                                                                                                                            | <input checked="" type="checkbox"/>                                 |  |    |
| c  | If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?                                                                     | <input type="checkbox"/> Yes <input type="checkbox"/> No            |  |    |
|    | If "Yes," attach the statement required by Regulations section 53.4945–5(d).                                                                                                                                                   |                                                                     |  |    |
| 6a | Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?                                                                                                | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |  |    |
| b  | Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?                                                                                                                     | 6b                                                                  |  | No |
|    | If "Yes" to 6b, file Form 8870.                                                                                                                                                                                                |                                                                     |  |    |
| 7a | At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?                                                                                                                           | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |  |    |
| b  | If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?                                                                                                                        | 7b                                                                  |  |    |

Part VIII

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

|                                                                                                                              |                                                           |                                           |                                                                       |                                       |
|------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------|-------------------------------------------|-----------------------------------------------------------------------|---------------------------------------|
| 1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).                     |                                                           |                                           |                                                                       |                                       |
| (a) Name and address                                                                                                         | (b) Title, and average hours per week devoted to position | (c) Compensation (If not paid, enter -0-) | (d) Contributions to employee benefit plans and deferred compensation | (e) Expense account, other allowances |
| See Additional Data Table                                                                                                    |                                                           |                                           |                                                                       |                                       |
|                                                                                                                              |                                                           |                                           |                                                                       |                                       |
|                                                                                                                              |                                                           |                                           |                                                                       |                                       |
|                                                                                                                              |                                                           |                                           |                                                                       |                                       |
|                                                                                                                              |                                                           |                                           |                                                                       |                                       |
|                                                                                                                              |                                                           |                                           |                                                                       |                                       |
|                                                                                                                              |                                                           |                                           |                                                                       |                                       |
| 2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE." |                                                           |                                           |                                                                       |                                       |
| (a) Name and address of each employee paid more than \$50,000                                                                | (b) Title, and average hours per week devoted to position | (c) Compensation                          | (d) Contributions to employee benefit plans and deferred compensation | (e) Expense account, other allowances |
| ALICE BORDEN                                                                                                                 | EXEC DIRECTOR                                             | 119,135                                   | 0                                                                     | 0                                     |
| C/O FISH FAMILY FDN 75 STATE ST BOSTON,MA 02109                                                                              | 40 00                                                     |                                           |                                                                       |                                       |
|                                                                                                                              |                                                           |                                           |                                                                       |                                       |
|                                                                                                                              |                                                           |                                           |                                                                       |                                       |
|                                                                                                                              |                                                           |                                           |                                                                       |                                       |
|                                                                                                                              |                                                           |                                           |                                                                       |                                       |
|                                                                                                                              |                                                           |                                           |                                                                       |                                       |
|                                                                                                                              |                                                           |                                           |                                                                       |                                       |
|                                                                                                                              |                                                           |                                           |                                                                       |                                       |
| Total number of other employees paid over \$50,000.                                                                          |                                                           |                                           |                                                                       | 1                                     |

Part VIII

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

| 3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE". |                     |                  |
|------------------------------------------------------------------------------------------------------------------|---------------------|------------------|
| (a) Name and address of each person paid more than \$50,000                                                      | (b) Type of service | (c) Compensation |
| NONE                                                                                                             |                     |                  |
|                                                                                                                  |                     |                  |
|                                                                                                                  |                     |                  |
|                                                                                                                  |                     |                  |
|                                                                                                                  |                     |                  |
|                                                                                                                  |                     |                  |
|                                                                                                                  |                     |                  |
|                                                                                                                  |                     |                  |
|                                                                                                                  |                     |                  |
| Total number of others receiving over \$50,000 for professional services. <div></div>                            |                     | 0                |

Part IX-A

Summary of Direct Charitable Activities

| List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.                                                                                                                                   | Expenses |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|
| 1 THE FOUNDATION IS INVOLDED IN THE GREATER BOSTON CITIZENSHIP INITIATIVE PROGRAM THAT HELPS ELIGIBLE LEGAL PERMANENT RESIDENTS OVERCOME BARRIERS TO NATURALIZATION. THIS PROGRAM WAS CREATED BY THE FISH FAMILY FOUNDATION AND MIRA COALITION IN PARTNERSHIP WITH SIX OTHER IMMIGRANT, COMMUNITY-BASED, AND DIRECT SERVICE ORGANIZATIONS TO INCREASE NATURALIZATION RATES IN THE STATE. | 17,453   |
| 2 THE FOUNDATION IS INVOLVED WITH THE JAPANESE WOMEN'S LEADERSHIP INITIATIVE PROGRAM WHICH BRINGS WOMAN FROM JAPAN TO BOSTON TO RECEIVE FOUR WEEKS OF DIRECT EXPERIENCE AND TRAINING IN NONPROFIT MANAGEMENT AND LEADERSHIP DEVELOPMENT IN AREAS OF IMPORTANCE TO WOMAN AND JAPANESE SOCIETY.                                                                                            | 21,972   |
| 3 THE FOUNDATION IS INVOLVED WITH THE JAPANESE DISASTER RELIEF FUND-BOSTON PROGRAM WHICH GIVES AID TO THOSE AFFECTED BY THE EARTHQUAKE AND TSUNAMI IN JAPAN. THIS PROGRAM IS A COLLABORATION AMONG THE FISH FAMILY FOUNDATION, THE BOSTON FOUNDATION, AND THE JAPAN SOCIETY OF BOSTON.                                                                                                   | 26,740   |
| 4                                                                                                                                                                                                                                                                                                                                                                                        |          |
|                                                                                                                                                                                                                                                                                                                                                                                          |          |
|                                                                                                                                                                                                                                                                                                                                                                                          |          |

Part IX-B

Summary of Program-Related Investments (see instructions)

| Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2. | Amount |
|-------------------------------------------------------------------------------------------------------------------|--------|
| 1                                                                                                                 |        |
|                                                                                                                   |        |
|                                                                                                                   |        |
| 2                                                                                                                 |        |
|                                                                                                                   |        |
|                                                                                                                   |        |
| All other program-related investments. See page 24 of the instructions.                                           |        |
| 3                                                                                                                 |        |
|                                                                                                                   |        |
|                                                                                                                   |        |
| Total. Add lines 1 through 3. <div></div>                                                                         | 0      |



**Part X**

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

|          |                                                                                                                    |           |            |
|----------|--------------------------------------------------------------------------------------------------------------------|-----------|------------|
| <b>1</b> | Fair market value of assets not used (or held for use) directly in carrying out charitable, etc , purposes         |           |            |
| <b>a</b> | Average monthly fair market value of securities. . . . .                                                           | <b>1a</b> | 4,020,861  |
| <b>b</b> | Average of monthly cash balances. . . . .                                                                          | <b>1b</b> | 4,206,261  |
| <b>c</b> | Fair market value of all other assets (see instructions). . . . .                                                  | <b>1c</b> | 4,563,132  |
| <b>d</b> | <b>Total</b> (add lines 1a, b, and c). . . . .                                                                     | <b>1d</b> | 12,790,254 |
| <b>e</b> | Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation). . . . . | <b>1e</b> | 0          |
| <b>2</b> | Acquisition indebtedness applicable to line 1 assets. . . . .                                                      | <b>2</b>  | 0          |
| <b>3</b> | Subtract line 2 from line 1d. . . . .                                                                              | <b>3</b>  | 12,790,254 |
| <b>4</b> | Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions). . . . .  | <b>4</b>  | 191,854    |
| <b>5</b> | <b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3 Enter here and on Part V, line 4         | <b>5</b>  | 12,598,400 |
| <b>6</b> | <b>Minimum investment return.</b> Enter 5% of line 5. . . . .                                                      | <b>6</b>  | 629,920    |

**Part XI**

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

|           |                                                                                                                  |           |         |
|-----------|------------------------------------------------------------------------------------------------------------------|-----------|---------|
| <b>1</b>  | Minimum investment return from Part X, line 6. . . . .                                                           | <b>1</b>  | 629,920 |
| <b>2a</b> | Tax on investment income for 2012 from Part VI, line 5. . . . .                                                  | <b>2a</b> | 2,973   |
| <b>b</b>  | Income tax for 2012 (This does not include the tax from Part VI ). . . . .                                       | <b>2b</b> |         |
| <b>c</b>  | Add lines 2a and 2b. . . . .                                                                                     | <b>2c</b> | 2,973   |
| <b>3</b>  | Distributable amount before adjustments Subtract line 2c from line 1. . . . .                                    | <b>3</b>  | 626,947 |
| <b>4</b>  | Recoveries of amounts treated as qualifying distributions. . . . .                                               | <b>4</b>  | 0       |
| <b>5</b>  | Add lines 3 and 4. . . . .                                                                                       | <b>5</b>  | 626,947 |
| <b>6</b>  | Deduction from distributable amount (see instructions). . . . .                                                  | <b>6</b>  | 0       |
| <b>7</b>  | <b>Distributable amount</b> as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1. . . . . | <b>7</b>  | 626,947 |

**Part XII**

**Qualifying Distributions** (see instructions)

|                                                                                                                                                                                                     |                                                                                                                                                              |           |           |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|-----------|
| <b>1</b>                                                                                                                                                                                            | Amounts paid (including administrative expenses) to accomplish charitable, etc , purposes                                                                    |           |           |
| <b>a</b>                                                                                                                                                                                            | Expenses, contributions, gifts, etc —total from Part I, column (d), line 26. . . . .                                                                         | <b>1a</b> | 1,213,187 |
| <b>b</b>                                                                                                                                                                                            | Program-related investments—total from Part IX-B. . . . .                                                                                                    | <b>1b</b> | 0         |
| <b>2</b>                                                                                                                                                                                            | Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc , purposes. . . . .                                           | <b>2</b>  |           |
| <b>3</b>                                                                                                                                                                                            | Amounts set aside for specific charitable projects that satisfy the                                                                                          |           |           |
| <b>a</b>                                                                                                                                                                                            | Suitability test (prior IRS approval required). . . . .                                                                                                      | <b>3a</b> |           |
| <b>b</b>                                                                                                                                                                                            | Cash distribution test (attach the required schedule). . . . .                                                                                               | <b>3b</b> |           |
| <b>4</b>                                                                                                                                                                                            | <b>Qualifying distributions.</b> Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4                                             | <b>4</b>  | 1,213,187 |
| <b>5</b>                                                                                                                                                                                            | Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b (see instructions). . . . . | <b>5</b>  | 2,973     |
| <b>6</b>                                                                                                                                                                                            | <b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4. . . . .                                                                               | <b>6</b>  | 1,210,214 |
| <b>Note:</b> The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years |                                                                                                                                                              |           |           |

Part XIII

Undistributed Income (see instructions)

|                                                                                                                                                                                     | (a)<br>Corpus | (b)<br>Years prior to 2011 | (c)<br>2011 | (d)<br>2012 |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|----------------------------|-------------|-------------|
| 1 Distributable amount for 2012 from Part XI, line 7                                                                                                                                |               |                            |             | 626,947     |
| 2 Undistributed income, if any, as of the end of 2012                                                                                                                               |               |                            |             |             |
| a Enter amount for 2011 only. . . . .                                                                                                                                               |               |                            | 0           |             |
| b Total for prior years 20____, 20____, 20____                                                                                                                                      |               | 0                          |             |             |
| 3 Excess distributions carryover, if any, to 2012                                                                                                                                   |               |                            |             |             |
| a From 2007. . . . .                                                                                                                                                                |               |                            |             |             |
| b From 2008. . . . .                                                                                                                                                                | 39,785        |                            |             |             |
| c From 2009. . . . .                                                                                                                                                                | 62,430        |                            |             |             |
| d From 2010. . . . .                                                                                                                                                                | 1,171,359     |                            |             |             |
| e From 2011. . . . .                                                                                                                                                                | 1,065,488     |                            |             |             |
| f Total of lines 3a through e. . . . .                                                                                                                                              | 2,339,062     |                            |             |             |
| 4 Qualifying distributions for 2012 from Part XII, line 4 ▶ \$ 1,213,187                                                                                                            |               |                            |             |             |
| 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             |                            |             |             |
| d Applied to 2012 distributable amount. . . . .                                                                                                                                     |               |                            |             | 626,947     |
| e Remaining amount distributed out of corpus                                                                                                                                        | 586,240       |                            |             |             |
| 5 Excess distributions carryover applied to 2012<br>(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                                                                                                                                   | 2,925,302     |                            |             |             |
| 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 instructions . . . . .                                                                             |               |                            | 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) (see instructions). . . . .                                  | 0             |                            |             |             |
| 8 Excess distributions carryover from 2007 not applied on line 5 or line 7 (see instructions). . .                                                                                  | 0             |                            |             |             |
| 9 Excess distributions carryover to 2013.<br>Subtract lines 7 and 8 from line 6a. . . . .                                                                                           | 2,925,302     |                            |             |             |
| 10 Analysis of line 9                                                                                                                                                               |               |                            |             |             |
| a Excess from 2008. . . .                                                                                                                                                           | 39,785        |                            |             |             |
| b Excess from 2009. . . .                                                                                                                                                           | 62,430        |                            |             |             |
| c Excess from 2010. . . .                                                                                                                                                           | 1,171,359     |                            |             |             |
| d Excess from 2011. . . .                                                                                                                                                           | 1,065,488     |                            |             |             |
| e Excess from 2012. . . .                                                                                                                                                           | 586,240       |                            |             |             |

Part XIV

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

1a

If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2012, enter the date of the ruling.

b

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

☐ 4942(j)(3) or ☐ 4942(j)(5)

|    |                                                                                                                                                    |          |               |          |          |           |
|----|----------------------------------------------------------------------------------------------------------------------------------------------------|----------|---------------|----------|----------|-----------|
| 2a | Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed.                         | Tax year | Prior 3 years |          |          | (e) Total |
|    |                                                                                                                                                    | (a) 2012 | (b) 2011      | (c) 2010 | (d) 2009 |           |
|    |                                                                                                                                                    |          |               |          |          |           |
| b  | 85% of line 2a                                                                                                                                     |          |               |          |          |           |
| c  | Qualifying distributions from Part XII, line 4 for each year listed.                                                                               |          |               |          |          |           |
| d  | Amounts included in line 2c not used directly for active conduct of exempt activities.                                                             |          |               |          |          |           |
| e  | Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c.                                     |          |               |          |          |           |
| 3  | Complete 3a, b, or c for the alternative test relied upon                                                                                          |          |               |          |          |           |
| a  | "Assets" alternative test—enter                                                                                                                    |          |               |          |          |           |
|    | (1) Value of all assets                                                                                                                            |          |               |          |          |           |
|    | (2) Value of assets qualifying under section 4942(j)(3)(B)(i)                                                                                      |          |               |          |          |           |
| b  | "Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed.                                 |          |               |          |          |           |
| c  | "Support" alternative test—enter                                                                                                                   |          |               |          |          |           |
|    | (1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties). |          |               |          |          |           |
|    | (2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii).                                      |          |               |          |          |           |
|    | (3) Largest amount of support from an exempt organization                                                                                          |          |               |          |          |           |
|    | (4) Gross investment income                                                                                                                        |          |               |          |          |           |

Part XV

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

1

Information Regarding Foundation Managers:

a

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

LAWRENCE K FISH

b

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

2

Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here ☒ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d.

a

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

b

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

c

Any submission deadlines

d

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

Part XV

Supplementary Information (continued)

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

| Recipient                                           | If recipient is an individual,<br>show any relationship to<br>any foundation manager<br>or substantial contributor | Foundation<br>status of<br>recipient | Purpose of grant or<br>contribution | Amount  |
|-----------------------------------------------------|--------------------------------------------------------------------------------------------------------------------|--------------------------------------|-------------------------------------|---------|
| Name and address (home or business)                 |                                                                                                                    |                                      |                                     |         |
| a Paid during the year<br>See Additional Data Table |                                                                                                                    |                                      |                                     |         |
| Total . . . . .                                     |                                                                                                                    |                                      | 3a                                  | 876,273 |
| b Approved for future payment                       |                                                                                                                    |                                      |                                     |         |
| Total . . . . .                                     |                                                                                                                    |                                      | 3b                                  | 0       |

| Enter gross amounts unless otherwise indicated |                                                               | Unrelated business income |               | Excluded by section 512, 513, or 514 |               | (e)<br>Related or exempt<br>function income<br>(See<br>instructions ) |
|------------------------------------------------|---------------------------------------------------------------|---------------------------|---------------|--------------------------------------|---------------|-----------------------------------------------------------------------|
|                                                |                                                               | (a)<br>Business code      | (b)<br>Amount | (c)<br>Exclusion code                | (d)<br>Amount |                                                                       |
| <b>1</b>                                       | Program service revenue                                       |                           |               |                                      |               |                                                                       |
| <b>a</b>                                       | _____                                                         |                           |               |                                      |               |                                                                       |
| <b>b</b>                                       | _____                                                         |                           |               |                                      |               |                                                                       |
| <b>c</b>                                       | _____                                                         |                           |               |                                      |               |                                                                       |
| <b>d</b>                                       | _____                                                         |                           |               |                                      |               |                                                                       |
| <b>e</b>                                       | _____                                                         |                           |               |                                      |               |                                                                       |
| <b>f</b>                                       | _____                                                         |                           |               |                                      |               |                                                                       |
| <b>g</b>                                       | Fees and contracts from government agencies                   |                           |               |                                      |               |                                                                       |
| <b>2</b>                                       | Membership dues and assessments. . . .                        |                           |               |                                      |               |                                                                       |
| <b>3</b>                                       | Interest on savings and temporary cash investments            |                           |               | 14                                   | 10,159        |                                                                       |
| <b>4</b>                                       | Dividends and interest from securities. . . .                 | 523000                    | 1             | 14                                   | 93,920        |                                                                       |
| <b>5</b>                                       | Net rental income or (loss) from real estate                  |                           |               |                                      |               |                                                                       |
| <b>a</b>                                       | Debt-financed property. . . . .                               |                           |               |                                      |               |                                                                       |
| <b>b</b>                                       | Not debt-financed property. . . . .                           |                           |               |                                      |               |                                                                       |
| <b>6</b>                                       | Net rental income or (loss) from personal property            |                           |               |                                      |               |                                                                       |
| <b>7</b>                                       | Other investment income. . . . .                              | 523000                    | 383           |                                      |               |                                                                       |
| <b>8</b>                                       | Gain or (loss) from sales of assets other than inventory      | 523000                    | -50           | 18                                   | 321,287       |                                                                       |
| <b>9</b>                                       | Net income or (loss) from special events                      |                           |               |                                      |               |                                                                       |
| <b>10</b>                                      | Gross profit or (loss) from sales of inventory. .             |                           |               |                                      |               |                                                                       |
| <b>11</b>                                      | Other revenue <b>a</b> _____                                  |                           |               |                                      |               |                                                                       |
| <b>b</b>                                       | _____                                                         |                           |               |                                      |               |                                                                       |
| <b>c</b>                                       | _____                                                         |                           |               |                                      |               |                                                                       |
| <b>d</b>                                       | _____                                                         |                           |               |                                      |               |                                                                       |
| <b>e</b>                                       | _____                                                         |                           |               |                                      |               |                                                                       |
| <b>12</b>                                      | Subtotal Add columns (b), (d), and (e). .                     |                           | 334           |                                      | 425,366       | 0                                                                     |
| <b>13</b>                                      | <b>Total.</b> Add line 12, columns (b), (d), and (e). . . . . |                           |               | <b>13</b>                            |               | 425,700                                                               |

[illegible]

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

[illegible]

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

**b** If "Yes," complete the following schedule

| (a) Name of organization | (b) Type of organization | (c) Description of relationship |
|--------------------------|--------------------------|---------------------------------|
|                          |                          |                                 |
|                          |                          |                                 |
|                          |                          |                                 |
|                          |                          |                                 |
|                          |                          |                                 |

**Sign  
Here**

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

|                                 |            |       |                                                                                                                                                 |
|---------------------------------|------------|-------|-------------------------------------------------------------------------------------------------------------------------------------------------|
| *****                           | 2014-02-28 | ***** | May the IRS discuss this return with the preparer shown below (see instr.)? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |
| Signature of officer or trustee | Date       | Title |                                                                                                                                                 |

May the IRS discuss this return with the preparer shown below (see instr. 9)? ☒ **Yes** ☐ **No**

**Paid  
Preparer  
Use  
Only**

|                               |                                         |                                            |      |                                                                   |                                                |
|-------------------------------|-----------------------------------------|--------------------------------------------|------|-------------------------------------------------------------------|------------------------------------------------|
| <b>Paid Preparer Use Only</b> | Print/Type preparer's name              | Preparer's Signature                       | Date | Check if self-employed <input checked="checked" type="checkbox"/> | PTIN<br>P01332603                              |
|                               | PAUL FORD CPA                           | PAUL FORD CPA                              |      |                                                                   |                                                |
|                               | Firm's name <input type="checkbox"/>    | SAMET & COMPANY PC<br>1330 BOYLSTON STREET |      |                                                                   | Firm's EIN <input type="checkbox"/> 04-3027605 |
|                               | Firm's address <input type="checkbox"/> | CHESTNUT HILL, MA 024672111                |      |                                                                   | Phone no (617) 731-1222                        |

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d

| (a) List and describe the kind(s) of property sold (e g , real estate,<br>2-story brick warehouse, or common stock, 200 shs MLC Co ) | (b) How acquired<br>P—Purchase<br>D—Donation | (c) Date acquired<br>(mo , day, yr ) | (d) Date sold<br>(mo , day, yr ) |
|--------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------|--------------------------------------|----------------------------------|
| RS GLOBAL                                                                                                                            | P                                            | 2012-07-10                           | 2013-06-30                       |
| JP MORGAN                                                                                                                            | P                                            |                                      | 2013-06-30                       |
| INTERACTIVE BROKERS                                                                                                                  | P                                            |                                      | 2013-06-30                       |
| MORGAN STANLEY                                                                                                                       | P                                            | 2012-09-20                           | 2013-05-10                       |
| LONE CASCADE LP                                                                                                                      | P                                            |                                      | 2013-06-30                       |
| LONE CASCADE LP                                                                                                                      | P                                            |                                      | 2013-06-30                       |
| NEWTYN PARTNERS K-1                                                                                                                  | P                                            |                                      | 2013-06-30                       |
| AVENUE EUROPE K-1                                                                                                                    | P                                            |                                      | 2013-06-30                       |
| AVENUE EUROPE K-1                                                                                                                    | P                                            |                                      | 2013-06-30                       |
| INTERACTIVE BROKERS                                                                                                                  | P                                            |                                      | 2013-06-30                       |
| ROCKEFELLER ALTERNATIVE STRATEGIES K-1                                                                                               | P                                            |                                      | 2013-06-30                       |

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

| (e) Gross sales price | (f) Depreciation allowed<br>(or allowable) | (g) Cost or other basis<br>plus expense of sale | (h) Gain or (loss)<br>(e) plus (f) minus (g) |
|-----------------------|--------------------------------------------|-------------------------------------------------|----------------------------------------------|
| 107,620               |                                            | 125,709                                         | -18,089                                      |
| 251,756               |                                            |                                                 | 251,756                                      |
| 12,140                |                                            |                                                 | 12,140                                       |
| 912,245               |                                            | 958,980                                         | -46,735                                      |
| 40,119                |                                            |                                                 | 40,119                                       |
| 39,340                |                                            |                                                 | 39,340                                       |
| 23,095                |                                            |                                                 | 23,095                                       |
| 1,108                 |                                            |                                                 | 1,108                                        |
| 1,647                 |                                            |                                                 | 1,647                                        |
| 16,906                |                                            |                                                 | 16,906                                       |
|                       |                                            | 50                                              | -50                                          |



Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l

| Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 |                                   |                                            | (l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h)) |
|---------------------------------------------------------------------------------------------|-----------------------------------|--------------------------------------------|----------------------------------------------------------------------------------------|
| (i) F M V as of 12/31/69                                                                    | (j) Adjusted basis as of 12/31/69 | (k) Excess of col (i) over col (j), if any |                                                                                        |
|                                                                                             |                                   |                                            | -18,089                                                                                |
|                                                                                             |                                   |                                            | 251,756                                                                                |
|                                                                                             |                                   |                                            | 12,140                                                                                 |
|                                                                                             |                                   |                                            | -46,735                                                                                |
|                                                                                             |                                   |                                            | 40,119                                                                                 |
|                                                                                             |                                   |                                            | 39,340                                                                                 |
|                                                                                             |                                   |                                            | 23,095                                                                                 |
|                                                                                             |                                   |                                            | 1,108                                                                                  |
|                                                                                             |                                   |                                            | 1,647                                                                                  |
|                                                                                             |                                   |                                            | 16,906                                                                                 |
|                                                                                             |                                   |                                            | -50                                                                                    |

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation

| (a) Name and address                                    | (b) Title, and average hours per week devoted to position | (c) Compensation (If not paid, enter -0-) | (d) Contributions to employee benefit plans and deferred compensation | (e) Expense account, other allowances |
|---------------------------------------------------------|-----------------------------------------------------------|-------------------------------------------|-----------------------------------------------------------------------|---------------------------------------|
| LAWRENCE K FISH                                         | TRUSTEE<br>1 00                                           | 0                                         | 0                                                                     | 0                                     |
| C/O FISH FAMILY FDN- 75 STATE STREET<br>BOSTON,MA 02109 |                                                           |                                           |                                                                       |                                       |
| ATSUKO TOKO FISH                                        | TRUSTEE<br>1 00                                           | 0                                         | 0                                                                     | 0                                     |
| C/O FISH FAMILY FDN- 75 STATE STREET<br>BOSTON,MA 02109 |                                                           |                                           |                                                                       |                                       |
| LEAH OKAJIMA TOKO FISH                                  | TRUSTEE<br>1 00                                           | 250                                       | 0                                                                     | 0                                     |
| C/O FISH FAMILY FDN- 75 STATE STREET<br>BOSTON,MA 02109 |                                                           |                                           |                                                                       |                                       |
| EDWARD TAKEZO FISH                                      | TRUSTEE<br>1 00                                           | 4,750                                     | 0                                                                     | 0                                     |
| C/O FISH FAMILY FDN- 75 STATE STREET<br>BOSTON,MA 02109 |                                                           |                                           |                                                                       |                                       |
| THALEIA SCHLESINGER                                     | TRUSTEE<br>1 00                                           | 2,000                                     | 0                                                                     | 0                                     |
| C/O FISH FAMILY FDN- 75 STATE STREET<br>BOSTON,MA 02109 |                                                           |                                           |                                                                       |                                       |
| EMILY FISH                                              | TRUSTEE<br>1 00                                           | 250                                       | 0                                                                     | 0                                     |
| C/O FISH FAMILY FDN- 75 STATE STREET<br>BOSTON,MA 02109 |                                                           |                                           |                                                                       |                                       |
| MATIAS SACERDOTE                                        | TRUSTEE<br>1 00                                           | 500                                       | 0                                                                     | 0                                     |
| C/O FISH FAMILY FDN- 75 STATE STREET<br>BOSTON,MA 02109 |                                                           |                                           |                                                                       |                                       |

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

| Recipient                                                                     | If recipient is an individual, show any relationship to any foundation manager or substantial contributor | Foundation status of recipient | Purpose of grant or contribution | Amount |
|-------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------|--------------------------------|----------------------------------|--------|
| Name and address (home or business)                                           |                                                                                                           |                                |                                  |        |
| <b>a</b> <i>Paid during the year</i>                                          |                                                                                                           |                                |                                  |        |
| ADOLESCENT CONSULTATION SERVICES INC 189 CAMBRIDGE ST CAMBRIDGE,MA 02141      | NONE                                                                                                      | OTHER PUBLIC CHARITY           | HUMAN SERVICES                   | 1,000  |
| AMERICAN ACADEMY OF ARTS & SCIENCES 136 IRVING STREET CAMBRIDGE,MA 02138      | NONE                                                                                                      | OTHER PUBLIC CHARITY           | EDUCATION                        | 1,550  |
| AMERICAN CANCER SOCIETY 30 SPEEN ST FRAMINGHAM,MA 01701                       | NONE                                                                                                      | OTHER PUBLIC CHARITY           | HEALTH                           | 100    |
| AMERICAN FRIENDS OF SERVICE COMMITTEE 1501 CHERRY ST PHILADELPHIA,PA 19102    | NONE                                                                                                      | OTHER PUBLIC CHARITY           | HUMAN SERVICES                   | 250    |
| ASIAN TASK FORCE AGAINST DOMES VIOLENCE PO BOX 120108 BOSTON,MA 02112         | NONE                                                                                                      | OTHER PUBLIC CHARITY           | HUMAN SERVICES                   | 10,000 |
| ASSOCIATED GRANT MAKERS 133 FEDERAL STREET SUITE 802 BOSTON,MA 02110          | NONE                                                                                                      | OTHER PUBLIC CHARITY           | PUBLIC/SOCIETY BENEFIT           | 4,600  |
| BEACON ACADEMY 477 LONGWOOD AVENUE BOSTON,MA 02215                            | NONE                                                                                                      | OTHER PUBLIC CHARITY           | EDUCATION                        | 500    |
| BOSTON CENTER FOR THE ARTS 539 TREMONT STREET BOSTON,MA 02116                 | NONE                                                                                                      | OTHER PUBLIC CHARITY           | ARTS,CULTURE & HUMANITIES        | 500    |
| BOSTON CHINATOWN NEIGHBORHOOD CENTER 11 MAYHEW STREET DORCHESTER,MA 02125     | NONE                                                                                                      | OTHER PUBLIC CHARITY           | HUMAN SERVICES                   | 37,000 |
| BOSTON DEBATE LEAGUE 31 STATE STREET10TH FLOOR BOSTON,MA 02109                | NONE                                                                                                      | OTHER PUBLIC CHARITY           | EDUCATION                        | 500    |
| BOWDOIN COLLEGE 3725 COLLEGE ST BRUNSWICK,ME 04011                            | NONE                                                                                                      | OTHER PUBLIC CHARITY           | EDUCATION                        | 700    |
| BOYS & GIRLS CLUBS OF BOSTON INC 50 CONGRESS STREET SUITE 730 BOSTON,MA 02109 | NONE                                                                                                      | OTHER PUBLIC CHARITY           | HUMAN SERVICES                   | 67,650 |
| BRANDEIS UNIVERSITY 415 SOUTH ST WALTHAM,MA 02453                             | NONE                                                                                                      | OTHER PUBLIC CHARITY           | EDUCATION                        | 500    |
| BROWN UNIVERSITY 75 WATERMAN STREET PROVIDENCE,RI 02906                       | NONE                                                                                                      | OTHER PUBLIC CHARITY           | EDUCATION                        | 5,000  |
| BUCKINGHAM BROWNE & NICHOLS 80 GERRYS LANDING ROAD CAMBRIDGE,MA 021385512     | NONE                                                                                                      | OTHER PUBLIC CHARITY           | EDUCATION                        | 600    |

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

| Recipient                                                                     | If recipient is an individual, show any relationship to any foundation manager or substantial contributor | Foundation status of recipient | Purpose of grant or contribution | Amount  |
|-------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------|--------------------------------|----------------------------------|---------|
| Name and address (home or business)                                           |                                                                                                           |                                |                                  |         |
| <b>a</b> <i>Paid during the year</i>                                          |                                                                                                           |                                |                                  |         |
| BUTTON HOLE 555 AMORY STREET SUITE 2<br>JAMAICA PLAIN, MA 02130               | NONE                                                                                                      | OTHER PUBLIC CHARITY           | HUMAN SERVICES                   | 1,000   |
| CALIFORNIA COMMUNITY PARTNERS FOR YOUTH PO BOX 578<br>SAN JOSE, CA 95106      | NONE                                                                                                      | OTHER PUBLIC CHARITY           | HUMAN SERVICES                   | 5,000   |
| CENTRO LATINO 267 BROADWAY<br>CHELSEA, MA 021502807                           | NONE                                                                                                      | OTHER PUBLIC CHARITY           | HUMAN SERVICES                   | 45,575  |
| CERES 99 CHAUNCY ST BOSTON, MA 02111                                          | NONE                                                                                                      | OTHER PUBLIC CHARITY           | INTERNATIONAL/FOREIGN AFFAIRS    | 250     |
| CODMAN ACADEMY FOUNDATION 637 WASHINGTON ST<br>BOSTON, MA 02124               | NONE                                                                                                      | OTHER PUBLIC CHARITY           | EDUCATION                        | 2,741   |
| COLLEGE BOUND DORCHESTER 18 SAMOSET ST<br>DORCHESTER, MA 02124                | NONE                                                                                                      | OTHER PUBLIC CHARITY           | HUMAN SERVICES                   | 9,500   |
| COMBINED JEWISH PHILANTHROPIES 126 HIGH ST<br>BOSTON, MA 02110                | NONE                                                                                                      | OTHER PUBLIC CHARITY           | HUMAN SERVICES                   | 67,900  |
| COMPANY ONE 539 TREMONT ST BOSTON, MA 02116                                   | NONE                                                                                                      | OTHER PUBLIC CHARITY           | ARTS, CULTURE & HUMANITIES       | 500     |
| CONSERVATION LAW FOUNDATION 62 SUMMER STREET<br>BOSTON, MA 02110              | NONE                                                                                                      | OTHER PUBLIC CHARITY           | PUBLIC/SOCIETY BENEFIT           | 1,500   |
| CURE ALZHEIMER'S FUND 34 WASHINGTON ST SUITE 200<br>WELLESLEY HILLS, MA 02481 | NONE                                                                                                      | OTHER PUBLIC CHARITY           | HEALTH                           | 10,000  |
| DANA-FARBER CANCER INSTITUTE 450 BROOKLINE AVE<br>BOSTON, MA 02215            | NONE                                                                                                      | OTHER PUBLIC CHARITY           | HEALTH                           | 250     |
| DIMOCK COMMUNITY HEALTH CENTER 45 DIMOCK ST<br>ROXBURY MA, MA 02119           | NONE                                                                                                      | OTHER PUBLIC CHARITY           | HUMAN SERVICES                   | 5,000   |
| DRAKE UNIVERSITY 2507 UNIVERSITY AVE<br>DES MOINES, IA 50311                  | NONE                                                                                                      | OTHER PUBLIC CHARITY           | EDUCATION                        | 167,814 |
| ELLIS MEMORIAL 66 BERKELEY ST<br>BOSTON, MA 02116                             | NONE                                                                                                      | OTHER PUBLIC CHARITY           | HUMAN SERVICES                   | 5,000   |
| FALMOUTH ACADEMY 7 HIGHFIELD DR<br>FALMOUTH MA, MA 02540                      | NONE                                                                                                      | OTHER PUBLIC CHARITY           | EDUCATION                        | 2,500   |

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

| Recipient                                                                               | If recipient is an individual, show any relationship to any foundation manager or substantial contributor | Foundation status of recipient | Purpose of grant or contribution | Amount |
|-----------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------|--------------------------------|----------------------------------|--------|
| Name and address (home or business)                                                     |                                                                                                           |                                |                                  |        |
| <b>a</b> <i>Paid during the year</i>                                                    |                                                                                                           |                                |                                  |        |
| FOUNDATION OF CITY COLLEGE OF SAN FRANCISCO PO BOX 40488<br>SAN FRANCISCO,CA 941400488  | NONE                                                                                                      | OTHER PUBLIC CHARITY           | EDUCATION                        | 700    |
| GENERATION EXCEL 40 WALK HILL STREET<br>JAMAICA PLAIN,MA 02130                          | NONE                                                                                                      | OTHER PUBLIC CHARITY           | HUMAN SERVICES                   | 10,000 |
| GRANTMAKERS CONCERNED WITH IMMIGRANTS & REFUGEES PO BOX 1100<br>SEBASTOPOL,CA 954731100 | NONE                                                                                                      | OTHER PUBLIC CHARITY           | PUBLIC/SOCIETY BENEFIT           | 1,000  |
| HABITAT FOR HUMANITY 240 COMMERCIAL ST 4TH FL<br>BOSTON,MA 02109                        | NONE                                                                                                      | OTHER PUBLIC CHARITY           | HUMAN SERVICES                   | 5,000  |
| HARVARD BUSINESS SCHOOL SOLDIERS FIELD<br>BOSTON,MA 02163                               | NONE                                                                                                      | OTHER PUBLIC CHARITY           | EDUCATION                        | 2,500  |
| HARVARD UNIVERSITY MASSACHUSETTS HALL<br>CAMBRIDGE,MA 02138                             | NONE                                                                                                      | OTHER PUBLIC CHARITY           | EDUCATION                        | 480    |
| HEALTH RESOURCES IN ACTION 95 BERKELEY STREET<br>BOSTON,MA 02116                        | NONE                                                                                                      | OTHER PUBLIC CHARITY           | HEALTH                           | 1,000  |
| HONOLULU MUSEUM OF ART 900 S BERETANIA ST<br>HONOLULU,HI 96814                          | NONE                                                                                                      | OTHER PUBLIC CHARITY           | ARTS, CULTURE & HUMANITIES       | 5,000  |
| INNER-CITY SCHOLARSHIP FUND 1011 FIRST AVENUE 14TH FL<br>NEWYORK,NY 10022               | NONE                                                                                                      | OTHER PUBLIC CHARITY           | EDUCATION                        | 1,500  |
| IRISH INTERNATIONAL IMMIGRANT CENTER 100 FRANKLIN ST<br>BOSTON,MA 02110                 | NONE                                                                                                      | OTHER PUBLIC CHARITY           | HUMAN SERVICES                   | 71,050 |
| JAPAN SOCIETY OF BOSTON 420 POND ST<br>BOSTON,MA 02139                                  | NONE                                                                                                      | OTHER PUBLIC CHARITY           | INTERNATIONAL/FOREIGN AFFAIRS    | 13,785 |
| JEWISH ALLIANCE OF GREATER RHODE ISLAND 401 ELMGROVE AVE<br>PROVIDENCE,RI 02906         | NONE                                                                                                      | OTHER PUBLIC CHARITY           | HUMAN SERVICES                   | 2,500  |
| JEWISH VOCATIONAL SERVICE 29 WINTER ST SUITE 500<br>BOSTON,MA 02108                     | NONE                                                                                                      | OTHER PUBLIC CHARITY           | HUMAN SERVICES                   | 2,500  |
| JOYFUL HEART FOUNDATION 29 WINTER ST SUITE 500<br>BOSTON,MA 02108                       | NONE                                                                                                      | OTHER PUBLIC CHARITY           | HUMAN SERVICES                   | 1,000  |
| JUNIOR ACHIEVEMENT OF NORTHERN NEW ENGLAND 400 5TH AVE 300<br>WALTHAM,MA 02451          | NONE                                                                                                      | OTHER PUBLIC CHARITY           | EDUCATION                        | 200    |

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

| Recipient                                                                                     | If recipient is an individual, show any relationship to any foundation manager or substantial contributor | Foundation status of recipient | Purpose of grant or contribution | Amount |
|-----------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------|--------------------------------|----------------------------------|--------|
| Name and address (home or business)                                                           |                                                                                                           |                                |                                  |        |
| <b>a</b> <i>Paid during the year</i>                                                          |                                                                                                           |                                |                                  |        |
| LONGWOOD SYMPHONY ORCHESTRA PO BOX 886 BROOKLINE,MA 02446                                     | NONE                                                                                                      | OTHER PUBLIC CHARITY           | INTERNATIONAL/FOREIGN AFFAIRS    | 5,000  |
| MASSACHUSETTS ALLIANCE OF PORTUGUESE SPEAKERS (MAPS) 1046 CAMBRIDGE STREET CAMBRIDGE,MA 02139 | NONE                                                                                                      | OTHER PUBLIC CHARITY           | HUMAN SERVICES                   | 53,200 |
| JWLI 301 THE FENWAY BOSTON,MA 02115                                                           | NONE                                                                                                      | OTHER PUBLIC CHARITY           | INTERNATIONAL/FOREIGN AFFAIRS    | 15,382 |
| MARCH OF DIMES - RHODE ISLAND CHAPTER 220 WEST EXCHANGE ST SUITE 003 PROVIDENCE,RI 02903      | NONE                                                                                                      | OTHER PUBLIC CHARITY           | HEALTH                           | 100    |
| MARINE BIOLOGICAL LABORATORY 7 MBL STREET WOODS HOLE,MA 02543                                 | NONE                                                                                                      | OTHER PUBLIC CHARITY           | ENVIRONMENT & ANIMALS            | 200    |
| MASS BREAST CANCER COALITION 333 WEYMOUTH STREET 13 ROCKLAND,MA 02370                         | NONE                                                                                                      | OTHER PUBLIC CHARITY           | HEALTH                           | 250    |
| MASSACHUSETTS ASSOCIATION FOR MENTAL HEALTH 130 BOWDOIN ST BOSTON,MA 02108                    | NONE                                                                                                      | OTHER PUBLIC CHARITY           | HEALTH                           | 1,000  |
| MIRA COALITION 105 CHAUNCY ST 901 BOSTON,MA 02111                                             | NONE                                                                                                      | OTHER PUBLIC CHARITY           | HUMAN SERVICES                   | 69,770 |
| MIT ALUMNI ASSOCIATION 600 MEMORIAL DRIVE W98-2ND FLOOR CAMBRIDGE,MA 021394822                | NONE                                                                                                      | OTHER PUBLIC CHARITY           | EDUCATION                        | 500    |
| MUSEUM OF FINE ARTS 465 HUNTINGTON AVE BOSTON,MA 02115                                        | NONE                                                                                                      | OTHER PUBLIC CHARITY           | ARTS, CULTURE & HUMANITIES       | 5,000  |
| NATIONAL IMMIGRATION FORUM 50 F STREET NW SUITE 300 WASHINGTON,DC 20001                       | NONE                                                                                                      | OTHER PUBLIC CHARITY           | HUMAN SERVICES                   | 3,000  |
| NEIGHBOR TO NEIGHBOR MA EDUCATION FUND 262 WASHINGTON STREET 3RD FL BOSTON,MA 02108           | NONE                                                                                                      | OTHER PUBLIC CHARITY           | HUMAN SERVICES                   | 5,000  |
| NEXT CHAPTER BOOK CLUB C/O TOM FISH 371K MCCAMPBELL HALL 1581 DODD DRIVE COLUMBUS,OH 43210    | NONE                                                                                                      | OTHER PUBLIC CHARITY           | HUMAN SERVICES                   | 33,500 |
| NORTHEASTERN UNIVERSITY 360 HUNTINGTON AVE BOSTON,MA 02115                                    | NONE                                                                                                      | OTHER PUBLIC CHARITY           | EDUCATION                        | 1,000  |
| OXFAM AMERICA 226 CAUSEWAY ST 5 BOSTON,MA 02114                                               | NONE                                                                                                      | OTHER PUBLIC CHARITY           | INTERNATIONAL/FOREIGN AFFAIRS    | 250    |

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

| Recipient                                                                        | If recipient is an individual, show any relationship to any foundation manager or substantial contributor | Foundation status of recipient | Purpose of grant or contribution | Amount |
|----------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------|--------------------------------|----------------------------------|--------|
| Name and address (home or business)                                              |                                                                                                           |                                |                                  |        |
| <b>a</b> <i>Paid during the year</i>                                             |                                                                                                           |                                |                                  |        |
| PELOTONIA 351 WNATIONWIDE BLVD<br>COLUMBUS,OH 43215                              | NONE                                                                                                      | OTHER PUBLIC CHARITY           | HEALTH                           | 1,000  |
| RONALD MCDONALD HOUSE CHARITIES 229 KENT ST<br>BROOKLINE,MA 02446                | NONE                                                                                                      | OTHER PUBLIC CHARITY           | HUMAN SERVICES                   | 100    |
| ROSE F KENNEDY GREENWAY CONSERVANCY 185 KNEELAND ST<br>BOSTON,MA 02111           | NONE                                                                                                      | OTHER PUBLIC CHARITY           | ENVIRONMENT & ANIMALS            | 5,000  |
| SAVE THE BAY 100 SAVE THE BAY DRIVE<br>PROVIDENCE,RI 02905                       | NONE                                                                                                      | OTHER PUBLIC CHARITY           | ENVIRONMENT & ANIMALS            | 1,000  |
| SERVE RHODE ISLAND PO BOX 72822<br>PROVIDENCE,RI 02907                           | NONE                                                                                                      | OTHER PUBLIC CHARITY           | HUMAN SERVICES                   | 500    |
| SIMMONS COLLEGE 300 THE FENWAY<br>BOSTON,MA 02115                                | NONE                                                                                                      | OTHER PUBLIC CHARITY           | HUMAN SERVICES                   | 6,706  |
| SIMMONS COLLEGE 300 THE FENWAY<br>BOSTON,MA 02115                                | NONE                                                                                                      | OTHER PUBLIC CHARITY           | INTERNATIONAL/FOREIGN AFFAIRS    | 33,120 |
| SOUTH BRONX CLASSICAL CHARTER SCHOOL 977 FOX ST<br>BRONX,NY 10459                | NONE                                                                                                      | OTHER PUBLIC CHARITY           | EDUCATION                        | 500    |
| TENACITY INC 38 EVERETT STREET<br>BOSTON,MA 02134                                | NONE                                                                                                      | OTHER PUBLIC CHARITY           | EDUCATION                        | 2,500  |
| THE 300 COMMITTEE 157 LOCUST ST<br>FALMOUTH,MA 02540                             | NONE                                                                                                      | OTHER PUBLIC CHARITY           | ENVIRONMENT & ANIMALS            | 500    |
| THE BOSTON FOUNDATION 75 ARLINGTON STREET 10TH FL<br>BOSTON,MA 02116             | NONE                                                                                                      | OTHER PUBLIC CHARITY           | PUBLIC/SOCIETY BENEFIT           | 20,000 |
| THE COALITION FOR BUZZARDS BAY 114 FRONT ST<br>NEW BEDFORD,MA 02740              | NONE                                                                                                      | OTHER PUBLIC CHARITY           | ENVIRONMENT & ANIMALS            | 25,000 |
| THE FALMOUTH FUND CAPE COD FOUNDATION 259 WILLOW STREET<br>YARMOUTHPORT,MA 02675 | NONE                                                                                                      | OTHER PUBLIC CHARITY           | HUMAN SERVICES                   | 1,300  |
| THE MAY INSTITUTE 41 PACELLA PARK DRIVE<br>RANDOLPH,MA 02368                     | NONE                                                                                                      | OTHER PUBLIC CHARITY           | ARTS,CULTURE & HUMANITIES        | 250    |
| THE SAN MIGUEL SCHOOL 525 BRANCH AVENUE<br>PROVIDENCE,RI 02904                   | NONE                                                                                                      | OTHER PUBLIC CHARITY           | EDUCATION                        | 1,000  |

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

| Recipient                                                                                                            | If recipient is an individual, show any relationship to any foundation manager or substantial contributor | Foundation status of recipient | Purpose of grant or contribution | Amount  |
|----------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------|--------------------------------|----------------------------------|---------|
| Name and address (home or business)                                                                                  |                                                                                                           |                                |                                  |         |
| <b>a</b> <i>Paid during the year</i>                                                                                 |                                                                                                           |                                |                                  |         |
| THE WINSOR SCHOOL 525<br>BRANCH AVENUE<br>PROVIDENCE, RI 02904                                                       | NONE                                                                                                      | OTHER<br>PUBLIC<br>CHARITY     | EDUCATION                        | 3,250   |
| VIET-AID 42 CHARLES ST<br>BOSTON, MA 02122                                                                           | NONE                                                                                                      | OTHER<br>PUBLIC<br>CHARITY     | HUMAN SERVICES                   | 5,000   |
| WHEELOCK FAMILY THEATRE 180<br>RIVERWAY<br>BOSTON, MA 02215                                                          | NONE                                                                                                      | OTHER<br>PUBLIC<br>CHARITY     | ARTS, CULTURE &<br>HUMANITIES    | 500     |
| WOMEN'S LUNCH PLACE 67<br>NEWBURY ST<br>BOSTON, MA 02116                                                             | NONE                                                                                                      | OTHER<br>PUBLIC<br>CHARITY     | HUMAN SERVICES                   | 2,700   |
| <b>Total . . . . .</b>  <b>3a</b> |                                                                                                           |                                |                                  | 876,273 |



|                                                                                                                                   |                                                                                         |                             |
|-----------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------|-----------------------------|
| <div>Schedule B</div> <div>(Form 990, 990-EZ, or 990-PF)</div> <div>Department of the Treasury<br/>Internal Revenue Service</div> | <div>Schedule of Contributors</div> <div>▶ Attach to Form 990, 990-EZ, or 990-PF.</div> | <div>OMB No 1545-0047</div> |
|                                                                                                                                   |                                                                                         | <div>2012</div>             |

|                                                                           |                                                                 |
|---------------------------------------------------------------------------|-----------------------------------------------------------------|
| <div>Name of the organization</div> <div>THE FISH FAMILY FOUNDATION</div> | <div>Employer identification number</div> <div>04-6905753</div> |
|---------------------------------------------------------------------------|-----------------------------------------------------------------|

Organization type (check one)

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

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

General Rule

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

Special Rules

- ☐ For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33<sup>1</sup>/<sub>3</sub>% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of **(1)** \$5,000 or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- ☐ For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, 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, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year. . . . . ▶ \$ \_\_\_\_\_

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

|                                                           |                                                     |
|-----------------------------------------------------------|-----------------------------------------------------|
| <b>Name of organization</b><br>THE FISH FAMILY FOUNDATION | <b>Employer identification number</b><br>04-6905753 |
|-----------------------------------------------------------|-----------------------------------------------------|

|                    |                                                                                                     |                                    |                                                                                                                                                                                  |
|--------------------|-----------------------------------------------------------------------------------------------------|------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Part I</b>      | <b>Contributors</b> (see instructions) Use duplicate copies of Part I if additional space is needed |                                    |                                                                                                                                                                                  |
| <b>(a)<br/>No.</b> | <b>(b)<br/>Name, address, and ZIP + 4</b>                                                           | <b>(c)<br/>Total contributions</b> | <b>(d)<br/>Type of contribution</b>                                                                                                                                              |
| <u>1</u>           | LAWRENCE K FISH<br>C/O FISH FAMILY FDN 75 STATE ST<br><br>BOSTON, MA 02109                          | \$ 470,000                         | Person <input checked="" type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br><br>(Complete Part II if there is a noncash contribution ) |
| <u>2</u>           | LAWRENCE K FISH<br>C/O FISH FAMILY FDN 75 STATE ST<br><br>BOSTON, MA 02108                          | \$ 750,750                         | Person <input type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input checked="" type="checkbox"/><br><br>(Complete Part II if there is a noncash contribution ) |
| <u>3</u>           | LAWRENCE K FISH<br>C/O FISH FAMILY FDN 75 STATE ST<br><br>BOSTON, MA 02108                          | \$ 208,230                         | Person <input type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input checked="" type="checkbox"/><br><br>(Complete Part II if there is a noncash contribution ) |
| <u>4</u>           | LAWRENCE K FISH<br>C/O FISH FAMILY FDN 75 STATE ST<br><br>BOSTON, MA 02108                          | \$ 259,558                         | Person <input type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input checked="" type="checkbox"/><br><br>(Complete Part II if there is a noncash contribution ) |
| <u>5</u>           | BLOOMINGDALES<br>1000 THIRD AVENUE 10TH FLOOR<br><br>NEW YORK, NY 10022                             | \$ 4,706                           | Person <input checked="" type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br><br>(Complete Part II if there is a noncash contribution ) |
| <u>  </u>          |                                                                                                     | \$                                 | Person <input type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br><br>(Complete Part II if there is a noncash contribution )            |

|                                                           |                                                         |
|-----------------------------------------------------------|---------------------------------------------------------|
| <b>Name of organization</b><br>THE FISH FAMILY FOUNDATION | <b>Employer identification number</b><br><br>04-6905753 |
|-----------------------------------------------------------|---------------------------------------------------------|

| Part II             | Noncash Property (see instructions) Use duplicate copies of Part II if additional space is needed |                                                |                      |
|---------------------|---------------------------------------------------------------------------------------------------|------------------------------------------------|----------------------|
| (a) No. from Part I | (b)<br>Description of noncash property given                                                      | (c)<br>FMV (or estimate)<br>(see instructions) | (d)<br>Date received |
| 2                   | 39,000 SHARES OF NATIONAL BANK HOLDINGS CORP CLASS A COMMON STOCK                                 | \$ 750,750                                     | 2012-09-20           |
| (a) No. from Part I | (b)<br>Description of noncash property given                                                      | (c)<br>FMV (or estimate)<br>(see instructions) | (d)<br>Date received |
| 3                   | 11,000 SHARES OF NATIONAL BANK HOLDINGS CORP CLASS A COMMON STOCK                                 | \$ 208,230                                     | 2012-12-27           |
| (a) No. from Part I | (b)<br>Description of noncash property given                                                      | (c)<br>FMV (or estimate)<br>(see instructions) | (d)<br>Date received |
| 4                   | 13,400 SHARES OF NATIONAL BANK HOLDING CORP CLASS A COMMON STOCK                                  | \$ 259,558                                     | 2013-06-26           |
| (a) No. from Part I | (b)<br>Description of noncash property given                                                      | (c)<br>FMV (or estimate)<br>(see instructions) | (d)<br>Date received |
|                     |                                                                                                   | \$                                             |                      |
| (a) No. from Part I | (b)<br>Description of noncash property given                                                      | (c)<br>FMV (or estimate)<br>(see instructions) | (d)<br>Date received |
|                     |                                                                                                   | \$                                             |                      |
| (a) No. from Part I | (b)<br>Description of noncash property given                                                      | (c)<br>FMV (or estimate)<br>(see instructions) | (d)<br>Date received |
|                     |                                                                                                   | \$                                             |                      |
| (a) No. from Part I | (b)<br>Description of noncash property given                                                      | (c)<br>FMV (or estimate)<br>(see instructions) | (d)<br>Date received |
|                     |                                                                                                   | \$                                             |                      |

|                                                           |                                                     |
|-----------------------------------------------------------|-----------------------------------------------------|
| <b>Name of organization</b><br>THE FISH FAMILY FOUNDATION | <b>Employer identification number</b><br>04-6905753 |
|-----------------------------------------------------------|-----------------------------------------------------|

|                 |                                                                                                                                                                                                                                    |
|-----------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Part III</b> | <b>Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations that total more than \$1,000 for the year.</b> Complete columns (a) through (e) and the following line entry |
|                 | For organizations completing Part III, enter the total of <i>exclusively</i> religious, charitable, etc , contributions of <b>\$1,000 or less</b> for the year (Enter this information once See instructions ) ▶ \$                |
|                 | Use duplicate copies of Part III if additional space is needed                                                                                                                                                                     |

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

## TY 2012 Accounting Fees Schedule

**Name:** THE FISH FAMILY FOUNDATION

**EIN:** 04-6905753

| Category             | Amount | Net Investment<br>Income | Adjusted Net<br>Income | Disbursements for<br>Charitable<br>Purposes |
|----------------------|--------|--------------------------|------------------------|---------------------------------------------|
| TAX PREPARATION FEES | 10,250 | 0                        |                        | 10,250                                      |

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

TY 2012 Depreciation Schedule

Name: THE FISH FAMILY FOUNDATION

EIN: 04-6905753

| Description of Property | Date Acquired | Cost or Other Basis | Prior Years' Depreciation | Computation Method | Rate / Life (# of years) | Current Year's Depreciation Expense | Net Investment Income | Adjusted Net Income | Cost of Goods Sold Not Included |
|-------------------------|---------------|---------------------|---------------------------|--------------------|--------------------------|-------------------------------------|-----------------------|---------------------|---------------------------------|
| COMPUTER EQUIPMENT      | 2009-06-30    | 1,492               | 1,492                     | SL                 | 5 0000000000000          | 0                                   | 0                     |                     |                                 |
| OFFICE FURNITURE        | 2009-06-30    | 1,962               | 1,962                     | SL                 | 7 0000000000000          | 0                                   | 0                     |                     |                                 |
| OFFICE PHONES           | 2009-06-30    | 180                 | 180                       | SL                 | 5 0000000000000          | 0                                   | 0                     |                     |                                 |
| OFFICE FURNITURE        | 2009-06-30    | 6,242               | 6,242                     | SL                 | 7 0000000000000          | 0                                   | 0                     |                     |                                 |
| COPIER                  | 2009-06-30    | 401                 | 401                       | SL                 | 5 0000000000000          | 0                                   | 0                     |                     |                                 |
| COM/PHONE SET-UP        | 2009-06-30    | 720                 | 720                       | SL                 | 5 0000000000000          | 0                                   | 0                     |                     |                                 |
| COMPUTER EQUIPMENT      | 2009-06-30    | 963                 | 963                       | SL                 | 5 0000000000000          | 0                                   | 0                     |                     |                                 |
| OFFICE EQUIPMENT        | 2009-06-30    | 1,000               | 567                       | SL                 | 5 0000000000000          | 200                                 | 0                     |                     |                                 |
| IPADS                   | 2012-06-30    | 3,430               | 686                       | SL                 | 5 0000000000000          | 686                                 | 0                     |                     |                                 |

**TY 2012 Investments Corporate  
Stock Schedule**

**Name:** THE FISH FAMILY FOUNDATION

**EIN:** 04-6905753

| Name of Stock               | End of Year Book<br>Value | End of Year Fair<br>Market Value |
|-----------------------------|---------------------------|----------------------------------|
| NATIONAL BANK HOLDINGS CORP | 259,558                   | 261,903                          |

**TY 2012 Investments - Other Schedule****Name:** THE FISH FAMILY FOUNDATION**EIN:** 04-6905753

| Category / Item                | Listed at Cost or FMV | Book Value | End of Year Fair Market Value |
|--------------------------------|-----------------------|------------|-------------------------------|
| INTERACTIVE BROKERS            | AT COST               | 208,153    | 213,506                       |
| JP MORGAN                      | AT COST               | 0          | 0                             |
| ROCKEFELLER                    | AT COST               | 356,132    | 395,163                       |
| LONE CASCADE LP                | AT COST               | 1,027,163  | 1,193,708                     |
| ARISAIG LATIN AMERICA          | AT COST               | 250,000    | 299,260                       |
| ARISAIG ASIA                   | AT COST               | 250,000    | 313,722                       |
| AVENUE EUROPE SPECIAL SIT FUND | AT COST               | 682,183    | 532,267                       |
| RS GLOBAL                      | AT COST               | 0          | 0                             |
| NEWTYN PARTNERS                | AT COST               | 1,023,356  | 809,826                       |
| FIRST REPUBLIC SECURITIES CO.  | AT COST               | 1,721,553  | 2,333,366                     |
| KIG                            | AT COST               | 500,000    | 500,000                       |
| SPRUCE HOUSE                   | AT COST               | 500,894    | 519,186                       |



**TY 2012 Land, Etc. Schedule****Name:** THE FISH FAMILY FOUNDATION**EIN:** 04-6905753

| Category / Item    | Cost / Other Basis | Accumulated Depreciation | Book Value | End of Year Fair Market Value |
|--------------------|--------------------|--------------------------|------------|-------------------------------|
| COMPUTER EQUIPMENT | 1,492              | 1,492                    | 0          |                               |
| OFFICE FURNITURE   | 1,962              | 1,962                    | 0          |                               |
| OFFICE PHONES      | 180                | 180                      | 0          |                               |
| OFFICE FURNITURE   | 6,242              | 6,242                    | 0          |                               |
| COPIER             | 401                | 401                      | 0          |                               |
| COM/PHONE SET-UP   | 720                | 720                      | 0          |                               |
| COMPUTER EQUIPMENT | 963                | 963                      | 0          |                               |
| OFFICE EQUIPMENT   | 1,000              | 767                      | 233        |                               |
| IPADS              | 3,430              | 1,372                    | 2,058      |                               |

## TY 2012 Legal Fees Schedule

**Name:** THE FISH FAMILY FOUNDATION

**EIN:** 04-6905753

| Category   | Amount | Net Investment<br>Income | Adjusted Net<br>Income | Disbursements for<br>Charitable<br>Purposes |
|------------|--------|--------------------------|------------------------|---------------------------------------------|
| LEGAL FEES | 2,030  | 0                        |                        | 2,030                                       |

## TY 2012 Other Expenses Schedule

**Name:** THE FISH FAMILY FOUNDATION

**EIN:** 04-6905753

| Description                    | Revenue and Expenses<br>per Books | Net Investment<br>Income | Adjusted Net Income | Disbursements for<br>Charitable Purposes |
|--------------------------------|-----------------------------------|--------------------------|---------------------|------------------------------------------|
| BANK FEES AND MISCELLANEOUS    | 94                                | 0                        |                     | 94                                       |
| PAYROLL PROCESSING FEES        | 1,660                             | 0                        |                     | 1,660                                    |
| INSURANCE                      | 11,581                            | 0                        |                     | 11,581                                   |
| POSTAGE AND PRINTING           | 1,273                             | 0                        |                     | 1,273                                    |
| SEMINARS AND TRAINING          | 50                                | 0                        |                     | 50                                       |
| REIMBURSED EXPENSES            | 6,370                             | 0                        |                     | 6,370                                    |
| PORTFOLIO DEDUCTIONS PER K-1'S | 25,958                            | 25,958                   |                     | 0                                        |
| MEAL AND ENTERTAINMENT         | 741                               | 0                        |                     | 741                                      |
| IT/TECH                        | 1,827                             | 0                        |                     | 1,827                                    |
| JWLI PROGRAM EXPENSE           | 21,972                            | 0                        |                     | 21,972                                   |
| JDRFB PROGRAM EXPENSE          | 26,740                            | 0                        |                     | 26,740                                   |
| GBCI PROGRAM EXPENSE           | 17,453                            | 0                        |                     | 17,453                                   |
| NONDEDUCTIBLE EXPENSES         | 20                                | 0                        |                     | 0                                        |
| OTHER LOSSES FROM K-1'S        | 66,576                            | 66,576                   |                     | 0                                        |

TY 2012 Other Income Schedule

**Name:** THE FISH FAMILY FOUNDATION

**EIN:** 04-6905753

| Description                 | Revenue And<br>Expenses Per Books | Net Investment<br>Income | Adjusted Net Income |
|-----------------------------|-----------------------------------|--------------------------|---------------------|
| INVESTMENT INCOME PER K-1'S | 383                               | 383                      | 383                 |

**TY 2012 Other Professional Fees Schedule****Name:** THE FISH FAMILY FOUNDATION**EIN:** 04-6905753

| Category             | Amount | Net Investment<br>Income | Adjusted Net<br>Income | Disbursements for<br>Charitable<br>Purposes |
|----------------------|--------|--------------------------|------------------------|---------------------------------------------|
| INVESTMENT MGMT FEES | 16,745 | 16,745                   |                        | 0                                           |
| OUTSIDE SERVICES     | 5,431  | 0                        |                        | 5,431                                       |

## TY 2012 Taxes Schedule

**Name:** THE FISH FAMILY FOUNDATION

**EIN:** 04-6905753

| Category                     | Amount | Net Investment<br>Income | Adjusted Net<br>Income | Disbursements for<br>Charitable<br>Purposes |
|------------------------------|--------|--------------------------|------------------------|---------------------------------------------|
| PAYROLL TAXES                | 16,671 | 814                      |                        | 15,857                                      |
| FOREIGN TAXES PAID PER K-1'S | 1,523  | 1,523                    |                        | 0                                           |
| FEDERAL TAXES                | 3,050  | 0                        |                        | 0                                           |