SCANNED FEB 1 4 2019 0/0

EXTENDED TO NOVEMBER 15, 2018 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.

• Go to www.irs.gov/Form990PF for instructions and the latest information.

2017

		ndar year 2017 or tax year beginning		, and end	tina				1_050,	45.10	
		of foundation		, and the		A Fm	plove	r identification	number		
ING	nic U	or roundation				, Lill	P.0301				
W	ΊΙ	LIAM H. HARRIS FOUNDAT	ION			0	4-6	5197960			
		and street (or P O box number if mail is not delivered to stree		F	Room/suite			e number			
1	9	WINDEMERE CIRCLE						-848-31	87		
City	or '	town, state or province, country, and ZIP or foreign	postal code			C If ex	emptio	n application is p	ending, check	here	
В	BRAINTREE, MA 02184										'
G	Chec	k all that apply: Initial return	Initial return of a fo	ormer public ch	arity	D 1 I	oreigi	n organizations	, check her	e	ightharpoons
		Final return	Amended return				_				
		Address change	Name change			2 1	oreign check h	organizations me ere and attach co	eting the 85% mputation	test,	
, H_(hec	k type of organization: X Section 501(c)(3) ϵ	exempt private foundation		DH.	E If p	rivate	foundation stat	tus was tern	nınated	ı
<u>ا</u> ر	_l s	ection 4947(a)(1) nonexempt charitable trust	Other taxable private founda	ation		uno	der sec	tion 507(b)(1)	(A), check h	iere	
и		· —	ting method. LXJ Cash	Accrua	al	F Iftl	ne four	ndation is in a (30-month te	rminat	юп
4 (11		Part II, col. (c), line 16)	Other (specify)			und	der sec	tion 507(b)(1)	(B), check t	iere	
	-\$	7,538,507. (Part I, colu	mn (d) must be on cash basi	IS.)							
Pa	<u>art</u>	(The total of amounts in columns (b), (c), and (d) may not	(a) Revenue and	(b) Net inve		(usted net	for charit		poses
		necessarily equal the amounts in column (a))	expenses per books	incon			IIIC	come	(cash	basis or	nly)
	1		100,000.								
	2	Check If the foundation is not required to attach Sch. B. Interest on savings and temporary	854		D F 1				2 m 3 m m		m 1
	3	cash investments	751.	110	751.				STATE		
	4	Dividends and interest from securities 7	117,396.	117	<u>,179.</u>				STATE	WEN.	T 2
	Ι .	a Gross rents									
	١.	Net rental income or (loss)	222 454					RECE	VED	$\overline{}$	
e	0	Net gain or (loss) from sale of assets not on line 10 Gross sales price for all 1,169,435.	333,454.				1			ᄀ	
Revenue	,			333	3,454.		247	NOV 2 (2018	18	
Ŗ	8	Capital gain net income (from Part IV, line 2) Net short-term capital gain		333	, 434.			NOV B	2010	18	
	9	Income modifications								<u> 쓸</u>	
	l -	Gross sales less returns and allowances						OGDE	N, UT	-	···
	1.	b Less Cost of goods sold									
	1	c Gross profit or (loss)	1			-					
	11		359,568.	359	,568.			0.	STATE	MEN	т 3
	12	Total Add lines 1 through 11	911,169.		,952.			0.			
	13	Compensation of officers, directors, trustees, etc	0.	-	0.			0.			0.
	14	Other employee salaries and wages									
	15	Pension plans, employee benefits									
ses	16	a Legal fees									
Je n	ı	b Accounting fees									
Ä	(c Other professional fees									
<u>ĕ</u> .	17								_		
trat	18		2,070.	2	2,054.			0.			0.
nis	19	Depreciation and depletion									
Ē	20	• •									
Ă	21										
ä	22				405						000
Operating and Administrative Expense	23		87,881.	61	.,105.			0.		<u>25,</u>	000.
rat	24		00 051		150			^		2 -	000
ö	-	expenses Add lines 13 through 23	89,951.	6.5	159.	-		0.	1 2	<u>43,</u>	000. 476.
_	25	, , , , , ,	1,210,476.		· · · · · · · · · · · · · · · · · · ·	 			1,4	<u> </u>	4 /0.
	26	•	1,300,427.	6.2	3,159.			0.	1 2	35	476.
	27	Add lines 24 and 25 Subtract line 26 from line 12;	1,300,42/	0.3	, <u>, , , , , , , , , , , , , , , , , , </u>			<u> </u>	1,4	<u>, , , , , , , , , , , , , , , , , , , </u>	1 /0.
	l .		-389,258.								
		Excess of revenue over expenses and disbursements Net investment income (if negative, enter -0-)	307,230.	747	7,793.	\vdash					
	1	C Adjusted net income (if negative, enter -0-)	··	, = ,	, , , , , , ,			0.			
	<u> </u>	- rialanta una magnia (u nodente, einer -e-)		 							

Cast - non-interscheams (a) Book Value (b) Book Value (c) Far Market Value (d) Book Value (d) Book Value (e) Bo	101	m 99	0-PF (2017) WILLIAM H. HARRIS FOUND			-619/960 Page 2
1 Gush - nor-interest-bearing 981, 153 442, 197 442, 197	P	art	Balance Sheets Attached schedules and amounts in the description	Beginning of year		
2 Savings and temporary cash investments Accounts receivable ► Less, allowance for doubtful accounts ► A Photoge receivable ■ Less, allowance for doubtful accounts ► 6 Grants receivable 5 Grants receivable 6 Receivable due from officiers, directors, trustees, and other disposal for the return of the filter of the control of the filter of the	<u> </u>	ui t	column snould be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
Less allowance for robubble accounts ► Less allowance for doubbled accounts ► Less allowance for doubbled accounts ► Strains receivable ←		1 `	Cash - non-interest-bearing			
Less, allowance for coubtful accounts		2	Savings and temporary cash investments	98 <u>1,153.</u>	442,197.	442,197.
Less, allowance for coubtful accounts		3	Accounts receivable ►			1
Pricegor recovable Less altowards Script receivable Less altowards for doubtful accounts Script receivable Script		•				
Security control for country accounts Security country		1				
S Carrier receivable 6 Receivable due from officers, directors, trustees, and other dequalified persons 7 Onto instant abusin excessal 1 Less; allowance for doubtful accounts 2 Prepared expenses and deferred charges 1 Value investments - corporate bonds 1 Investments - corporate bonds 1 Investments - comprate bonds 1 Investments - moritarge loans 1 Investments		7			· · + ·	
6 Receasibles due from officers, directors, trustees, and other disqualified persons 7 Ome robe set less movement in movement of the control		_ ا				
## Description of the company of th		1 -		_		
The enterant least removable Less: allowance for doubtful accounts be livestiments. U.S. and state government obligations be livestiments. U.S. and state government obligations. U.S. and st		6				
B Inventiones for sale or use 8 Inventiones for sale or use 9 Prepaid expenses and deferred charges 10 Investments - Copyral soloto c Investments - Copyral soloto 11 Investments - Copyral soloto c Investments - Copyral soloto 12 Investments - Copyral soloto 13 Investments - Copyral soloto 14 Investments - Copyral soloto 15 Investments - Copyral soloto 16 Investments - Copyral soloto 17 Investments - Copyral soloto 18 Investments - Copyral soloto 19 Investments - Copyral soloto 10 Investments - Copyral soloto 11 Investments - Copyral soloto 12 Investments - Copyral soloto 13 Investments - Copyral soloto 14 Investments - Copyral soloto 15 Investments - Copyral soloto 16 Investments - Copyral soloto 17 Investments - Copyral soloto 18 Investments - Copyral soloto 19 Investments - Copyral soloto 19 Investments - Copyral soloto 19 Investments - Copyral soloto 10 Investments - Copyral			disqualified persons			
December Proposed expenses and deferred charges Proposed expenses Proposed		7	Other notes and loans receivable			
Prepare expenses and deferred charges			Less: allowance for doubtful accounts ▶			
1	S	8	Inventories for sale or use			
1	se	9	Prepaid expenses and deferred charges			
Investments - corporate stock C Investments - corporate bonds T Investments - corporate bond	As					
Convestments - corporate bonds 11 Investments - indications 12 Investments - mortragae loans 13 Investments - mortragae loans 13 Investments - mortragae loans 13 Investments - other STATEMENT 9 23,677		1	_	1 249 455	1 083 393	1 285 949.
11 Investments - Land, subtlings, and equipment basis				1,245,455.	1,000,000	1,203,3131
12 Investments - other STMT 8			<u>.</u>			+
12 Investments - mortgage loans 13 Investments - other STMT 8 4,711,615 5,046,310 5,791,757 14 Land, buildings, and equipment basis		11	Investments - land, buildings, and equipment basis			
13 Investments - other			· · · · · · · · · · · · · · · · · · ·			
14 Land, buildings, and equipment basis		12	Investments - mortgage loans			
15 Other assets (describle		13	Investments - other STMT 8	4,711,615.	5,046,310.	5,791,757.
15 Other assets (describe STATEMENT 9 23,677 18,604 18,6		14	Land, buildings, and equipment: basis			l
16 Total assets (to be completed by all filers - see the instructions. Also, see page 1, tem 1)			Less accumulated depreciation			
16 Total assets (to be completed by all filers - see the instructions. Also, see page 1, tem 1)		15	Other assets (describe STATEMENT 9)	23,677.	18,604.	18,604.
mstructions. Also, see page 1, item						
17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue		'	•	6 965 900	6 590 504	7 538 507.
18 Grants payable 19 Deterred revenue 20 Loans from officers, directors, trustess, and other disqualified persons 21 Mortgages and other notes payable 22 Other liabilities (add lines 17 through 22) 23 Total liabilities (add lines 17 through 22) 24 Unrestricted 25 Temporarily restricted 26 Permanently restricted 27 Temporarily restricted 28 Permanently restricted 29 Permanently restricted 29 Permanently restricted 30 Total net assets or fund balances 40 Part III Analysis of Changes in Net Assets or Fund Balances 41 Total liabilities and net assets/fund balances 42 Part III Analysis of Changes in Net Assets or Fund Balances 53 Other increases not included in line 2 (itemize) 54 Decreases not included in line 2 (itemize) 55 Decreases not included in line 2 (itemize) 56 Total net assets or fund balances at end of year (line 4 minus line 5) - Part III, column (b), line 30 66 6, 590, 504.	_	17		0,505,500.	0,330,304	7,330,307.
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20 Loans from officers, directors, trustees, and other disqualified persons 21 Mortgages and other notes payable 22 Other liabilities (describe						- ¦
23 Total liabilities (add lines 17 through 22) Foundations that follow SFAS 117, check here and complete lines 24 through 26, and lines 30 and 31 24 Unrestricted 25 Temporarily restricted 26 Permanently restricted 27 Temporarily restricted 28 Pard-in or capital surplus, or land, bldg, and equipment fund 29 Retained earnings, accumulated income, endowment, or other funds 30 Total net assets or fund balances 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) Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) SEE STATEMENT 6 4 6, 590, 504. 5 Decreases not included in line 2 (itemize) SEE STATEMENT 6 5 0. 6 7590, 504. 6 6, 590, 504. 6 6, 590, 504.	es	19	Deferred revenue			- '.
23 Total liabilities (add lines 17 through 22) Foundations that follow SFAS 117, check here and complete lines 24 through 26, and lines 30 and 31 24 Unrestricted 25 Temporarily restricted 26 Permanently restricted 27 Temporarily restricted 28 Pard-in or capital surplus, or land, bldg, and equipment fund 29 Retained earnings, accumulated income, endowment, or other funds 30 Total net assets or fund balances 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) Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) SEE STATEMENT 6 4 6, 590, 504. 5 Decreases not included in line 2 (itemize) SEE STATEMENT 6 5 0. 6 7590, 504. 6 6, 590, 504. 6 6, 590, 504.	Ħ	20	Loans from officers, directors, trustees, and other disqualified persons			⊣
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31 Total liabilities and net assets/fund balances 6,965,900. 6,590,504. Part III Analysis of Changes in Net Assets or Fund Balances 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	S	27	Capital stock, trust principal, or current funds	0.	0.	<u>.</u>
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31 Total liabilities and net assets/fund balances 6,965,900. 6,590,504. Part III Analysis of Changes in Net Assets or Fund Balances 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	et	30			6,590,504	.]
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6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30 6 6, 590, 504.					5	
				olumn (b), line 30		
	Ť				<u> </u>	Form 990-PF (2017)

Ē	Part IV Capital Gains	and Losses for Tax on I	nvestment	Income						
		the kınd(s) of property sold (for exa arehouse; or common stock, 200 sh		te,	(b) h	low acc - Purch - Dona	quired lase tion	c) Date a (mo., da	acquired ay, yr.)	(d) Date sold (mo., day, yr.)
1a	1									
_b	SEE ATTACHED	STATEMENT								
	;									
d	<u> </u>	· · · · · · · · · · · · · · · · · · ·			_					
<u>e</u>)		1.0		<u> </u>			41.0	41	
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		xpense of sale					ain or (loss) (f) minus (
_a	l		ļ							
_ <u>b</u>										
d				833,51	4				_	333,454.
<u>e</u>		l ng gain in column (h) and owned by	the foundation		4 •		<i>(</i> 1)	Coine (C	ol (b) gain	
_	Complete only for assets shown	<u> </u>		cess of col (i)				(k), but n	ol (h) gain iot less thai	n -0-) or
	(ı) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69		col. (j), if any					(from col (
_a	1									
_ <u>b</u>)									
			<u> </u>							
<u>d</u>										222 454
<u>e</u>	<u> </u>	L			_					333,454.
2	Capital gain net income or (net ca	apital loss) { If gain, also enter-	er in Part I, line 0- in Part I, line	7 7	}	2	•			333 <u>,454</u> .
3	Net short-term capital gain or (los	ss) as defined in sections 1222(5) a	nd (6)							
	If gain, also enter in Part I, line 8,	column (c)	` '		 					
_	If (loss), enter -0- in Part I, line 8	landa - O N 4040/a) fa	D	Tau am Alas		3			N/A	
_		Inder Section 4940(e) fo	•				ent ince	ille _		
(Fo	or optional use by domestic privati	e foundations subject to the section	4940(a) tax on	net investment ir	icome	2.)				
lf s	section 4940(d)(2) applies, leave t	his part blank.								
					- 40					Yes X No
		tion 4942 tax on the distributable ar fy under section 4940(e). Do not co		•	rioaz					Yes A NO
<u>"</u> -		each column for each year; see the			ntries					
÷	(a)	(b)	III dello II del	iore making any c						(d)
	Base period years Calendar year (or tax year beginni	A -1 4 1 1	stributions	Net value of no	(c) nchar	ıtable-ı	use assets	1 .	Distrib (col. (b.) div	(d) oution ratio rided by col (c))
	2016	119 1117	35,466.				6,322		(001: (0) 011	.137360
	2015		50,898.				5,943			.168529
_	2014		59,071.				4,140			.098044
	2013		57,815.				4,605			.060172
	2012		18,600.				2,652			.092358
_										
2	Total of line 1, column (d)							2		.5564 <u>63</u>
	, , ,	5-year base period - divide the total	on line 2 by 5.0	D, or by the numb	er of y	years				
	the foundation has been in existe	•	·		-			3		.111293
		·							-	
4	Enter the net value of noncharital	ble-use assets for 2017 from Part X	, line 5					4		<u>7,077,276.</u>
_	Multiply line 4 by line 0							_		787,651.
o	Multiply line 4 by line 3			•				5		707,031.
6	Enter 1% of net investment incor	me (1% of Part Lline 27h)						6		7,478.
U	THE 176 OF HET INVESTIGHT INCOL	ne (178 of Farti, line 270)								7,4701
7	Add lines 5 and 6							7		795,129.
•	AGG IIIIOO O AIIG O							· -		,
8	Enter qualifying distributions from	m Part XII, line 4						8		1,235,476.
	If line 8 is equal to or greater that See the Part VI instructions.	n line 7, check the box in Part VI, lin	e 1b, and comp	olete that part usin	ig a 1º	% tax r	ate.			

Form 990-PF (2017) WILLIAM H. HARRIS FOUNDATION	ON	04-619	7960 Page 4
Part VI Excise Tax Based on Investment Income (Section	1 4940(a), 4940(b), 4940(e), or	4948 - see	instructions)
1a Exempt operating foundations described in section 4940(d)(2), check here ▶	and enter "N/A" on line 1.		
Date of ruling or determination letter: (attach copy of lette	r if necessary-see instructions)		
b Domestic foundations that meet the section 4940(e) requirements in Part V, check h	ere 🕨 🗓 and enter 1%	1	<u>7,478.</u>
of Part I, line 27b			
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, e	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	<u>7,478.</u>
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	7,478.
6 Credits/Payments			
a 2017 estimated tax payments and 2016 overpayment credited to 2017	6a 18,604		
b Exempt foreign organizations - tax withheld at source	6b O		
c Tax paid with application for extension of time to file (Form 8868)	6c <u>O</u>	<u>.</u> .	- \
d Backup withholding erroneously withheld	6d O	<u> </u>	
7 Total credits and payments. Add lines 6a through 6d		7	18,604.
8 Enter any penalty for underpayment of estimated tax. Check here X if Form 2220) is attached	8	<u> </u>
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 over		10	<u> 11,126.</u>
11 Enter the amount of line 10 to be: Credited to 2018 estimated tax	11,126. Refunded ▶	11	0.
Part VII-A Statements Regarding Activities			
1a During the tax year, did the foundation attempt to influence any national, state, or loc	cal legislation or did it participate or interven	e ın	Yes No
any political campaign?			1a X
b Did it spend more than \$100 during the year (either directly or indirectly) for political	purposes? See the instructions for the defi	nition	1b X
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and of	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 X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed dui	ring the year:		
(1) On the foundation. ► \$ 0 . (2) On foundation ma		•	
e Enter the reimbursement (if any) paid by the foundation during the year for political of		_	
managers. ▶ \$ 0.			
2 Has the foundation engaged in any activities that have not previously been reported to	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 gove	erning instrument, articles of incorporation,	or	
bylaws, or other similar instruments? If "Yes," attach a conformed copy of the chang			3 X
4a Did the foundation have unrelated business gross income of \$1,000 or more during			4a X
b If "Yes," has it filed a tax return on Form 990-T for this year?	•	N/A	4b
5 Was there a liquidation, termination, dissolution, or substantial contraction during th	e year?	·	5 X
If "Yes," attach the statement required by General Instruction T	•		
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) sati	isfied either.		
By language in the governing instrument, or			
By state legislation that effectively amends the governing instrument so that no magnetic states are sent and the sent and the sent are sent and the sent are sent and the sent are sent are sent and the sent are sen	andatory directions that conflict with the sta	te law	
remain in the governing instrument?	,		6 X
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes	" complete Part II. col. (c), and Part XV		7 X
The title foundation have at loads popose in accord at any time during the year. It is a	, 00		
8a Enter the states to which the foundation reports or with which it is registered. See in	structions.		
MA			·
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF t	to the Attorney General (or designate)		- [
of each state as required by General Instruction G? If "No," attach explanation	to the Attorney denotal (or designate)		8b X
9 Is the foundation claiming status as a private operating foundation within the meaning	na of section 4942/1//2) or 4942/1//5) for as	endar	
year 2017 or the tax year beginning in 2017? See the instructions for Part XIV. If "Ye	-	onuai	$\frac{1}{9}$ $\frac{1}{X}$ O
			10 X
10 Did any persons become substantial contributors during the tax year? If "Yes," attach	a scriedule listing their names and addresses		Form 990-PF (2017)

Pa	art VII-A. Statements Regarding Activities (continued)			
			Yes	No
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		Х
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?			
	If "Yes," attach statement. See instructions	12		<u>x</u>
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13		Х
	Website address ► N/A			
14	The books are in care of ▶ EDITH WEINBERG Telephone no. ▶ 781 – 84	8-3	187	
	Located at ► 19 WINDEMERE CIRCLE, BRAINTREE, MA ZIP+4 ► 02	184		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here			
	and enter the amount of tax-exempt interest received or accrued during the year	N	<u>/A</u>	
16	At any time during calendar year 2017, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
	securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the			
_	foreign country]
Pa	art VII-B Statements Regarding Activities for Which Form 4720 May Be Required	г		
	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?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person? Yes X No (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? Yes X No			•
	. ,			
	(6) Agree to pay money or property to a government official? (Exception Check "No"	-		
	If the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.) Yes X No			
	of fany answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			
	section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions N/A	1b		
	Organizations relying on a current notice regarding disaster assistance, check here			
c	E Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected			
Ĭ	before the first day of the tax year beginning in 2017?	1c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation			
	defined in section 4942(j)(3) or 4942(j)(5))			
а	At the end of tax year 2017, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning			
	before 2017?			
	If "Yes," list the years ▶			
t	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect			
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach			
	statement - see instructions) N/A	2b		
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
)			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
	during the year?			
b	olf "Yes," did it have excess business holdings in 2017 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? (Use Schedule C,			
	Form 4720, to determine if the foundation had excess business holdings in 2017.) N/A	3b		
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that	44		;-
_	had not been removed from jeopardy before the first day of the tax year beginning in 2017?	4b		(0047)
	F0I	田 ササし	, -۲ト	(2017)

Form 990-PF (2017) WILLIAM H. HARRIS FOUNDA Part VII-B Statements Regarding Activities for Which F	TION		04-61979	60	Page 6
5a During the year, did the foundation pay or incur any amount to	Offit 4720 May be r	nequired (contin	uea)	Yes	No
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	14945(e\\?	□ v _e	es 🗶 No 📙	1.00	+
(2) Influence the outcome of any specific public election (see section 4955); o			.5	ļ	
any voter registration drive?	, to dairy on, an oddy or man		es 🗶 No		
(3) Provide a grant to an individual for travel, study, or other similar purposes	?		es X No		
(4) Provide a grant to an organization other than a charitable, etc., organization					
4945(d)(4)(A)? See instructions		☐ Y€	es 🗶 No		.
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or f				
the prevention of cruelty to children or animals?	,		es 🗓 No		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	der the exceptions described	ın Regulations			
section 53 4945 or in a current notice regarding disaster assistance? See instri			N/A	5b	
Organizations relying on a current notice regarding disaster assistance, check t					
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr		ined			
expenditure responsibility for the grant?		I/A 🗌 Ye	es 🔲 No	-1	
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?		Ye	es 🗶 No 📙		_]
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?		7	6b	X
If "Yes" to 6b, file Form 8870.					T - 1
7a At any time during the tax year, was the foundation a party to a prohibited tax s	helter transaction?	Ye	es 🗶 No 📙		
b If "Yes," did the foundation receive any proceeds or have any net income attribu	itable to the transaction?		N/A	7b	<u> </u>
Part VIII Information About Officers, Directors, Trust	ees, Foundation Ma	magers, Highly	/		
Paid Employees, and Contractors					
1 List all officers, directors, trustees, and foundation managers and t		(-) Componention	(d) Contributions to		
(a) Name and address	(b) Title, and average hours per week devoted	(c) Compensation (If not paid,	(d) Contributions to employee benefit plans and deferred	(e) Ex	pense t, other
	to position	`enter'-0-)	compensation	allowa	ances
	TRUSTEE				
1010 WALTHAM STREET #8	0 00				^
LEXINGTON, MA 02421	0.00	0.	0.	•	0.
	TRUSTEE				
1010 WALTHAM STREET #8	0 00				^
LEXINGTON, MA 02421	0.00	0.	0.		<u>0.</u>
					
2 Compensation of five highest-paid employees (other than those inc	luded on line 1). If none,	enter "NONE."			
	(b) Title, and average		(d) Contributions to employee benefit plans	(e) Ex accoun	pense
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	and deferred compensation	accoun	ances
NONE					
·					
				_	
Total number of other employees paid over \$50,000				000 5=	0
			Form	990-PF	· (2017)

Part XIII 'Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2016	(c) 2016	(d) 2017
1 Distributable amount for 2017 from Part XI,	Обіраз	Tears prior to 2010	2010	2017
line 7				346,386.
2 Undistributed income, if any, as of the end of 2017				
a Enter amount for 2016 only			0.	
ь Total for prior years:		•		
3 Excess distributions carryover, if any, to 2017.		0.		
a From 2012 320, 798.				
b From 2013 97,151.				
c From 2014 397, 322.				
dFrom 2015 1,187,205.				
e From 2016 733, 218.				
f Total of lines 3a through e	2,735,694.			
4 Qualifying distributions for 2017 from				
Part XII, line 4: \triangleright \$ 1, 235, 476.				
a Applied to 2016, 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.			245 225
d Applied to 2017 distributable amount				346,386.
e Remaining amount distributed out of corpus	889,090.			
5 Excess distributions carryover applied to 2017 (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.				
2 Corpus Add lines 3f, 4c, and 4e Subtract line 5	3,624,784.			
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 2016 Subtract line			•	
4a from line 2a. Taxable amount - see instr		<u></u>	0.	
f Undistributed income for 2017. Subtract lines 4d and 5 from line 1. This amount must				
be distributed in 2018				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required - see instructions)	0.			
8 Excess distributions carryover from 2012				
not applied on line 5 or line 7	320,798.			
9 Excess distributions carryover to 2018				
Subtract lines 7 and 8 from line 6a	3,303,986.			
10 Analysis of line 9:				
a Excess from 2013 97, 151.				
b Excess from 2014 397, 322.				
c Excess from 2015 1,187,205.				
d Excess from 2016 733, 218.				
e Excess from 2017 889,090.				5 000 DE (0047)

Form 990-PF (2017) WILLIAN	H. HARRIS	FOUNDATION			97960 Page 10
Part XIV Private Operating I	· · · · · · · · · · · · · · · · · · ·		-A, question 9)	N/A	
1 a If the foundation has received a ruling					
foundation, and the ruling is effective f	·	-	▶ ∟		
b Check box to indicate whether the four		ng foundation described i		4942(j)(3) or4	942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year	" 1 0040	Prior 3 years	(1) 0044	
income from Part I or the minimum	(a) 2017	(b) 2016	(c) 2015	(d) 2014	(e) Total
investment return from Part X for					
each year listed					
b 85% of line 2a					
c Qualifying distributions from Part XII,	`	'	,		
line 4 for each year listed					
d Amounts included in line 2c not					
used directly for active conduct of					
exempt activities					
e Qualifying distributions made directly					
for active conduct of exempt activities.					
Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon:					
a "Assets" alternative test - enter.			3		
(1) Value of all assets			1		
(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				1	
listed					
c "Support" alternative test - enter					
(1) Total support other than gross					
investment income (interest,					
dividends, rents, payments on securities loans (section				1	\
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 Info			if the foundation	n had \$5,000 or m	ore in assets
at any time during	the year-see inst	ructions.)			
1 Information Regarding Foundati	on Managers:				
a List any managers of the foundation w	ho have contributed more	than 2% of the total cont	ributions received by th	e foundation before the clo	se of any tax
year (but only if they have contributed	more than \$5,000). (See s	section 507(d)(2))			
SEE STATEMENT 11					
b List any managers of the foundation w	ho own 10% or more of th	ne stock of a corporation (or an equally large port	tion of the ownership of a p	artnership or
other entity) of which the foundation h					
NONE					
2 Information Regarding Contribu	tion, Grant, Gift, Loan	. Scholarship, etc., Pr	ograms:		
Check here X if the foundation			-	not accept unsolicited req	uests for funds. If
the foundation makes gifts, grants, etc					
a The name, address, and telephone nur	nber or email address of t	he person to whom applic	ations should be addre	ssed:	
,		,			
SEE STATEMENT 12					
b The form in which applications should	be submitted and informa	ition and materials they st	nould include:		
c Any submission deadlines		<u></u>	<u>-</u>	 	
d Any restrictions or limitations on award	ds, such as by geographic	al areas, charitable fields,	kınds of institutions, or	other factors	

Part XVI-A	Analysis of Income-Produ					
Enter gross amo	unts unless otherwise indicated.		usiness income		y section 512, 513, or 514	(e)
1 Program serv	vice revenue:	(a) Business code	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income
c						
d						
e						
f			<u>. </u>			····
g Fees and	contracts from government agencies			ļ		
2 Membership	dues and assessments					
3 Interest on sa	avings and temporary cash					
investments				14	751.	
•	d interest from securities			14	117,396.	
	ome or (loss) from real estate					
	nced property					
	financed property			ļ		
6 Net rental inc	ome or (loss) from personal					
property						·- ·
7 Other investi				14	359,568.	
) from sales of assets other				222 454	
than inventor		ļ	•••	18	333,454.	
	r (loss) from special events	-				
	or (loss) from sales of inventory			+ +		
11 Other revenu						
				+ +		<u>.</u>
				+ +-		
				+		
				+ +		
e	Lankage (b) (d) and (c)			+ +	811,169.	0
	d columns (b), (d), and (e)		0	•1		811,169
	ne 12, columns (b), (d), and (e)				13	011,109
	in line 13 instructions to verify calculations.)					
Part XVI-B	Relationship of Activities	to the Accom	plishment of E	xempt P	ırposes	
Line No.	Explain below how each activity for which inco	me is renorted in co	olumn (e) of Part XVI-	Δ contributed	importantly to the accomp	lishment of
	the foundation's exempt purposes (other than			A CONTINUITOR	importantly to the accomp	iioiiiiioiii oi
		,, <u> </u>				·
	·					·
	-				······································	
•					 -	
-						_
						-
				<u> </u>		
		,				

Did the expansation detectly or underetly engage in any of the following with any other organization described in section 501(c) (other thin section 501(c)) organizations of a section 527, relating to potabase in against and the expansion of the planting foundation to a section 527, relating to potabase in against and the expansion of the planting foundation of a section 527, relating to potabase in against and the expansion of the expansion	Form 990-PF (Part XVII				UNDATION nd Transactions a	ind Relationsh	04-619 hips With Nonchar			ge 13
(c)ther than section 501 (kg3) organizations) or in section 527, relating to policical organizations? 1 Transfers from the respecting (foundation to a noncharitable exempt organization of (1) cash (2) Other assets 5 Other transactions: (1) Sales of assets to a noncharitable exempt organization (2) Purchases of assets from a noncharitable exempt organization (3) Rental of facilities, equipment, or other assets (4) Rembursizations: (6) Performance of services or membership or fundrasing solicitations (5) Loans or loan guarantees (6) Performance of services or membership or fundrasing solicitations (6) Performance of services or membership or fundrasing solicitations (7) It is a services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (g) like value of the goods, other assets, or services received (3) Arround movibed (3) Arround movibed (4) Name of organization (4) Description of relationships (6) Performance or services on the services of	1 Did the o			of the followin	g with any other organizati	on described in secti	on 501(c)		Yes	No
a Transfers from the reporting foundation to a noncharitable exempt organization of: (1) Cash (2) Other assets 5) Other transactions: (2) Purchases of assets from a noncharitable exempt organization (3) Rental of Societies, equipment, and or other assets (4) Rembursement arrangements (5) Loans or foran guranties (6) Rembursement arrangements (7) Substitution and guranties (8) Performance of services or membership of fundationing solicitations (8) Rental of foran guranties (9) The forangements of the services or membership of fundation in the forangement of the services of		-					• •			
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(4) Rembursement arrangements (5) Loans or loan guarantees (5) Loans or loan guarantees (6) Performance of services or membership or fundrasing solicitations (7) Performance of services or membership or fundrasing solicitations (8) Performance of services or senders or services or senders or services or services services in services or services								1b(2)		X
(S) Loans or loan guarantees (6) Performance of servoices or membership or fundraising solicitations c Sharing of lacilities, equipment, mailing lists, other assets, or paid employees d If the answer to any of the above is "Yes," complete the following schedule: Column (b) should always show the fair market value of the goods, other assets, or services received (s) Line no (b) Amount involved (c) Name of noncharitable exempt organization (d) escorption of banders, transactions, and sharing arrangement, show in SI/A N/A 2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organization (e) Description of relationship N/A 2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) (other than section 501(c)(3)) or in section 527? b if "Yes," complete the following schedule. (a) Name of organization (b) Type of organization (e) Description of relationship N/A White It is supplied by the graph of the goods of	(3) Rent	al of facilities, equipment,	or other assets					1b(3)		X
(6) Performance of services or membership or fundraising solicitations: ■ Sharing of facilities, equipment, mailing lists, other assets, or paid employees ■ If the answer to any of the above is "Sey," complete the following schedule: Column (a) Part Part Part	(4) Rein	nbursement arrangements						1b(4)		Х
Sharing of facilities, equipment, mailing lasts, other assets, or paid employees d if the answer to any of the above is "Yes," complete the following schedule Column (b) should always show the fair market value of the goods, other assets, or services received (a) Line no (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, Paneschons, and sharing arrangements N/A 2a is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organization (d) Description of transfers, Paneschons, and sharing arrangements N/A 2a is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) (other than 501(c) (other 501(c) (other 501(c) (other 501(c) (other 501(c) (other 501(c) (o	(5) Loar	is or loan guarantees						1b(5)		X
d if the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services egreed (a) Line no (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and always granagements. N/A 2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) (other than section 501(c)(3)) or in section 52?? b if Yes, "complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship N/A Under panallies of prijary, I decidate that I have examined this return, including accompanying schedules and allalements, and to the best of my knowledge and select. It is type, copied, and complete. Decidaration of propiere (other than taxpayer) is based on all information of which prepare has any knowledge with the property of truste. Primor and relation DRIVE, SUITE 25.0	(6) Perfe	ormance of services or me	embership or fundrais	sıng solıcıtatıo	ns			1b(6)		
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In section 501(c) (other than section 501(c)(3)) or in section 527?										
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In section 501(c) (other than section 501(c)(3)) or in section 527?										
In section 501(c) (other than section 501(c)(3)) or in section 527?										
(a) Name of organization N/A 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) is based on all information of which preparer has any knowledge shown below? See instruction with the preparer shown below? See instruction if title Print/Type preparer's name Preparer's signature Prim's name WALTER & SHUFFAIN, P.C. Firm's address > 101 STATION DRIVE, SUITE 250 C) Description of relationship (c) Descript	ın sectior	n 501(c) (other than sectio	on 501(c)(3)) or in se	•	or more tax-exempt organ	izations described		Yes	X] No
N/A Sign Here Signature of officer or trustee Primt/Type preparer's name Preparer's signature Primt/Type preparer Shown below? Firm's address ▶ 101 STATION DRIVE, SUITE 250 Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge may the IRS discuss this return with the preparer shown below? See instruction of which preparer has any knowledge shown below? See instruction of the preparer shown below? See instr					(b) Type of organization		(c) Description of relations	hıp		
Sign Here Under penalities 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) is based on all information of which preparer has any knowledge shown below? See instruction of the preparer shown below? See instruction of preparer is signature. It is true, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer shown below? See instruction of preparer is signature. It is true, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer shown below? See instruction in the preparer shown belo					,				-	
Signature of officer or trustee Print/Type preparer's name Paid Preparer Preparer's Signature Preparer's Signature Primt's name Pirm's address ▶ 101 STATION DRIVE, SUITE 250 Paid Signature Primt's absect on all information of which preparer has any knowledge Information of which preparer has any knowledge Information of which preparer has any knowledge Preparer shown below? See instr X Yes No No Print/Type preparer's name Preparer's signature CPA Date Check If self- employed Pod 301539 Firm's EIN ▶ 04-3236498				-						
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Paid Preparer Use Only Self-employed Self-employed P00301539				Droperer's =			Check I if DTINI			
Preparer Use Only Firm's address ▶ 101 STATION DRIVE, SUITE 250 Firm's address ▶ 101 STATION DRIVE, SUITE 250	Paid			Jane	t Swit		self- employed	0301	539	
Firm's address ► 101 STATION DRIVE, SUITE 250	Preparer	Firm's name ► WAL		$\overline{}$		<u> +1/17/</u>				
			1 STATION	DRIVE	SIITጥE 250					
							Phone no. (617)	447	-27	00

Par	rt IV Capita	Gains and Lo	sses for Tax on Investment Income				
	,	(a) List and	describe the kind(s) of property soluck warehouse; or common stock, 2	d, e.g., real estate, 00 shs. MLC Co.	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr)	(d) Date sold (mo , day, yr)
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b Z	BERDEEL						
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	FIDELITY		<u>078620</u>		P	<u>VARIOUS</u>	VARIOUS_
	ABERDEE1				P	<u> </u>	
	BERDEE				P		
	CAPITAL	GAINS	DIVIDENDS				
<u>k</u>							
<u>m</u>							
<u>n</u>							
0	(e) Gross sale	es price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		Gain or (loss) lus (f) minus (g)	
		16,403.	(er alle mazie)	25,364.	(0) p	(1)	21,039.
<u>a</u> b	<u> </u>	±0, ±0J•		23,304.			-97.
C							-3,172.
d							10.
e	29	90,293.		257,912.			32,381.
f		51,694.		550,238.			211,456.
g		_ ,					-8.
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	(i) F.M.V. as of		g gain in column (h) and owned by	(k) Excess of col. (I)	Gains (excess o	ses (from col (h)) of col (h) gain ove ot less than "-0-")	
	(1,7 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1270 1100	as of 12/31/69	over col. (j), if any			
<u>a</u>							21,039.
<u>b</u>							-97.
<u>c</u>							-3,172.
<u>d</u>							$\frac{10.}{32,381.}$
e						 	$\frac{32,381}{211,456}$
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	ipital gain net ind	•	1 11 (1000), 011101	, I	2		333,454.
lf (et short-term cap gain, also enter i (loss), enter "-0-	ın Part I, line 8,		(a (p)	3	N/A	

WILLIAM H. HARRIS FOUNDATION 04-6197960

Part XV Supplementary Informati	M H. HARKIS FUUI on	NDIII I OIV	04 01	91900
3 Grants and Contributions Paid During the			· - ·	
Recipient	If recipient is an individual,	Foundation	Purpose of grant or	
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	status of recipient	Purpose of grant or contribution	Amount
	or substantial contributor	roospioni		
GOODWILL	NONE	EXEMPT	CHARITABLE	1,000.
HABITAT FOR HUMANITY	NONE	EXEMPT	CHARITABLE	1,000.
HAVERFORD COLLEGE	NONE	EXEMPT	EDUCATION	525,000.
MARTHA'S VINEYARD HOSPITAL	NONE	ЕХЕМРТ	RESEARCH STUDIES	
	NONE	EAEMF 1	AESEARCH STODIES	2,000.
MASS AUDUBON SOCIETY	NONE	EXEMPT	CONSERVATION	1,500.
MCLEAN HOSPITAL	none	EXEMPT	RESEARCH STUDIES	5,000.
MERCESBURG ACADEMY	NONE	EXEMPT	EDUCATION	3,000
				3,000.
MORGAN MEMORIAL	NONE	ЕХЕМРТ	CHARITABLE	1,000.
MUSEUM OF FINE ARTS	NONE	EXEMPT	CHARITABLE	3,000.
MUSEUM OF SCIENCE	NONE	EXEMPT	RESEARCH STUDIES	1,000.
Total from continuation sheets				678 976

WILLIAM H. HARRIS FOUNDATION

3 Grants and Contributions Paid During the				
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	Contribution	
NAMI	NONE	ЕХЕМРТ	CHARITABLE	1,00
				2,00
NATIONAL PARKS CONSEVATION ASSOC	NONE	ЕХЕМРТ	CHARITABLE	3,00
NEW REPERTORY THEATER	NONE	EXEMPT	CHARITABLE	5,00
ORHTOPAEDIC RESEARCH + EDUCATION FDN	NONE	EXEMPT	RESEARCH STUDIES	6,00
PHI BETA KAPPA	NONE	EXEMPT	CHARITABLE	1,77
PLANNED PARENTHOOD FEDERATION	NONE	EXEMPT	CHARITABLE	6,00
PLANNED PARENTHOOD LEAGUE OF MASS	NONE	EXEMPT	CHARITABLE	1,50
POPULATION CONNECTION	NONE	EXEMPT	CHARITABLE	1,00
ROSIE'S PLACE	NONE	EXEMPT	CHARITABLE	1,00
RUSH UNIVERSITY MEDICAL CENTER	NONE	EXEMPT	CHARITABLE	10,00

3 Grants and Contributions Paid During the	Year (Continuation)			
Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	Contribution	7,11104111
NUE NAMIDE CONCEDUANCY IN	NONE	EXEMPT	CONSERVATION	
HE NATURE CONSERVANCY IN MASSACHUSETTS	NOINE	EXEMPT	CONSERVATION	5,000
THE TRUSEES OF RESERVATIONS	NONE	EXEMPT	CHARITABLE	5,000
NGBH	NONE	EXEMPT	CHARITABLE	3,000
ORLD WILDLIFE FUND	NONE	EXEMPT	CHARITABLE .	1,000
0.9 WBUR	NONE	EXEMPT	CHARITABLE	1,000
JT HEALTH MCGOVERN MEDICAL SCHOOL	NONE	EXEMPT	CHARITABLE	80,000
COMPASSION & CHOICE	NONE	EXEMPT	CHARITABLE	1,000
ENVIRONMENTAL DEFENSE FUND	NONE	EXEMPT	CHARITABLE	1,000
GREATER BOSTON FOOD BANK	NONE	EXEMPT	CHARITABLE	20
PINE STREET INN	NONE	EXEMPT	CHARITABLE	1,00

Part XV Supplementary Information				•
3 Grants and Contributions Paid During the Ye	ear (Continuation)			
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution	Amount
PROJECT BREAD	NONE	EXEMPT	CHARITABLE	
PROJECT BREAD	NONE	EXEMP 1	CHARTIABLE	1,000.
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Takat farma and the state of th				
Total from continuation sheets				i

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.

➤ Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047

Name of the organization

Employer identification number

	W	LLIAM H. HARRIS FOUNDATION	04-6197960
Organiz	ation type (check o	ne)	
Filers o	f:	Section:	
Form 99	90 or 990-EZ	501(c)() (enter number) organization	
		4947(a)(1) nonexempt charitable trust not treated as a private foundation	
		527 political organization	
Form 99	90-PF	X 501(c)(3) exempt private foundation	
		4947(a)(1) nonexempt charitable trust treated as a private foundation	
		501(c)(3) taxable private foundation	
		s covered by the General Rule or a Special Rule . (7), (8), or (10) organization can check boxes for both the General Rule and a Special Ru	ule See instructions
Genera	l Rule		
X	_	n filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling one contributor. Complete Parts I and II. See instructions for determining a contributor	
Special	Rules		
	sections 509(a)(1) any one contribute	n described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or, during the year, total contributions of the greater of (1) \$5,000, or (2) 2% of the amou, line 1 Complete Parts I and II	, or 16b, and that received from
	year, total contribu	n described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from utions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or eductruelty to children or animals. Complete Parts I, II, and III	
	year, contributions is checked, enter burpose Don't co	In described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from a exclusively for religious, charitable, etc., purposes, but no such contributions totaled makes the total contributions that were received during the year for an exclusively religious implete any of the parts unless the General Rule applies to this organization because it e, etc., contributions totaling \$5,000 or more during the year	nore than \$1,000 If this box s, charitable, etc ,
but it m	ust answer "No" or	nat isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (File) Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Fithe filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)	

LHA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2017)

Name of organization

Employer identification number

WILLIAM H. HARRIS FOUNDATION

04-6197960

Part I	Contributors (see instructions) Use duplicate copies of Part I if add	litional space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	WILLIAM H. HARRIS 1010 WALTHAM STREET #8 FAIRFIELD LEXINGTON, MA 02421	\$\$	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 Oncash Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroli Onncash Onncash If for noncash contributions

Name of organization

Employer identification number

WILLIAM H. HARRIS FOUNDATION

04-6197960

Part II	Noncash Property (see instructions) Use duplicate copies of Part II if additional space is needed				
(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		
		\$			
(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		
		\$			

Schedule B (Form 990, 990-EZ, or 990-PF) (2017) Employer identification number Name of organization <u>04-619796</u>0 WILLIAM H. HARRIS FOUNDATION Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations Part III completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info once) Use duplicate copies of Part III if additional space is needed (a) No. from (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 (d) Description of how gift is held (b) Purpose of gift (c) Use of gift (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (d) Description of how gift is held (b) Purpose of gift (c) Use of gift Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

FORM 990-PF INTERE	ST ON SAVING	S AND T	EMPOR?	ARY C	CASH :	INVESTME	NTS S	TATEMENT	1
SOURCE		RE	(A) VENUE BOOKS			(B) INVESTME INCOME		(C) ADJUSTED NET INCOM	E
AABERDEEN VENTURE I ABERDEEN VENTURE IV BANK OF AMERICA FIDELITY SANTANDER			4 ' !	56. 70. 51. 36.		47 5 8	6. 0. 1. 6. 8.	4 '	66. 70. 51. 86. 78.
TOTAL TO PART I, LI	NE 3		7 !	51.		75	1.	7.	51.
FORM 990-PF	DIVIDENDS	AND INT	EREST	FROM	1 SEC	URITIES	S	TATEMENT	2
SOURCE	GROSS AMOUNT	CAPITA GAINA DIVIDE	S	REV	(A) ENUE BOOK	NET I	B) NVEST- INCOME		
ABERDEEN VENTURE III ABERDEEN VENTURE IV FIDELITY FIRST EAGLE LEGG MASON	246. 339. 121,714. 32,981. 33,161.	14,	0. 0. 452. 432.		244 331 8,261 8,541	9. 2. 9	246. 339. 8,045. 8,549.	3 98,2 18,5	
TO PART I, LINE 4	188,441.	71,	045.	11	17,39	6. 11	7,179.	117,3	96.
FORM 990-PF		OTHER	INCO	ME	-		<u> </u>	TATEMENT	3
DESCRIPTION			RE	(A) VENUE BOOK		(B) NET INV MENT IN	EST-		
PARTNERS HEALTHCARE ABERDEEN IV K-1 OTH ABERDEEN IV K-1 OTH ABERDEEN III K-1 OT	ER INCOME ER INCOME	TIES		358,	959. 411. 86. 112.		,959. 411. 86. 112.		0. 0. 0.
TOTAL TO FORM 990-P	F, PART I, L	INE 11		359,	,568.	359	,568.		0.

FORM 990-PF	TAX	ES	Sī	PATEMENT 4
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
FOREIGN TAXES PAID STATE ANNUAL REPORT FEDERAL INCOME TAX	1,820. 250. 0.	1,804. 250. 0.	0. 0. 0.	0. 0. 0.
TO FORM 990-PF, PG 1, LN 18	2,070.	2,054.	0.	0.
FORM 990-PF	OTHER E	XPENSES	Sī	CATEMENT 5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
INVESTMENT FEES BOOKKEEPING OFFICE EXPENSE	30,823. 50,000. 559.	30,823. 25,000. 0.	0. 0. 0.	0. 25,000. 0.
PORTFOLIO DEDUCTIONS - ABERDEEN VENTURES IV PORTFOLIO DEDUCTIONS - ABERDDEEN VENTURE PARTNERS	801.	0.	0.	0.
III	416.	0.	0.	0.
TAX PREPARATION	4,600.	4,600.	0.	0.
INSURANCE	682.	682.	0.	0.
TO FORM 990-PF, PG 1, LN 23	87,881.	61,105.	0.	25,000.
FORM 990-PF OTHER INCREASES	S IN NET ASS	ETS OR FUND BA	LANCES ST	PATEMENT 6
DESCRIPTION				AMOUNT
UNREALIZED GAINS/LOSSES ON PA	ARTNERSHIP I	NVESTMENTS		13,862.
TOTAL TO FORM 990-PF, PART I	TT T.TNF 3			13,862.

FORM 990-PF	CORPORATE STOCK		STATEMENT 7
DESCRIPTION		BOOK VALUE	FAIR MARKET VALUE
VANGUARD INT'L EQUITY INDEX FD VANGUARD INT'L EQUITY INDEX FD		449,653. 633,740.	480,907. 805,042.
TOTAL TO FORM 990-PF, PART II, L	INE 10B	1,083,393.	1,285,949.
FORM 990-PF O	THER INVESTMENTS		STATEMENT 8
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
ABERDEEN VENTURE PARTNERS III	FMV	24,428.	24,428.
ABERDEEN VENTURE PARTNERS IV	FMV	173,728.	173,728.
THE FX STRATERGY FUND CLASS I	FMV	255,346.	228,060.
JOHN HANCOCK GL ABSO RETURN STRA	TS FMV	450 600	440 015
CL I FPA CRESCENT INSTL	FMV	458,623. 713,801.	442,215. 776,163.
VICTORY GLOBAL NATURAL RESOURCES		715,001.	770,103.
FUND	2 22 4	505,991.	360,429.
VANGUARD INT'L VALUE PORT INV	FMV	354,659.	454,110.
FIRST EAGLE OVERSEAS FUND	FMV	560,607.	952,358.
VANGUARD INTER-TERM BOND INDEX F	D FMV	1,223,059.	1,235,670.
LEGG MASON BW ABSOLUTE RETURN	FMV	742,862.	1,076,904.
APPLE	FMV	33,206.	67,692.
TOTAL TO FORM 990-PF, PART II, L	INE 13	5,046,310.	5,791,757.
FORM 990-PF	OTHER ASSETS		STATEMENT 9
	BEGINNING OF	END OF YEAR	FAIR MARKET
DESCRIPTION	YR BOOK VALUE	BOOK VALUE	VALUE
DIVIDEND IN TRANSIT	5,129.	0.	0.
FEDERAL TAX OVERPAYMENT	18,548.	18,604.	18,604.
TO FORM 990-PF, PART II, LINE 15	23,677.	18,604.	18,604.

FORM 990-PF SUMMARY OF DIRECT CHARITABLE ACTIVITIES STATEMENT 10

ACTIVITY ONE

SUPPORT OF ORTHOPAEDIC BIOMECHANICS AND BIOMATERIALS RESEARCH AT THE MASSACHUSETTS GENERAL HOSPITAL, PARTICIPATION IN NATIONAL SEMINARS AND CONFERENCES, PUBLICATION OF RESEARCH PAPERS

EXPENSES

TO FORM 990-PF, PART IX-A, LINE 1

0.

FORM 990-PF

PART XV - LINE 1A LIST OF FOUNDATION MANAGERS STATEMENT 11

NAME OF MANAGER

WILLIAM H. HARRIS, M.D.

JOHANNA H. HARRIS

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

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

SEE NOTE BELOW

FORM AND CONTENT OF APPLICATIONS

SEE NOTE BELOW

ANY SUBMISSION DEADLINES

NONE

RESTRICTIONS AND LIMITATIONS ON AWARDS

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