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## 990-PF

Return of Private Foundation

or Section 4947(a)(1) Trust Treated as Private Foundation

Do not enter Social Security numbers on this form as it may be made public

OMB No 1545-0052

Open to Public Inspection

Department of the Treasury Internal Revenue Service

▶ Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf.

12/27 . 2013, and ending 06/30 2014 For calendar year 2013 or tax year beginning Name of foundation A Employer identification number 02-0811842 STARFISH FUND Number and street (or P O box number if mail is not delivered to street address) Room/suite B Telephone number (see instructions) (202) 621-2477 1528 MARSH WREN LANE City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending check here NAPLES, FL 34105 G Check all that apply X Initial return Initial return of a former public charity D 1 Foreign organizations, check here Final return Amended return 2 Foreign organizations meeting the 85% test check here and attach X Address change Name change computation . . . . . X Section 501(c)(3) exempt private foundation H Check type of organization E If private foundation status was terminated Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation under section 507(b)(1)(A) check here . J Accounting method X Cash Fair market value of all assets at Accrual F If the foundation is in a 60-month termination Other (specify) end of year (from Part II, col (c), line under section 507(b)(1)(B) check here . > 4,989,242. (Part I, column (d) must be on cash basis) *16)* ▶ \$ (d) Disbursements Part I Analysis of Revenue and Expenses (The (a) Revenue and (b) Net investment (c) Adjusted net for charitable total of amounts in columns (b), (c), and (d) expenses per ıncome income purposes may not necessarily equal the amounts in books (cash basis only) column (a) (see instructions) ) 5,000,301 Contributions, gifts grants etc., received (attach schedule) . if the foundation is not required to 2 Check > attach Sch B . . . . . . . . . 148 148 ATCH 1 3 Interest on savings and temporary cash investments Dividends and interest from securities . . . b Net rental income or (loss) Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a Capital gain net income (from Part IV, line 2). Net short-term capital gain . . . . . . . Income modifications -Gross sales less returns and allowances · · b Less Cost of goods sold . c Gross profit or (loss) (attach schedule) Other income (attach schedule) 148 5,000,449. Total Add lines 1 through 11 . . . . Compensation of officers, directors, trustees, etc 13 14 Other employee salaries and wages . . . . . Expenses Pension plans, employee benefits 15 11,000. 16 a Legal fees (attach schedule) ATCH 2 b Accounting fees (attach schedule) Administrative c Other professional fees (attach schedule) . . . 17 18 Taxes (attach schedule) (see instructions) . . . . 19 Depreciation (attach schedule) and depletion. 20 and 21 Travel, conferences, and meetings . . . . . 22 Printing and publications . . . . . . . . . . . . Operating 207 23 Other expenses (attach schedule) ATCH . 3 . Total operating and administrative expenses. 24 11,207 Add lines 13 through 23 . . . . . . . . . Contributions, gifts, grants paid . . . . . . 25 11,207. Total expenses and disbursements Add lines 24 and 25 26 Subtract line 26 from line 12 4,989,242. a Excess of revenue over expenses and disbursements 148 b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-). .

JSA For Paperwork Reduction Act Notice, see instructions.

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Form 990-PF (2013)

Вa	rt II	Attached schedules and amounts in the Balance Sheets description column should be for end-of-year	Beginning of year		End of	f year
U (4		amounts only (See instructions )	(a) Book Value	(b) Book Value		(c) Fair Market Value
	1 (	Cash - non-interest-bearing				
	2	Savings and temporary cash investments		4,263,1	123.	4,263,123.
	3 /	Accounts receivable				
	1	Less allowance for doubtful accounts ▶				
		Pledges receivable			1	
-	1	Less allowance for doubtful accounts ▶	i			
		Grants receivable				
- 1		Receivables due from officers, directors, trustees, and other				
		disqualified persons (attach schedule) (see instructions)				
		Other notes and loans receivable (attach schedule)				
		Less allowance for doubtful accounts ▶				
S						
a	9	Inventories for sale or use Prepaid expenses and deferred charges				
As		Investments - U.S. and state government obligations (attach schedule).				
	v a	Investments - corporate stock (attach schedule) ATCH 4		250.2	299.	250,299.
				20072		
1	1	Investments - corporate bonds (attach schedule) Investments - land, buildings, and equipment basis				
		Less accumulated depreciation (attach schedule)	· · · · · · · · · · · · · · · · · · ·			<del></del>
- 1	2	Investments - mortgage loans	<del></del>			475 000
•	3 14	Investments - other (attach schedule)		475,8	320.	475,820.
'		equipment basis				
		Less accumulated depreciation				
1	15	Other assets (describe				
1		Total assets (to be completed by all filers - see the		_	į	
$\perp$		instructions Also, see page 1, item l)	0	4,989,2	242.	4,989,242.
1	17 .	Accounts payable and accrued expenses				
1	18	Grants payable	·			
<u>ଥ</u> 1		Deferred revenue				
쾰	20	Loans from officers directors, trustees, and other disqualified persons				
abilities	21	Mortgages and other notes payable (attach schedule)				
-74	22	Other liabilities (describe )				
2	23	Total liabilities (add lines 17 through 22)	0		0	•
		Foundations that follow SFAS 117, check here ▶				
S		and complete lines 24 through 26 and lines 30 and 31.			1	
2	24	Unrestricted				
a a		Temporarily restricted				
m z		Permanently restricted				
or Fund Balance		Foundations that do not follow SFAS 117, • X				
Ψ.		check here and complete lines 27 through 31.				
٥		Capital stock, trust principal, or current funds				
انت		Paid-in or capital surplus, or land, bldg, and equipment fund				•
		Retained earnings, accumulated income, endowment, or other funds		4,989,2	42.	
		Total net assets or fund balances (see instructions)	0	4,989,2	42.	
žį		Total liabilities and net assets/fund balances (see		•••		
		instructions)	0	4,989,2	42.	
		Analysis of Changes in Net Assets or Fund	Balances			· ·
		il net assets or fund balances at beginning of year - Part		must agree with T	$\neg \neg$	
•		of-year figure reported on prior year's return).			1	0
2				1	2	4,989,242.
					3	-,,
					4	4,989,242.
4	MUU	lines 1, 2, and 3			5	
2	Dec	il net assets or fund balances at end of year (line 4 minus	line 5). Part II. solume //	h) line 30	6	4,989,242.
ь_	10(2	it tiet assets of tutio balances at end of year (line 4 minus	sine 3) - Partii, Column (i	u), III ie 30	0	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,

(a) List an	d describe the kind(s) of property sold prick warehouse, or common stock, 200	(e g , real estate,	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )
1a			20.12.1011		
b					
С					
d					
е					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo (e) plus (f) min	
a					
b					
С					
d					
e					
Complete only for assets	showing gain in column (h) and own	ed by the foundation on 12/31/69		Gains (Col (h) g	ain minus
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (ı) over col (j), ıf any		(k), but not less Losses (from co	than -0-) or
a					
b					
С					
d			1		
e					
If gain, also enter in Pa Part I, line 8	n or (loss) as defined in sections 1 rt I, line 8, column (c) (see ins	structions) If (loss), enter -0- in $\}$	-		
f "Yes," the foundation does	not qualify under section 4940(e)	<u> </u>			Yes N
	lount in each column for each yea	ar, see the instructions before makin	ig any entr		
(a) Base penod years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets		(d) Distribution (col (b) divided b	
2012			1		
2011					
2010		<u> </u>	<del>- </del>		
2009			·		<del></del>
2008			1		
2 Total of line 1, column (d			2		
	for the 5-year base period - divid	de the total on line 2 by 5, or by the ss than 5 years			
4 Enter the net value of no	ncharitable-use assets for 2013 fr	rom Part X, line 5	4		
5 Multiply line 4 by line 3	5	<del>-</del>			
6 Enter 1% of net investme	ent income (1% of Part I, line 27b)		6		
7 Add lines 5 and 6			7		
8 Enter qualifying distributi If line 8 is equal to or gi Part VI instructions	ons from Part XII, line 4 reater than line 7, check the box	in Part VI, line 1b, and complete	8 that part	using a 1% ta	ax rate See th
JSA		· · · · · · · · · · · · · · · · · · ·		Fo	orm 990-PF (20

<u>Par</u>	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see ii	ıstru	ctions	<u>s)</u>
1 a	Exempt operating foundations described in section 4940(d)(2), check here		-	
	Date of ruling or determination letter (attach copy of letter if necessary - see instructions)			
	Domestic foundations that meet the section 4940(e) requirements in Part V, check			3.
	here and enter 1% of Part I, line 27b			
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b)			•
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 2			
3	Add lines 1 and 2			3.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			0
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0			3.
6	Credits/Payments			
	2013 estimated tax payments and 2012 overpayment credited to 2013   6a			
	Exempt foreign organizations - tax withheld at source. 6b  Tax paid with application for extension of time to file (Form 8868) 6c 250.			
	Tax paid with approached to extension of time to me (i cim occo).			
	Backup withholding erroneously withheld		2	250.
7	Total credits and payments Add lines 6a through 6d			
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed  Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid  Enter the amount of line 10 to be Credited to 2014 estimated tax ▶  247 Refunded ▶ 11			247.
10 11	Enter the amount of line 10 to be Credited to 2014 estimated tax			
	t VII-A Statements Regarding Activities			
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate		Yes	No
	or intervene in any political campaign?	1a		X
ь	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the			
	definition)?	1b		Х
	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			
¢	Did the foundation file Form 1120-POL for this year?	1c		Х
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			
	(1) On the foundation $\blacktriangleright$ \$ (2) On foundation managers $\blacktriangleright$ \$			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on			
	foundation managers   \$			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		X
	If "Yes," attach a detailed description of the activities			
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		X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		X
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		
_	If "Yes," attach the statement required by General Instruction T			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			
	By language in the governing instrument, or  Prostate legislating that officetively amonds the governing instrument so that an amondatory diseases that positively			
	• 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	Х	
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		
	Enter the states to which the foundation reports or with which it is registered (see instructions)			
Ja	FL, VA,			
ь	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)			
-	of each state as required by General Instruction G <sup>2</sup> If "No," attach explanation.	8b	Х	
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 2013 or the taxable year beginning in 2013 (see instructions for Part XIV)? If "Yes," complete			1
	Part XIV	9		Х
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and			
_	addresses ATCH 6	10	Х	

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? . . .

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 2013?

Х

Х

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Total number of other employees paid over \$50,000

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employand Contractors (continued)	yees,
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	
otal number of others receiving over \$50,000 for professional services	
Part IX-A Summary of Direct Charitable Activities	
	T
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
	ļ
1 NONE	
***************************************	
0	
2	1
3	
<b></b>	
4	<del></del> -
·	
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 NONE	
2	
All other program-related investments. See instructions	
3 NONE	
Total Add lines 1 through 3	1

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Par	Minimum Investment Return (All domestic foundations must complete this part. Foreign see instructions.)	gn foundations,	
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.		
	purposes		
а		1a	188,397.
b	Average of monthly cash balances	1b	4,173,066.
С	Fair market value of all other assets (see nstructions)	1c	351,408.
d	Total (add lines 1a, b, and c)	1d	4,712,871.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3		3	4,712,871.
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see		<del></del>
		4	70,693.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	4,642,178.
6	Minimum investment return. Enter 5% of line 5	6	118,280.
Par	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating found and certain foreign organizations check here ► and do not complete this part.)	dations	
1	Minimum investment return from Part X, line 6	1	118,280.
2 а	1 1	<b>'</b>	110,200.
b	Income tax for 2013 (This does not include the tax from Part VI)  2b		
c	Add lines 2s and 2h	2 <sub>C</sub>	3.
3	Distributable amount before adjustments Subtract line 2c from line 1.		118,277.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	118,277.
6	Deduction from distributable amount (see instructions)		
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,		
	line 1	7	118,277.
		<del>1 </del>	<del></del>
Par	t XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
а		1 1a	
b		1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
а		3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income		
	Enter 1% of Part I, line 27b (see instructions)		0
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	
	Note The amount on line 6 will be used in Part V, column (b), in subsequent years when co	calculating whether	er the foundation
	qualifies for the section 4940(e) reduction of tax in those years		

Рa	rt XIII. Undistributed Income (see instru	ctions)			
1	Distributable amount for 2013 from Part XI,	(a) Corpus	(b) Years prior to 2012	(c) 2012	<b>(d)</b> 2013
•	· F	·- <u>····</u>			118,277.
2	Undistributed income, if any, as of the end of 2013	·.···			
	Enter amount for 2012 only				
	Total for prior years 20 11 ,20 10 ,20 09				
		<del></del>			
3	Excess distributions carryover, if any, to 2013				
	From 2008				
b	From 2009		!		,
С	From 2010				
d	From 2011				
	From 2012				
f	Total of lines 3a through e				<del></del>
4	Qualifying distributions for 2013 from Part XII,				
	line 4 ▶ \$				
а	Applied to 2012, but not more than line 2a				
b	Applied to undistributed income of prior years				
	(Election required - see instructions)				
С	Treated as distributions out of corpus (Election required - see instructions)				
ч	Applied to 2013 distributable amount				
	Remaining amount distributed out of corpus				
5	Excess distributions carryover applied to 2013	<del> </del>	<del> </del>	·	
3	(If an amount appears in column (d), the same	· · · ·			
	amount must be shown in column (a) )				
6	Enter the net total of each column as indicated below:				
2	Corpus Add lines 3f, 4c, and 4e Subtract line 5				
	· · · · · · · · · · · · · · · · · · ·				•
D	Prior years' undistributed income Subtract line 4b from line 2b				
С	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				
d	Subtract line 6c from line 6b Taxable				
	amount - see instructions Undistributed income for 2012 Subtract line				<del>                                     </del>
·	4a from line 2a Taxable amount - see				
	instructions				
f	Undistributed income for 2013 Subtract lines		1		
	4d and 5 from line 1. This amount must be				118,277.
	distributed in 2014				110,277.
7	Amounts treated as distributions out of corpus		ļ		
	to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (see instructions)				
8	Excess distributions carryover from 2008 not				
	applied on line 5 or line 7 (see instructions)		·		
9	Excess distributions carryover to 2014.	_	,		
	Subtract lines 7 and 8 from line 6a	(	1		
	Analysis of line 9				
	Excess from 2009				
	Excess from 2010				
	Excess from 2011				
	Excess from 2012				
_ e	Excess from 2013		<u> </u>		<u> L</u>

Pa	rt XIV Private Ope	erating Foundations	(see instructions ar	nd Part VII-A, quest	ion 9)	NOT APPLICABLE
1 a	If the foundation has i	J		•	ating	
	foundation, and the ruling	; is effective for 2013, er	nter the date of the ruling			· · · · · · · · · · · · · · · · · · ·
b	Check box to indicate wh	ether the foundation is a	private operating found	ation described in section	1 4942(j	)(3) or 4942(j)(5)
2 a	Enter the lesser of the ad-	Tax year	<del></del>	Prior 3 years		(e) Total
	justed net income from Part	(a) 2013	(b) 2012	(c) 2011	(d) 2010	
	I or the minimum investment return from Part X for each	-				
	year listed					
b	85% of line 2a					
	Qualifying distributions from Part					
Ĭ	XII line 4 for each year listed .					
d	Amounts included in line 2c not					
	used directly for active conduct of exempt activities					
е	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					
а	'Assets" alternative test - enter					
	(1) Value of all assets (2) Value of assets qualifying				<del>-  </del>	<del></del>
	under section					`
<b>.</b>	4942(j)(3)(B)(i)			<del> </del>		
	enter 2/3 of minimum invest-	,				
	ment return shown in Part X,					
_	line 6 for each year listed				+	<del> </del>
C	"Support" alternative test - enter (1) Total support other than					
	gross investment income					
	(interest dividends rents payments on securities			1		
	loans (section 512(a)(5))					
	or royalties) (2) Support from general					<del> </del>
	public and 5 or more					
	exempt organizations as provided in section 4942					
	(j)(3)(B)(III)		<del>                                     </del>			
	<li>(3) Largest amount of sup- port from an exempt</li>					
	organization			ļ	<del></del>	
	(4) Gross investment income	1 - 1 - 1 - 1 - 1	Clote this was	A culti if Abo form	detion had \$5 000	
12		ntary information ( e during the year - s		t only if the foun	dation had \$5,000	or more in assets
		g Foundation Manage				
١.	a List any managers of			re than 2% of the to	tal contributions rece	ived by the foundation
•	before the close of an	y tax year (but only if th	ney have contributed	more than \$5,000) (	See section 507(d)(2)	)
	ALBERT LOR		•			
	b List any managers of		own 10% or more o	of the stock of a cor	noration (or an equa	lly large portion of the
		rship or other entity) o				ly large portion or the
	omnoromp or a partire			J		
	N/A					
		ng Contribution, Grant	t Gift Loan Scholars	hin etc. Programs:	<del> </del>	· · · · · ·
_	<u> </u>	-			vitable eracaizations	and door not accord
	Uneck here \[ \( \frac{1}{2} \) If	the foundation only for funds of the found	makes contributions	ants etc (see instru	ictions) to individuals	and does not accept or organizations under
		plete items 2a, b, c, ar		arito, 010 (000 motra	iotionio, to marriagaio	or organizations and or
	a The name, address, a	•		the person to whom a	ipplications should be a	ddressed
	a The hame, address, a	and telephone number	or c-mail address or	the person to whom e	ipplications should be a	40.0000
_	b The form in which app	olications should be su	ibmitted and informat	on and materials the	y should include	
					•	
_						<del></del>
	c Any submission dead	ines				
_	d Any restrictions or	imitations on awards	s, such as by geogr	aphical areas, chari	table fields, kinds of	institutions, or other
	factors					

Part XV Supplementary Information (continued)							
3 Grants and Contributions Paid Duri							
Recipient	If recipient is an individual show any relationship to any foundation manager or substantial contributor	Foundation status of		Amount			
Name and address (home or business)	any foundation manager or substantial contributor	recipient	Purpose of grant or contribution	Amount			
a Paid during the year							
		1					
		ł					
		į					
			1				
Total		<del></del>	▶ 3a				
<b>b</b> Approved for future payment			<u> </u>				
	,	1					
			ļ				
			1				
		<u> </u>					
Total			▶ 3b				

	A Analysis of Income-Produ amounts unless otherwise indicated		ated business income	Excluded by	y section 512, 513, or 514	(e)
•	service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions)
•						(See instructions)
. —		-				
_						
f						
g Fees a	and contracts from government agencies					
Members	ship dues and assessments					
	n savings and temporary cash investments			14	148.	
	is and interest from securities					
	al income or (loss) from real estate					
	-financed property	<u> </u>				
	debt-financed property					
	I income or (loss) from personal property .	<del></del>				
	vestment income					
	oss) from sales of assets other than inventory			<del></del>		
	me or (loss) from special events					
	rofit or (loss) from sales of inventory.					
_	venue a					
_		ļ				
					<del> </del>	<del></del>
d				į.	ļ.	
d					148.	
d e Subtotal	Add columns (b), (d), and (e)					l
e Subtotal Total Adee worksh	Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calc	ulations) to the Ac	complishment of E	xempt Purp		14
d e Subtotal Total Acee worksh	Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calc	ulations) s to the Ac	ccomplishment of E	xempt Purp	Doses e) of Part XVI-A contrib	14 uted importantly to
d e Subtotal Total Ac e workst art XVI-	Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calcompleted Relationship of Activities  Explain below how each activities	ulations) s to the Ac	ccomplishment of E	xempt Purp	Doses e) of Part XVI-A contrib	1 ·
d e Subtotal Total Ade worksh	Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calcompleted Relationship of Activities  Explain below how each activities	ulations) s to the Ac	ccomplishment of E	xempt Purp	Doses e) of Part XVI-A contrib	1 uted importantly to
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Subtotal  Fotal Ac  worksh  rt XVI-	Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calcompleted Relationship of Activities  Explain below how each activities	ulations) s to the Ac	ccomplishment of E	xempt Purp	Doses e) of Part XVI-A contrib	1 uted importantly to
Subtotal Fotal Ac e worksh rt XVI-	Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calcompleted Relationship of Activities  Explain below how each activities	ulations) s to the Ac	ccomplishment of E	xempt Purp	Doses e) of Part XVI-A contrib	1 uted importantly to
Subtotal Total Ace worksh	Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calcompleted Relationship of Activities  Explain below how each activities	ulations) s to the Ac	ccomplishment of E	xempt Purp	Doses e) of Part XVI-A contrib	1 uted importantly to
Subtotal Total Ace worksh	Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calcompleted Relationship of Activities  Explain below how each activities	ulations) s to the Ac	ccomplishment of E	xempt Purp	Doses e) of Part XVI-A contrib	1 uted importantly to
Subtotal Total Ace worksh	Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calcompleted Relationship of Activities  Explain below how each activities	ulations) s to the Ac	ccomplishment of E	xempt Purp	Doses e) of Part XVI-A contrib	1 uted importantly to
d e Subtotal Total Ade worksh	Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calcompleted Relationship of Activities  Explain below how each activities	ulations) s to the Ac	ccomplishment of E	xempt Purp	Doses e) of Part XVI-A contrib	1 uted importantly to
d e Subtotal Total Ade worksh	Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calcompleted Relationship of Activities  Explain below how each activities	ulations) s to the Ac	ccomplishment of E	xempt Purp	Doses e) of Part XVI-A contrib	1 uted importantly to
d e Subtotal Total Ac e workst art XVI-	Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calcompleted Relationship of Activities  Explain below how each activities	ulations) s to the Ac	ccomplishment of E	xempt Purp	Doses e) of Part XVI-A contrib	1 uted importantly to
e Subtotal Total Acee worksh	Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calcompleted Relationship of Activities  Explain below how each activities	ulations) s to the Ac	ccomplishment of E	xempt Purp	Doses e) of Part XVI-A contrib	1 uted importantly to

		Exempt Organ	izations									
1 Di	d the	organization directl	y or indirectly er	ngage in any of the	following	with any	other organ	ization d	escribed		Yes	No
ın	section	on 501(c) of the Co	de (other than se	ection 501(c)(3) orga	anızatıons)	or in sec	tion 527, re	lating to	political	.		
or	ganıza	ations?								i		
a Tr	ansfe	rs from the reporting	g foundation to a	noncharitable exem	pt organiza	ation of						
(1	) Casl	n		<i></i>					'	1a(1)		X
(2	) Othe	er assets								1a(2)		X
		ansactions										
(1	) Sale	es of assets to a nor	ncharitable exemi	ot organization					<b>.</b> .	16(1)		X
				le exempt organizatio						1b(2)		X
				ssets						1b(3)		X
										1b(4)		X
										1b(5)		X
				or fundraising solicit						1b(6)		X
c Si	haring	of facilities, equipm	nent, mailing lists	, other assets, or pa	d employe	es			<b></b>	1c		X
d lf	the a	nswer to any of th	e above is "Yes,	" complete the follow	owing sch	edule Co	olumn (b) st	ould alv	vays show	the f	faır n	narket
				es given by the repo								
Vā	alue in	any transaction or	sharing arrange	ment, show in colu	mn (d) the	value of	the goods,	other as	sets, or s	ervice	s rec	eived
(a) Line	no	(b) Amount involved	(c) Name of no	ncharitable exempt organiz	ation	(d) Descri	ption of transfei	s, transacti	ons and sha	ring arra	ngeme	nts
		N/A				N/A					<u> </u>	
						<del></del>						
		•	•	iated with, or relate					T. C.		_	-1
d	escrib	ed in section 501(c)	) of the Code (oth	er than section 501	(c)(3)) or ıı	section	527?		<i>.</i> l	Y	′es 🔼	No
<u>b</u> If	"Yes,	" complete the follo	wing schedule					<del></del>				
		(a) Name of organizatio	n	(b) Type of org	anization		(0	) Descripti	on of relations	hip		_ <del>-</del>
					-							
												-
	100.20	analtes of an	less that I have a see	ad this roture includes and	ompoor:00 5-h	adulas and n	tatements and to	the best o	f my knowledo	e and	helief :	l is toin
	correc	t and complete Declaration of	of preparer (other than tax	ed this return, including acc (payer) is based on all informa	tion of which pr	eparer has an	y knowledge	tile dest d	i iliy kilowledg	e ano	Dellei, I	15 1146
Sign			_ ( )	17-6-15		DOE	SIJENT	-	May the IRS			
Here			<u> </u>	Data Data	<u> </u>	Title	SIGENI		with the pro	_	X Yes	below
_	Sign	ature of officer or trustee		Date		i ille		'	(see instruction	») / L	Yes	No
	ــــــــــــــــــــــــــــــــــــــ	Print/Type preparer's na		Preparer's signature			Date	Che	ock if F	PTIN		
Paid		NANCY O'DOHE		Many 01	July to	CPA	2/2/20	self	" [ " ]	P 0 0	7408	56
Prepa	arer		NNE L. STONE				7-7	Firm's EIN	<u> </u>			<del></del> -
Use (		1 11111 6 1161116		N BRIDGE RD,		125		5 [11]				
JJC (	,		CLEAN, VA			221	01	Phone no	703-8	17-	1350	

## Schedule B .

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

Department of the Treasury Internal Revenue Service

## **Schedule of Contributors**

► Attach to Form 990, Form 990-EZ, or Form 990-PF

▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs gov/form990

OMB No 1545-0047

STARFISH FUND			Employer identification number	
SIARFISH FOND			02-0811842	
Organization type (check on	e)			
Filers of	Section <sup>.</sup>			
Form 990 or 990-EZ	501(c)( ) (enter number) organization			
	4947(a)(1) nonexempt charitable trust not treated a	as a private foi	undation	
	527 political organization			
Form 990-PF	X 501(c)(3) exempt private foundation			
	4947(a)(1) nonexempt charitable trust treated as a	private founda	tion	
	501(c)(3) taxable private foundation			
	s covered by the <b>General Rule</b> or a <b>Special Rule</b> . (7), (8), or (10) organization can check boxes for both the Gene	ral Rule and a	Specal Rule See	
	in filing Form 990, 990-EZ, or 990-PF that received, during the gone contributor. Complete Parts I and II	∍ year, \$5,000	or more (in money or	
Special Rules				
under sections 509	(c)(3) organization filing Form 990 or 990-EZ that met the 33 19(a)(1) and 170(b)(1)(A)(vi) and received from any one contrib \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line and II	butor, during th	ne year, a contribution of	
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				
during the year, co not total to more to year for an exclusion	(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that contributions for use <i>exclusively</i> for religious, charitable, etc., put han \$1,000. If this box is checked, enter here the total contributively religious, charitable, etc., purpose. Do not complete any of anization because it received <i>nonexclusively</i> religious, charitable ear	urposes, but the utions that wer of the parts unle le, etc , contrib	ese contributions did re received during the iss the <b>General Rule</b> outions of \$5,000 or	
990-EZ, or 990-PF), but it mi	at is not covered by the General Rule and/or the Special Rules ust answer "No" on Part IV, line 2, of its Form 990, or check the certify that it does not meet the filing requirements of Scheological Rules and the second requirements of Scheological Rules and the second requirements of Scheological Rules and Rules a	s does not file S the box on line	Schedule B (Form 990, H of its Form 990-EZ or on its	
			·	

Employer identification number 02-0811842

Part I	Contributors (see instructions) Use duplicate copies of Pai	rt I if additional space is need	ded
(a) No	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1_	ALBERT & SUZANNE LORD  1528 MARSH WREN LANE  NAPLES, FL 34105	\$5,000,301.	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)

Employer identification number

picyci	raciianoaaon	
	02-081	18/2

Part II	Noncash Property (see instructions) Use duplicate copies of Pai	rt II if additional space is nee	eded
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
~ <b>~ ~</b> =		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
		<u> </u>	<u> </u>

	rganization STARFISH FUND		Employer identification number
•			02-0811842
art III	Exclusively religious, charitable, etc., i that total more than \$1,000 for the year For organizations completing Part III, en contributions of \$1,000 or less for the year.	ar. Complete columns (a) th ter the total of <i>exclusively</i> re	ligious, charitable, etc.
	Use duplicate copies of Part III if addition		, , , , , , , , , , , , , , , , , , , ,
(a) No. from 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. from 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		Relationship of transferor to transferee
(a) No			
from Part l	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
. <b>– –</b> –			
	(e) Transfer of gift		
	Transferee's name, address, and	ZIP + 4	Relationship of transferor to transferee
(a) No. from 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

	ADJUSTED NET INCOME		
	NET INVESTMENT INCOME	148.	148.
ON TEMPORARY CASH INVESTMENTS	REVENUE AND EXPENSES PER BOOKS	148.	148.
FORM 990PF, PART I - INTEREST ON TEMPORARY C	ION	LYNCH	TOTAL
FORM 990	DESCRIPTION	MERRILL LYNCH	

	CHARITABLE PURPOSES		
	ADJUSTED NET INCOME		
	NET INVESTMENT INCOME		
	REVENUE AND EXPENSES PER BOOKS	11,000.	11,000.
LEGAL FEES			TOTALS
FORM 990PF, PART I - LEGAL FEES	DESCRIPTION	ANNE L STONE & ASSOC	

	11
	REVENUE
	AND
	EXPENSES
DESCRIPTION	PER BOOKS
BANK FEES	18
REGISTRATIONS	2

CHARITABLE PURPOSES	
ADJUSTED NET INCOME	
NET INVESTMENT INCOME	
REVENUE AND EXPENSES PER BOOKS 180.	207.
	TOTALS
SSCRIPTION NK FEES GISTRATIONS	

STOCK	
CORPORATE	
1	
ΙI	
PART	
990PF,	
FORM	

ENDING <u>FMV</u>	250,299.	250.299.
ENDING BOOK VALUE	250,299.	250.299.
		S. I & F. C. F.
DESCRIPTION	540 SKAI INC	

HER INVESTMENTS
OTHER
1
II
PART
990PF,
FORM

ENDING	330,000. 145,820.	475,820.
ENDING BOOK VALUE	330,000.	475,820.
DESCRIPTION	BACKPACK ENTERPRISES LLC FTV IV LP	TOTALS

# NAME AND ADDRESS

ALBERT & SUZANNE LORD 1528 MARSH WREN LANE NAPLES, FL 34105

NAME AND ADDRESS

TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION

ALBERT L LORD JR

PRESIDENT/DIRECTOR

1528 MARSH WREN LANE NAPLES, FL 34105

ESIDENT/DIRE 2.00

SUZANNE D LORD

DIRECTOR

1528 MARSH WREN LANE NAPLES, FL 34105

1.00

ALBERT L LORD III

DIRECTOR

1528 MARSH WREN LANE NAPLES, FL 34105

1.00

CHRISTINE L DEGUZEMAN

SECRETARY/DIRECTOR 1.00

1528 MARSH WREN LANE NAPLES, FL 34105

### FEDERAL FOOTNOTES

STATEMENT - PART VII-B

DURING TAX YEAR, A BOOKEEPING ERROR RESULTED IN A PAYMENT BEING MADE ON BEHALF OF A DISQUALIFIED PERSON; REIMBURSEMENT WAS MADE PROMPTLY UPON DISCOVERY OF TRANSACTION. THERE WAS NO INTENTION TO MAKE AN ADVANCE TO A DISQUALIFIED PERSON AND NO IMPACT ON THE FOUNDATION AS A RESULT OF THIS ERROR.

## Form 8868

(Rev. January 2014)

Department of the Treasury Internal Revenue Service

# Application for Extension of Time To File an Exempt Organization Return

► File a separate application for each return
► Information about Form 8868 and its instructions is at www.irs.gov/form8868

OMB No 1545-1709

Form 8868 (Rev 1-2014)

▶ | X |

• If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box • If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form) Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868 Electronic filing (e-file) You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions) For more details on the electronic filing of this form, visit www irs gov/efile and click on e-file for Chanlies & Nonprofits Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed) A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete All other corporations (including 1120-C fileis), partnerships, REMCs, and trusts mist use Form 7004 to request an extension of time to file income tax returns Enter filer's identifying number, see instructions Name of exempt organization or other filer, see instructions Employer identification number (EIN) or Type or print 02-0811842 STARFISH FUND File by the Number, street, and room or suite no. If a P.O. box, see instructions Social security number (SSN) due date for 4951 GULF SHORE BOULEVARD NORTH filing your return See City, town or post office, state, and ZIP code. For a foreign address, see instructions instructions NAPELS, FL 34103 0 4 Enter the Return code for the return that this application is for (file a separate application for each return) Application Return Application Return Code Code Is For Is For Form 990 or Form 990-EZ Form 990-T (corporation) 07 01 02 Form 1041-A 08 Form 990-BL Form 4720 (other than individual) Form 4720 (individual) 03 09 Form 990-PF 04 Form 5227 10 Form 990-T (sec 401(a) or 408(a) trust) 05 Form 6069 11 Form 990-T (trust other than above) 06 Form 8870 12 • The books are in the care of ▶REGINA MANVILLE, 701 PENNSYLVANIA AVE, NW SUITE 700 WASHINGTON, DC 20 Telephone No ► 202 621-2477 FAX No ▶ If the organization does not have an office or place of business in the United States, check this box . . . . If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for the whole group, check this box .... • If it is for part of the group, check this box .... a list with the names and EINs of all members the extension is for I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until 02/15, 2015, to file the exempt organization return for the organization named above. The extension is for the organization's return for calendar year 20 or ► X tax year beginning 12/27 , 2013 , and ending 06/30 . 2014 If the tax year entered in line 1 is for less than 12 months, check reason X Initial return Final return Change in accounting period 3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions 250. 3a | \$ b If this application is for Form 990-PF, 990-T. 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit 36 \$ c Balance due Subtract line 3b from line 3a Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System) See instructions 250. Caution If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment

instructions

For Privacy Act and Paperwork Reduction Act Notice, see instructions