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

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.**

OMB No. 1545-0052

2019

Open to Public Inspection

For calendar year 2019, or tax year beginning 01-01-2019 , and ending 12-31-2019

Name of foundation
HAZARD FAMILY FOUNDATION

A Employer identification number
04-3338927

Number and street (or P.O. box number if mail is not delivered to street address)
23 MARLBOROUGH STREET

Room/suite

B Telephone number (see instructions)
(617) 262-1903

City or town, state or province, country, and ZIP or foreign postal code
BOSTON, MA 02116

C If exemption application is pending, check here ▶ ☐

G Check all that apply: ☐ Initial return ☐ Initial return of a former public charity ☐ Final return ☐ Amended return ☐ Address change ☐ Name change

D 1. Foreign organizations, check here..... ▶ ☐
2. Foreign organizations meeting the 85% test, check here and attach computation ... ▶ ☐

H Check type of organization: ☑ Section 501(c)(3) exempt private foundation ☐ Section 4947(a)(1) nonexempt charitable trust ☐ Other taxable private foundation

E If private foundation status was terminated under section 507(b)(1)(A), check here ..... ▶ ☐

I Fair market value of all assets at end of year (from Part II, col. (c), *line 16)* ▶$ 14,081,363

J Accounting method: ☑ Cash ☐ Accrual ☐ Other (specify) _____
(Part I, column (d) must be on cash basis.)

F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ..... ▶ ☐

Part I **Analysis of Revenue and Expenses** *(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions).)*

			(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1	Contributions, gifts, grants, etc., received (attach schedule)	214,593			
	2	Check ▶ ☐ if the foundation is **not** required to attach Sch. B				
	3	Interest on savings and temporary cash investments	59	59		
	4	Dividends and interest from securities	75,502	75,502		
	5a	Gross rents				
	b	Net rental income or (loss) _____				
	6a	Net gain or (loss) from sale of assets not on line 10	2,557,388			
	b	Gross sales price for all assets on line 6a 3,759,275				
	7	Capital gain net income (from Part IV, line 2)		2,557,388		
	8	Net short-term capital gain				
	9	Income modifications				
	10a	Gross sales less returns and allowances				
	b	Less: Cost of goods sold				
	c	Gross profit or (loss) (attach schedule)				
	11	Other income (attach schedule)	92,470	76,472		
	12	**Total.** Add lines 1 through 11	2,940,012	2,709,421		
Operating and Administrative Expenses	13	Compensation of officers, directors, trustees, etc.	0	0		0
	14	Other employee salaries and wages				
	15	Pension plans, employee benefits				
	16a	Legal fees (attach schedule)				
	b	Accounting fees (attach schedule)				
	c	Other professional fees (attach schedule)	33,763	33,763		0
	17	Interest	3,704	3,704		0
	18	Taxes (attach schedule) (see instructions)	101,489	4,964		0
	19	Depreciation (attach schedule) and depletion				
	20	Occupancy				
	21	Travel, conferences, and meetings				
	22	Printing and publications				
	23	Other expenses (attach schedule)	50,505	37,832		18
	24	**Total operating and administrative expenses.** Add lines 13 through 23	189,461	80,263		18
	25	Contributions, gifts, grants paid	527,200			527,200
	26	**Total expenses and disbursements.** Add lines 24 and 25	716,661	80,263		527,218
	27	Subtract line 26 from line 12:				
	a	**Excess of revenue over expenses and disbursements**	2,223,351			
	b	**Net investment income** (if negative, enter -0-)		2,629,158		
	c	**Adjusted net income** (if negative, enter -0-)				

Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only. (See instructions.)

		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1 Cash—non-interest-bearing			
	2 Savings and temporary cash investments	1,709,606	1,320,830	1,320,830
	3 Accounts receivable ▶			
	Less: allowance for doubtful accounts ▶			
	4 Pledges receivable ▶			
	Less: allowance for doubtful accounts ▶			
	5 Grants receivable			
	6 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)			
	7 Other notes and loans receivable (attach schedule) ▶			
	Less: allowance for doubtful accounts ▶			
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges			
	10a Investments—U.S. and state government obligations (attach schedule)			
	b Investments—corporate stock (attach schedule)			
	c Investments—corporate bonds (attach schedule)			
	11 Investments—land, buildings, and equipment: basis ▶			
	Less: accumulated depreciation (attach schedule) ▶			
	12 Investments—mortgage loans			
	13 Investments—other (attach schedule)	3,691,739	4,493,451	5,882,898
	14 Land, buildings, and equipment: basis ▶			
	Less: accumulated depreciation (attach schedule) ▶			
	15 Other assets (describe ▶)	2,553,813	4,364,228	6,877,635
	16 **Total assets** (to be completed by all filers—see the instructions. Also, see page 1, item I)	7,955,158	10,178,509	14,081,363
Liabilities	17 Accounts payable and accrued expenses			
	18 Grants payable			
	19 Deferred revenue			
	20 Loans from officers, directors, trustees, and other disqualified persons			
	21 Mortgages and other notes payable (attach schedule)			
	22 Other liabilities (describe ▶)			
	23 **Total liabilities**(add lines 17 through 22)	0	0	
Net Assets or Fund Balances	**Foundations that follow FASB ASC 958, check here ▶ ☐ and complete lines 24, 25, 29 and 30.**			
	24 Net assets without donor restrictions			
	25 Net assets with donor restrictions			
	Foundations that do not follow FASB ASC 958, check here ▶ ☑ and complete lines 26 through 30.			
	26 Capital stock, trust principal, or current funds	0	0	
	27 Paid-in or capital surplus, or land, bldg., and equipment fund	0	0	
	28 Retained earnings, accumulated income, endowment, or other funds	7,955,158	10,178,509	
	29 **Total net assets or fund balances** (see instructions)	7,955,158	10,178,509	
	30 **Total liabilities and net assets/fund balances** (see instructions)	7,955,158	10,178,509	

Part III Analysis of Changes in Net Assets or Fund Balances

1	Total net assets or fund balances at beginning of year—Part II, column (a), line 29 (must agree with end-of-year figure reported on prior year's return)	1	7,955,158
2	Enter amount from Part I, line 27a	2	2,223,351
3	Other increases not included in line 2 (itemize) ▶	3	0
4	Add lines 1, 2, and 3	4	10,178,509
5	Decreases not included in line 2 (itemize) ▶	5	0
6	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 29	6	10,178,509

Part IV Capital Gains and Losses for Tax on Investment Income

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

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

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

2	Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7 / If (loss), enter -0- in Part I, line 7 }	2	2,557,388
3	Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c) (see instructions). If (loss), enter -0- in Part I, line 8	3	

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

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

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

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? ☐ Yes ☑ No
If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part.

1 Enter the appropriate amount in each column for each year; see instructions before making any entries.

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col. (b) divided by col. (c))
2018	521,500	9,533,571	0.054701
2017	520,758	8,230,486	0.063272
2016	444,481	7,139,682	0.062255
2015	399,454	6,906,365	0.057839
2014	385,380	5,403,472	0.071321

2	**Total** of line 1, column (d)	2	0.309388
3	Average distribution ratio for the 5-year base period—divide the total on line 2 by 5.0, or by the number of years the foundation has been in existence if less than 5 years	3	0.061878
4	Enter the net value of noncharitable-use assets for 2019 from Part X, line 5	4	11,152,532
5	Multiply line 4 by line 3	5	690,096
6	Enter 1% of net investment income (1% of Part I, line 27b)	6	26,292
7	Add lines 5 and 6	7	716,388
8	Enter qualifying distributions from Part XII, line 4	8	527,218

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

Part VI Excise Tax Based on Investment Income (Section 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 letter if necessary–see instructions)**		
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here ▶ ☐ and enter 1% of Part I, line 27b	1	52,583
c	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b)		
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2	0
3	Add lines 1 and 2	3	52,583
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	52,583
6	Credits/Payments:		
a	2019 estimated tax payments and 2018 overpayment credited to 2019 — 6a: 31,849		
b	Exempt foreign organizations—tax withheld at source — 6b:		
c	Tax paid with application for extension of time to file (Form 8868) — 6c: 47,500		
d	Backup withholding erroneously withheld — 6d: 0		
7	Total credits and payments. Add lines 6a through 6d	7	79,349
8	Enter any **penalty** for underpayment of estimated tax. Check here ☑ if Form 2220 is attached.	8	0
9	**Tax due.** If the total of lines 5 and 8 is more than line 7, enter **amount owed** ▶	9	
10	**Overpayment.** If line 7 is more than the total of lines 5 and 8, enter the **amount overpaid** ▶	10	26,766
11	Enter the amount of line 10 to be: **Credited to 2020 estimated tax** ▶ 26,766 **Refunded** ▶	11	0

Part VII-A Statements Regarding Activities

			Yes	No
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?	1a		No
b	Did it spend more than $100 during the year (either directly or indirectly) for political purposes? (see Instructions for definition)	1b		No
	*If the answer is "Yes" to **1a** or **1b**, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.*			
c	Did the foundation file **Form 1120-POL** for this year?	1c		No
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: **(1)** On the foundation. ▶ $ 0 **(2)** On foundation managers. ▶ $ 0			
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ▶ $ 0			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS? *If "Yes," attach a detailed description of the activities.*	2		No
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? *If "Yes," attach a conformed copy of the changes*	3		No
4a	Did the foundation have unrelated business gross income of $1,000 or more during the year?	4a	Yes	
b	If "Yes," has it filed a tax return on **Form 990-T** for this year?	4b	Yes	
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year? *If "Yes," attach the statement required by General Instruction T.*	5		No
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	6	Yes	
7	Did the foundation have at least $5,000 in assets at any time during the year? *If "Yes," complete Part II, col. (c), and Part XV.*	7	Yes	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions) ▶ MA			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? *If "No," attach explanation* .	8b	Yes	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2019 or the taxable year beginning in 2019? See the instructions for Part XIV. If "Yes," complete Part XIV	9		No
10	Did any persons become substantial contributors during the tax year? *If "Yes," attach a schedule listing their names and addresses.*	10		No

Part VII-A Statements Regarding Activities (continued)

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions.	11		No
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement. See instructions	12		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Yes	

Website address ▶ N/A

14 The books are in care of ▶ C MICHAEL HAZARD Telephone no. ▶ (617) 262-1903

Located at ▶ 23 MARLBOROUGH ST BOSTON MA ZIP+4 ▶ 02116

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 ▶ 15

16	At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes", enter the name of the foreign country ▶	16		No

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required

			Yes	No
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.			
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? ☐ Yes ☑ No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? ☐ Yes ☑ No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? ☐ Yes ☑ No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? ☐ Yes ☑ 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 ☑ 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 ☑ No			
b	If any 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	1b		
	Organizations relying on a current notice regarding disaster assistance check here ▶ ☐			
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2019?	1c		No
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):			
a	At the end of tax year 2019, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2019? ☐ Yes ☑ No			
	If "Yes," list the years ▶ 20____, 20____, 20____, 20____			
b	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.)	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. ▶ 20____, 20____, 20____, 20____			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? ☐ Yes ☑ No			
b	If "Yes," did it have excess business holdings in 2019 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 2019.)*	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		No
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2019?	4b		No

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required *(continued)*

			Yes	No
5a	During the year did the foundation pay or incur any amount to:			
	(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	☐ Yes ☑ No		
	(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive?	☐ Yes ☑ No		
	(3) Provide a grant to an individual for travel, study, or other similar purposes?	☐ Yes ☑ No		
	(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? See instructions	☐ Yes ☑ No		
	(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?	☐ Yes ☑ No		
b	If any answer is "Yes" to 5a(1)–(5), did **any** of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance? See instructions	5b		
	Organizations relying on a current notice regarding disaster assistance check here ▶	☐		
c	If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?	☐ Yes ☐ No		
	If "Yes," attach the statement required by Regulations section 53.4945–5(d).			
6a	Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	☐ Yes ☑ No		
b	Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	6b		No
	If "Yes" to 6b, file Form 8870.			
7a	At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	☐ Yes ☑ No		
b	If "Yes", did the foundation receive any proceeds or have any net income attributable to the transaction?	7b		
8	Is the foundation subject to the section 4960 tax on payment(s) of more than $1,000,000 in remuneration or excess parachute payment during the year?	☐ Yes ☑ No		

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

1 List all officers, directors, trustees, foundation managers and their compensation. See instructions

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
C MICHAEL HAZARD 23 MARLBOROUGH STREET BOSTON, MA 02116	TRUSTEE - AS NEEDED 0.00	0	0	0

2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."

(a) Name and address of each employee paid more than $50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				

Total number of other employees paid over $50,000 ▶ 0

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

3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE".

(a) Name and address of each person paid more than $50,000	**(b)** Type of service	**(c)** Compensation
NONE		
Total number of others receiving over $50,000 for professional services. ▶		0

Part IX-A **Summary of Direct Charitable Activities**

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1	
2	
3	
4	

Part IX-B **Summary of Program-Related Investments** (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
1	
2	
All other program-related investments. See instructions. **3**	
Total. Add lines 1 through 3 ▶	0

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

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities	1a	10,192,429
b	Average of monthly cash balances	1b	1,129,939
c	Fair market value of all other assets (see instructions)	1c	0
d	**Total** (add lines 1a, b, and c)	1d	11,322,368
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation) — 1e: 0		
2	Acquisition indebtedness applicable to line 1 assets	2	0
3	Subtract line 2 from line 1d	3	11,322,368
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	169,836
5	**Net value of noncharitable-use assets.** Subtract line 4 from line 3. Enter here and on Part V, line 4	5	11,152,532
6	**Minimum investment return.** Enter 5% of line 5	6	557,627

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

1	Minimum investment return from Part X, line 6			1	557,627
2a	Tax on investment income for 2019 from Part VI, line 5	2a	52,583		
b	Income tax for 2019. (This does not include the tax from Part VI.)	2b	29,357		
c	Add lines 2a and 2b			2c	81,940
3	Distributable amount before adjustments. Subtract line 2c from line 1			3	475,687
4	Recoveries of amounts treated as qualifying distributions			4	0
5	Add lines 3 and 4			5	475,687
6	Deduction from distributable amount (see instructions)			6	0
7	**Distributable amount** as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1			7	475,687

Part XII Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	1a	527,218
b	Program-related investments—total from Part IX-B	1b	0
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	**Qualifying distributions.** Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	527,218
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	5	0
6	**Adjusted qualifying distributions.** Subtract line 5 from line 4	6	527,218

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2018	(c) 2018	(d) 2019
1 Distributable amount for 2019 from Part XI, line 7				475,687
2 Undistributed income, if any, as of the end of 2019:				
a Enter amount for 2018 only.			0	
b Total for prior years: 20___, 20___, 20___		0		
3 Excess distributions carryover, if any, to 2019:				
a From 2014. 124,648				
b From 2015. 77,228				
c From 2016. 103,868				
d From 2017. 163,722				
e From 2018. 123,773				
f **Total** of lines 3a through e.	593,239			
4 Qualifying distributions for 2019 from Part XII, line 4: ▶ $ 527,218				
a Applied to 2018, but not more than line 2a			0	
b Applied to undistributed income of prior years (Election required—see instructions).		0		
c Treated as distributions out of corpus (Election required—see instructions).	0			
d Applied to 2019 distributable amount.				475,687
e Remaining amount distributed out of corpus	51,531			
5 Excess distributions carryover applied to 2019.	0			0
(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:**				
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	644,770			
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 2018. Subtract line 4a from line 2a. Taxable amount—see instructions			0	
f Undistributed income for 2019. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2020				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 2014 not applied on line 5 or line 7 (see instructions) . . .	124,648			
9 **Excess distributions carryover to 2020.** Subtract lines 7 and 8 from line 6a	520,122			
10 Analysis of line 9:				
a Excess from 2015. . . . 77,228				
b Excess from 2016. . . . 103,868				
c Excess from 2017. . . . 163,722				
d Excess from 2018. . . . 123,773				
e Excess from 2019. . . . 51,531				

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

1a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2019, enter the date of the ruling. . . . . ▶

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

	Tax year	Prior 3 years			(e) Total
	(a) 2019	(b) 2018	(c) 2017	(d) 2016	
2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed					
b 85% of line 2a					
c Qualifying distributions from Part XII, line 4 for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon:					
a "Assets" alternative test—enter:					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed . . .					
c "Support" alternative test—enter:					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					

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

1 Information Regarding Foundation Managers:

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

C MICHAEL HAZARD

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

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

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

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

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

c Any submission deadlines:

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

Part XV Supplementary Information (continued)

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year* See Additional Data Table				
Total . . . . . ▶ **3a**				527,200
b *Approved for future payment*				
Total . . . . . ▶ **3b**				0

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.	Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See instructions.)
	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	
1 Program service revenue:					
a					
b					
c					
d					
e					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments			14	59	
4 Dividends and interest from securities			14	75,502	
5 Net rental income or (loss) from real estate:					
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal property					
7 Other investment income			14	92,470	
8 Gain or (loss) from sales of assets other than inventory			18	2,557,388	
9 Net income or (loss) from special events:					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue: a					
b					
c					
d					
e					
12 Subtotal. Add columns (b), (d), and (e)		0		2,725,419	0
13 **Total.** Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify calculations.)				13	2,725,419

Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

Line No. ▼	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes). (See instructions.)

Part XVII **Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations**

		Yes	No
1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501 (c) (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?			
a Transfers from the reporting foundation to a noncharitable exempt organization of:			
(1) Cash	1a(1)		No
(2) Other assets	1a(2)		No
b Other transactions:			
(1) Sales of assets to a noncharitable exempt organization	1b(1)		No
(2) Purchases of assets from a noncharitable exempt organization	1b(2)		No
(3) Rental of facilities, equipment, or other assets	1b(3)		No
(4) Reimbursement arrangements	1b(4)		No
(5) Loans or loan guarantees	1b(5)		No
(6) Performance of services or membership or fundraising solicitations	1b(6)		No
c Sharing of facilities, equipment, mailing lists, other assets, or paid employees	1c		No

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 given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column **(d)** the 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, transactions, and sharing arrangements

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 527? ☐ Yes ☑ No

b If "Yes," complete the following schedule.

(a) Name of organization	**(b)** Type of organization	**(c)** Description of relationship

Sign Here

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

******	2020-11-13	******
Signature of officer or trustee	Date	Title

May the IRS discuss this return with the preparer shown below (see instr.) ☑ Yes ☐ No

Paid Preparer Use Only

Print/Type preparer's name	Preparer's Signature	Date	Check if self-employed ▶ ☐	PTIN
KATHLEEN WALLACE				P01032694
Firm's name ▶ RINET COMPANY LLC				Firm's EIN ▶80-0031560
Firm's address ▶ 101 FEDERAL STREET 14TH FL BOSTON, MA 02110				Phone no. (617) 488-2700

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

List and describe the kind(s) of property sold (e.g., real estate, **(a)** 2-story brick warehouse; or common stock, 200 shs. MLC Co.)	**(b)** How acquired P—Purchase D—Donation	**(c)** Date acquired (mo., day, yr.)	**(d)** Date sold (mo., day, yr.)
770 SHS ADOBE INC	P	2015-04-07	2019-12-31
1,222 SHS CELGENE INC	P	2003-04-17	2019-08-26
300 SHS HOME DEPOT	P	2017-09-19	2019-01-18
813 SHS MARATHON PETROLEUM	P	2017-04-18	2019-03-18
650 SHS S&P GLOBAL	P	2010-01-01	2019-10-02
1,000 SHS SERVICENOW INC	P	2010-01-01	2019-12-31
15,400 SHS XPO LOGISTICS INC	D	2010-01-01	2019-12-11
28,965 SHS BOSTON PRIVATE FINL	D	2010-01-01	2019-12-11
4,535 SHS DELL TECHNOLOGIES	D	2010-01-01	2019-01-03
1,200 SHS MASIMO	D	2010-01-01	2019-08-21

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

(e) Gross sales price	Depreciation allowed **(f)** (or allowable)	Cost or other basis **(g)** plus expense of sale	Gain or (loss) **(h)** (e) plus (f) minus (g)
196,058		58,948	137,110
117,908		3,906	114,002
53,696		47,357	6,339
50,086		38,862	11,224
154,462		126,465	27,997
246,640		87,640	159,000
1,258,187		176,481	1,081,706
332,797			332,797
205,076		330,400	-125,324
182,045		3,732	178,313

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

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			Gains (Col. (h) gain minus col. (k), but not less than -0-) **or** **(l)** Losses (from col.(h))
(i) F.M.V. as of 12/31/69	Adjusted basis **(j)** as of 12/31/69	Excess of col. (i) **(k)** over col. (j), if any	
			137,110
			114,002
			6,339
			11,224
			27,997
			159,000
			1,081,706
			332,797
			-125,324
			178,313

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

List and describe the kind(s) of property sold (e.g., real estate, **(a)** 2-story brick warehouse; or common stock, 200 shs. MLC Co.)	**(b)** How acquired P—Purchase D—Donation	**(c)** Date acquired (mo., day, yr.)	**(d)** Date sold (mo., day, yr.)
3,300 SHS MONGODB INC CL A	P	2010-01-01	2019-05-02
US BANK	P	2019-01-01	2019-12-31
US BANK	P	2010-01-01	2019-12-31
ALTREIDES FOUNDATION FUND LP	P	2019-01-01	2019-12-31
BAIN CAPITAL FUND XI	P	2019-01-01	2019-12-31
BAIN CAPITAL FUND XI	P	2010-01-01	2019-12-31
BAIN CAPITAL FUND XII	P	2019-01-01	2019-12-31
DGHM ULTRAVALUE	P	2019-01-01	2019-12-31
DGHM ULTRAVALUE	P	2010-01-01	2019-12-31
FLYBRIDGE CAPITAL PARTNERS I	P	2010-01-01	2019-12-31

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

(e) Gross sales price	Depreciation allowed **(f)** (or allowable)	Cost or other basis **(g)** plus expense of sale	Gain or (loss) **(h)** (e) plus (f) minus (g)
454,318		45,755	408,563
147,687		150,472	-2,785
86,207		66,772	19,435
		3,969	-3,969
		104	-104
18,943			18,943
42			42
218			218
		4,701	-4,701
4,041			4,041

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

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			Gains (Col. (h) gain minus col. (k), but not less than -0-) **or** **(l)** Losses (from col.(h))
(i) F.M.V. as of 12/31/69	Adjusted basis **(j)** as of 12/31/69	Excess of col. (i) **(k)** over col. (j), if any	
			408,563
			-2,785
			19,435
			-3,969
			-104
			18,943
			42
			218
			-4,701
			4,041

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

List and describe the kind(s) of property sold (e.g., real estate, **(a)** 2-story brick warehouse; or common stock, 200 shs. MLC Co.)	**(b)** How acquired P—Purchase D—Donation	**(c)** Date acquired (mo., day, yr.)	**(d)** Date sold (mo., day, yr.)
FLYBRIDGE CAPITAL PARTNERS III	P	2019-01-01	2019-12-31
FLYBRIDGE CAPITAL PARTNERS III	P	2010-01-01	2019-12-31
FLYBRIDGE NETWORK FUND IV	P	2019-01-01	2019-12-31
FLYBRIDGE NETWORK FUND IV	P	2010-01-01	2019-12-31
GREYLOCK X-A LP K1	P	2010-01-01	2019-12-31
GREYLOCK X-A LP LIQUIDATION	P	2010-01-01	2019-12-23
GNDI HOLDINGS III-A LP	P	2010-01-01	2019-12-31
LINCOLN PEAK CAPITAL	P	2010-01-01	2019-12-31
WESTFIELD LIFE SCIENCE FUND LP	P	2010-01-01	2019-06-03
WESTFIELD SELECT GROWTH EQUITY	P	2019-01-01	2019-12-31

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

(e) Gross sales price	Depreciation allowed **(f)** (or allowable)	Cost or other basis **(g)** plus expense of sale	Gain or (loss) **(h)** (e) plus (f) minus (g)
140			140
		17,115	-17,115
		44	-44
4,480			4,480
		20,167	-20,167
		18,997	-18,997
25,652			25,652
2			2
1,958			1,958
10,188			10,188

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

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			Gains (Col. (h) gain minus col. (k), but not less than -0-) **or** **(l)** Losses (from col.(h))
(i) F.M.V. as of 12/31/69	Adjusted basis **(j)** as of 12/31/69	Excess of col. (i) **(k)** over col. (j), if any	
			140
			-17,115
			-44
			4,480
			-20,167
			-18,997
			25,652
			2
			1,958
			10,188

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

List and describe the kind(s) of property sold (e.g., real estate, **(a)** 2-story brick warehouse; or common stock, 200 shs. MLC Co.)	**(b)** How acquired P—Purchase D—Donation	**(c)** Date acquired (mo., day, yr.)	**(d)** Date sold (mo., day, yr.)
WESTFIELD SELECT GROWTH EQUITY	P	2010-01-01	2019-12-31
GAIN ON WAYFARER CAPITAL	P	2010-01-01	2019-09-17
1	P		
CAPITAL GAINS DIVIDENDS	P		

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

(e) Gross sales price	Depreciation allowed **(f)** (or allowable)	Cost or other basis **(g)** plus expense of sale	Gain or (loss) **(h)** (e) plus (f) minus (g)
55,783			55,783
149,190			149,190
			0
3,471			3,471

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

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			Gains (Col. (h) gain minus col. (k), but not less than -0-) **or** **(l)** Losses (from col.(h))
(i) F.M.V. as of 12/31/69	Adjusted basis **(j)** as of 12/31/69	Excess of col. (i) **(k)** over col. (j), if any	
			55,783
			149,190
			0
			3,471

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
ACHIEVE PROGRAM201 FILBERT ST SAN FRANCISCO, CA 94133	NONE	PUBLIC	UNRESTRICTED	1,000
AMERICAN HEART ASSOCIATION 300 5TH AVENUE WALTHAM, MA 02451	NONE	PUBLIC	UNRESTRICTED	1,000
BETH ISRAEL DEACONESS NEEDHAM 148 CHESTNUT ST NEEDHAM, MA 02492	NONE	PUBLIC	UNRESTRICTED	2,000
Total . . . . . ▶ **3a**				527,200

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
BEYOND HUNGER848 LAKE STREET OAK PARK, IL 60301	NONE	PUBLIC	UNRESTRICTED	2,000
BUTTON HOLE GOLF 1 BUTTONHOLE DRIVE PROVIDENCE, RI 02909	NONE	PUBLIC	UNRESTRICTED	5,000
CAMP SUNSHINE35 ACADIA ROAD CASO, ME 04015	NONE	PUBLIC	UNRESTRICTED	2,000
Total . . . . . ▶ **3a**				527,200

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
CARROLL SCHOOL45 WALTHAM ROAD WAYLAND, MA 01778	NONE	PUBLIC	UNRESTRICTED	52,300
CHILDRENS FRIEND AND SERVICE 153 SUMMER STREET PROVIDENCE, RI 02903	NONE	PUBLIC	UNRESTRICTED	10,000
CHRISTOPHER DANA REEVE FOUNDATION 636 MORRIS TURNPIKE SHORT HILLS, NJ 07078	NONE	PUBLIC	UNRESTRICTED	500
Total . . . . . ▶ **3a**				527,200

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
CIDER25 LEOPARDS LEAP MOULTON, NH 03254	NONE	PUBLIC	UNRESTRICTED	1,000
CITY YEAR BOSTON 287 COLUMBUS AVENUE BOSTON, MA 02116	NONE	PUBLIC	UNRESTRICTED	2,000
COMMUNITY PREPRATORY SCHOOL 135 PRAIRIE AVE PROVIDENCE, RI 02905	NONE	PUBLIC	SCHOLARSHIP FUND	5,000
Total . . . . . ▶ **3a**				527,200

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
CURE ALZHEIMERS FUND 34 WASHINGTON ST WELLESLEY HILLS, MA 02481	NONE	PUBLIC	UNRESTRICTED	41,000
DAY ONE PO BOX 3220 CHURCH STREET STATION NEW YORK, NY 10008	NONE	PUBLIC	UNRESTRICTED	27,500
DOMESTIC VIOLENCE RESOURCE CENTER 61 MAIN STREET WAKEFIELD, MA 02879	NONE	PUBLIC	UNRESTRICTED	500
Total . . . . . ▶ **3a**				527,200

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
DOMESTIC VIOLENCE RESOURCE CENTER 61 MAIN STREET WAKEFIELD, MA 02879	NONE	PUBLIC	TRADITIONAL HOUSING PLAN	12,000
DR ROBERT SOIFFER'S AML RESEARCH FUND AT DANA FARBER CANCER INSTITUTE 450 BROOKLINE AVENUE BOSTON, MA 02215	NONE	PUBLIC	UNRESTRICTED	1,000
ETHICS RESEARCH CENTER 2650 PARK TOWER DR VIENNA, VA 22180	NONE	PUBLIC	UNRESTRICTED	2,500
Total . . . . . ▶ **3a**				527,200

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
FIRST WORKS275 WESTMINSTER ST PROVIDENCE, RI 02903	NONE	PUBLIC	UNRESTRICTED	1,000
HEPHZIBAH CHILDREN'S ASSOCIATION 1144 LAKE STREET OAK PARK, IL 60301	NONE	PUBLIC	UNRESTRICTED	1,000
HOLIDAY FOOD AND GIFT BASKET PROGRAM 247 HARRIET LANE CUMBERLAND, RI 02864	NONE	PUBLIC	UNRESTRICTED	500
Total . . . . . ▶ **3a**				527,200

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
HORIZONS FOR HOMELESS CHILDREN 1705 COLUMBUS AVENUE ROXBURY, MA 02119	NONE	PUBLIC	UNRESTRICTED	68,000
HOUSING FORWARD 1851 S NINTH STREET MAYWOOD, IL 60153	NONE	PUBLIC	UNRESTRICTED	1,000
INDIANA UNIVERISTY DANCE MARATHON 1500 STATE RD 46 BLOOMINGTON, IN 47408	NONE	PUBLIC	UNRESTRICTED	1,000
Total . . . . . ▶ **3a**				527,200

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
INDIANA UNIVERISTY FOUNDATION 1500 STATE RD 46 BLOOMINGTON, IN 47408	NONE	PUBLIC	UNRESTRICTED	500
JOHNNYCAKE CENTER OF PEACE DALE 1183B KINGSTOWN ROAD PEACE DALE, RI 02883	NONE	PUBLIC	UNRESTRICTED	3,000
LAST HOPE K9 RESCUE 71 COMMERCIAL ST BOSTON, MA 02109	NONE	PUBLIC	UNRESTRICTED	1,000
Total . . . . . ▶ **3a**				527,200

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
MASS ART ANNUAL FUND 621 HUNTINGTON AVENUE BOSTON, MA 02115	NONE	PUBLIC	UNRESTRICTED	200
MASSACHUSETTS GNERAL HOSPITAL 125 NASHUA ST BOSTON, MA 02114	NONE	PUBLIC	TEARNEY LAB FUTURE MEDICINE PROGRAM	40,000
MASSACHUSETTS GNERAL HOSPITAL 125 NASHUA ST BOSTON, MA 02114	NONE		UNRESTRICTED	1,000
Total . . . . . ▶ **3a**				527,200

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
MERRIMACK VALLEY HABITAT FOR HUMANITY 674 ANDOVER ST LAWRENCE, MA 01843	NONE	PUBLIC	UNRESTRICTED	1,000
METRO WEST LEGAL SERVICES 63 FOUNTAIN ST FRAMINGHAM, MA 01702	NONE	PUBLIC	UNRESTRICTED	1,000
MISERICORDIA HEART OF MERCY 6300 NORTH RIDGE CHICAGO, IL 60660	NONE	PUBLIC	UNRESTRICTED	1,000
Total . . . . . ▶ **3a**				527,200

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
MOSES BROWN SCHOOL250 LLOYD AVE PROVIDENCE, RI 02906	NONE	PUBLIC	UNRESTRICTED	1,000
MOTHER CAROLINE ACADEMY EDUCATION CENTER 515 BLUE HILL AVE DORCESTER, MA 02121	NONE	PUBLIC	UNRESTRICTED	25,000
MUSCULAR DYSTROPHY ASSOCIATION 161 N CLARK CHICAGO, IL 60601	NONE	PUBLIC	UNRESTRICTED	500
Total . . . . . ▶ **3a**				527,200

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
NARROW RIVER PRESERVATION ASSOCIATION PO BOX 8 SAUNDERTOWN, RI 02874	NONE	PUBLIC	UNRESTRICTED	2,000
NEXT STEP99 BISHOP ALLEN DRIVE CAMBRIDGE, MA 02139	NONE	PUBLIC	UNRESTRICTED	1,700
OAK PARK RIVER FOREST COMMUNITY FOUNDATION 1049 LAKE ST 204 OAK PARK, IL 60301	NONE	PUBLIC	UNRESTRICTED	2,500
Total . . . . . ▶ **3a**				527,200

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
OAK PARK RIVER FOREST INFANT WELFARE SOCIETY 320 LAKE STREET OAK PARK, IL 60302	NONE	PUBLIC	UNRESTRICTED	1,000
OPERATION WALK CHICAGO PO BOX 3445 OAK PARK, IL 60303	NONE	PUBLIC	UNRESTRICTED	1,000
PACTT LEARNING CENTER 7101 N GREENVIEW AVENUE CHICAGO, IL 60626	NONE	PUBLIC	UNRESTRICTED	3,500
Total . . . . . ▶ **3a**				527,200

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
PARTNERS IN HEALTH 800 BOYLSTON ST BOSTON, MA 02199	NONE	PUBLIC	UNRESTRICTED	1,000
PROVIDENCE PUBLIC LIBRARY 150 EMPIRE ST PROVIDENCE, RI 02903	NONE	PUBLIC	UNRESTRICTED	5,000
RED PINE CAMP FOR GIRLS 8531 RED PINE ROAD WOODRUFF, WI 54568	NONE	PUBLIC	UNRESTRICTED	1,000
Total . . . . . ▶ **3a**				527,200

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
RHODE ISLAND COMMUNITY FOOD BANK 200 NIANTIC AVE PROVIDENCE, RI 02907	NONE	PUBLIC	UNRESTRICTED	5,000
RHODE ISLAND LAND TRUST COMMUNITY PO BOX 633 SAUNDERSTOWN, RI 02874	NONE	PUBLIC	UNRESTRICTED	5,000
ROOTS AND WINGS 75 BLOOMFIELD AVE DENVILLE, NJ 07834	NONE	PUBLIC	UNRESTRICTED	1,000
Total . . . . . ▶ **3a**				527,200

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
SAN MIGUEL SCHOOL OF PROVIDENCE 525 BRANCH AVENUE PROVIDENCE, RI 02904	NONE	PUBLIC	STUDENT SPONSORSHIP	5,000
SARAH'S INN1547 CIRCLE AVE FOREST PARK, IL 60130	NONE	PUBLIC	UNRESTRICTED	3,500
SAVE THE BAY212 NORTHERN AVE 304 BOSTON, MA 02210	NONE	PUBLIC	UNRESTRICTED	20,000
Total . . . . . ▶ **3a**				527,200

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
SOPHIA ACADEMY 582 ELMWOOD AVENUE PROVIDENCE, RI 02907	NONE	PUBLIC	STUDENT SPONSORSHIP	5,000
SOUTH COUNTY HOSPITAL 100 KENYON AVENUE WAKEFIELD, RI 02879	NONE	PUBLIC	UNRESTRICTED	15,000
SPAULDING REHABILITATION HOSPITAL 1575 CAMBRIDGE ST CAMBRIDGE, MA 02138	NONE	PUBLIC	UNRESTRICTED	15,000
Total . . . . . ▶ **3a**				527,200

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
ST LUKE CHURCH70 W MAIN ST WESTBOROUGH, MA 01581	NONE	PUBLIC	UNRESTRICTED	2,000
ST SEBASTIAN'S SCHOOL 1191 GREENDALE AVE NEEDHAM, MA 02492	NONE	PUBLIC	UNRESTRICTED	5,000
TEACH FOR AMERICAPO BOX 398305 SAN FRANCISCO, CA 94139	NONE	PUBLIC	UNRESTRICTED	1,000
Total . . . . . ▶ **3a**				527,200

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
THE NATURE CONSERVANCY IN RHODE ISLAND 159 WATERMAN ST PROVIDENCE, RI 02906	NONE	PUBLIC	UNRESTRICTED	10,000
THE NEW ENGLAND AQUARIUM 1 CENTRAL WHARF BOSTON, MA 02110	NONE	PUBLIC	YOUTH DEVELOPMENT PROGRAM	40,000
URI FOUNDATION 79 UPPER COLLEGE RD KINGSTON, RI 02881	NONE	PUBLIC	UNRESTRICTED	2,500
Total . . . . . ▶ **3a**				527,200

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
UVM HEALTH NETWORK 462 SHELBURNE RE BURLINGTON, VT 05401	NONE	PUBLIC	UNRESTRICTED	1,000
VILLANOVA UNIVERSITY 800 LANCASTER AVE VILLANOVA, PA 19085	NONE	PUBLIC	UNRESTRICTED	2,000
WAYLAND GARDEN CLUBPO BOX 15 WAYLAND, MA 01778	NONE	PUBLIC	UNRESTRICTED	1,000
Total . . . . . ▶ **3a**				527,200

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
WILLET FREE LIBRARY45 FERRY ROAD SAUNDERSTOWN, RI 02874	NONE	PUBLIC	UNRESTRICTED	1,000
YEAR UP45 MILK STREET BOSTON, MA 02109	NONE	PUBLIC	UNRESTRICTED	2,500
YEAR UP RHODE ISLAND 40 FOUNTAIN ST FL 7 PROVIDENCE, RI 02903	NONE	PUBLIC	UNRESTRICTED	50,000
Total . . . . . ▶ **3a**				527,200

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TY 2019 Investments - Other Schedule

Name: HAZARD FAMILY FOUNDATION

EIN: 04-3338927

Investments Other Schedule 2

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
ALTREIDES FOUNDATION FUND, LP	AT COST	393,770	434,755
BAIN CAPITAL FUND XI, LP	AT COST	174,077	299,234
BAIN CAPITAL FUND XII, LP	AT COST	122,351	102,019
GNDI HOLDING III A, LP	AT COST	5,649	5,649
GAM BEACHWWOD TOTAL RETURN FUND, LLC	AT COST	269,182	267,518
DGHM MICROCAP INSTITUTIONAL FUND	AT COST	197,049	242,861
DGHM ULTRAVALUE PARTNERS, LP	AT COST	257,686	285,042
FLYBRIDGE CAPITAL PARTNERS I, LP	AT COST	20,267	38,997
FLYBRIDGE CAPITAL PARTNERS III, LP	AT COST	100,840	196,645
FLYBRIDGE CAPITAL III CODEACADEMY	AT COST	100,000	100,000
FLYBRIDGE COMMUNITY FUND XFACTOR VENTURES	AT COST	250,000	250,000
FLYBRIDGE COMMUNITY FUND XFACTOR VENTURES II	AT COST	122,703	125,000
FLYBRIDGE PARTNERS IV NS1	AT COST	150,000	330,311
FLYBRIDGE CAPITAL IV SPLICE	AT COST	250,000	250,000
FLYBRIDGE NETWORK FUND IV LP	AT COST	113,500	228,544
FLYBRIDGE NETWORK FUND V LP	AT COST	50,079	50,335
LINCOLN PEAK CAPITAL, LLC	AT COST	108,658	116,129
LPC LONDON, LP	AT COST	36,166	454,516
LPC HARVEST, LP	AT COST	306,875	221,512
WESTFIELD CAPITAL SPV I, LP	AT COST	296,767	261,260
WESTFIELD DIVIDEND GROWTH FUND	AT COST	688,753	962,621
WESTFIELD SELECT GROWTH EQUITY, ;P	AT COST	479,079	659,950

TY 2019 Other Assets Schedule

Name: HAZARD FAMILY FOUNDATION

EIN: 04-3338927

Other Assets Schedule

Description	Beginning of Year - Book Value	End of Year - Book Value	End of Year - Fair Market Value
APTIV PLC COM	136,544	136,544	142,455
ADOBE SYS INC	89,570	30,622	131,924
ALPHABET INC CL A	62,298	62,298	218,321
AMAZON COM	73,946	73,946	173,697
APPLE INC	14,076	14,076	240,793
ASCENDIS PHARMA A/S SPON ADR	0	115,265	139,120
AXON ENTERPRISE INC COM	156,655	181,596	205,184
BIOGEN INC COM	115,252	173,361	192,875
CVS HEALTH CORPORATION	0	160,131	193,154
CELGENE CORP	3,906		
CERENCE INC	0	226,852	316,820
CHEWY INC CL A	0	115,040	116,000
DELL TECHNOLOGIES INC CIC	330,400		
DISNEY WALT CO	0	132,679	141,014
EIGER BIOPHARMCEUICALS INC	0	102,154	134,100
ENCOMPASS HEALTH CORP	0	149,425	159,321
FORESCOUT TECHNOLOGIES INC	0	153,554	147,600
HOME DEPOT	47,357		
ILLUMINA INC COM	135,130	135,130	165,870
INTRICOM CORP	0	229,720	216,000
LYFT INC CL A	0	134,191	129,060
MARATHON PETROLEUM CORP	38,862		
MEDICINES CO	77,995	176,927	526,628
MONGODB INC CL A	67,509	23,049	345,345
PALO ALTO NETWORKS INC	137,236	137,236	138,750
PAYPAL HLDGS INC	87,703	146,515	178,481
QUANTERIX CORP	0	180,145	155,958
ROCHE HLDG LTD SPONSORED ADR	132,207	132,207	194,558
S&P GLOBAL INC COM	126,465		
SALESFORCE COM INC	81,731	81,731	178,904

Other Assets Schedule

Description	Beginning of Year - Book Value	End of Year - Book Value	End of Year - Fair Market Value
SAREPTA THERAPEUTICS INC COM	66,561	159,478	141,944
SERVICENOW INC	87,640		
SLACK TECHNOLOGIES INC	0	115,273	103,408
TELADOC FISHER SCIENTIFIC	0	144,991	209,300
THERMO FISCHER SCIENTIFIC	31,196	31,196	201,419
UNION PACIFIC CORP	65,404	65,404	144,632
VANECK VECTORS ETF TRUST GOLD MINERS	0	208,117	231,312
VISA	86,052	86,052	319,994
XPO LOGISTICS INC	0	34,376	239,100
AXON ENTERPRISE INC COM	2,782	8,896	10,113
BROOKS AUTOMATION	5,267	4,394	6,756
CARBONITE INC COM	12,703		
CASELLA WASTE SYSTEMS INC.	1,467	1,653	2,900
CHEGG INC.	5,047	23,779	27,826
CHUYS HLDGS INC	4,396		
CORNERSTONE ONDEMAND INC	25,225	10,022	11,710
COSTAR GROUP INC.	7,183	21,677	31,112
COUPA SOFTWARE INC.	9,231	3,934	9,214
EHEALTH INC	0	16,454	24,789
ENPHASE ENERGY INC	0	12,352	14,502
ETSY INC.	14,242	15,636	13,777
EVOLENT HEALTH INC. A	6,025	2,768	3,439
GRAND CANYON EDUCATION INC.	7,817	3,887	3,257
HEALTHEQUITY INC	0	11,407	11,555
HUBSPOT INC.	2,509	3,659	4,121
KNIGHT SWIFT TRANSPORTATION	7,120		
LIMELIGHT NETWORKS INC	5,113		
LIQUIDITY SERVICES INC	0	1,161	906
LIVE PERSON INC.	20,086	16,972	29,970
LIVERAMP HOLDINGS INC	4,598		

Other Assets Schedule

Description	Beginning of Year - Book Value	End of Year - Book Value	End of Year - Fair Market Value
O S I SYS INC.	10,894	12,200	14,809
OKTA INC	2,672		
PAYCOM SOFTWARE INC.	12,671	9,194	20,651
PAYLOCITY HOLDING CORP	12,388	14,523	25,251
PLURALSIGHT INC A	0	6,462	6,764
Q2 HOLDINGS INC.	5,862	2,498	3,649
RINGCENTRAL INC CLASS A	4,169		
RUMBLEON INC B	0	3,745	618
SHOTSPOTTER INC.	3,734	7,011	4,437
SPROUT SOCIAL INC CLASS A	0	7,747	7,239
SPS COMMERCE INC.	7,793	15,007	19,231
STRATEGIC EDUCATION INC.	15,016	9,477	11,600
TECHTARGET INC	5,906		
TELADOC INC.	3,594	2,838	4,102
THE LOVESAC CO	0	3,167	3,659
TRADE DESK INC CL A	2,158		
UPLAND SOFTWARE INC.	3,734	4,109	3,928
VICTORY CAPITAL HOLDING A	3,620	3,058	5,326
VIRTUSA CORP	12,826	19,252	18,676
WEIGHT WATCHERS INTL INC	12,978		
ZSCALER INC	0	3,597	3,953
2U INC	12,364	6,787	3,886
GLOBANT SA	7,868	4,992	8,908
KORNIT DIGITAL LTD	8,970	6,130	11,604
MIMECAST LTD	12,090	4,596	5,032
ONESPAWORLD HOLDINGS LTD	0	9,906	15,324

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TY 2019 Other Expenses Schedule

Name: HAZARD FAMILY FOUNDATION

EIN: 04-3338927

Other Expenses Schedule

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
MASS FILING FEE FORM PC	250	250		0
FIDELITY FEES	241	241		0
PARTNERSHIP K1 EXPENSES	36,591	36,591		0
US BANK FEES	750	750		0
PARTNERSHIP K1 NON DEDUCTIBLE EXPENSES	12,655	0		0
CHARITABLE DONATIONS FROM K-1S	18	0		18

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TY 2019 Other Income Schedule

Name: HAZARD FAMILY FOUNDATION

EIN: 04-3338927

Other Income Schedule

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
FROM PARTNERSHIP K-1 SCHEDULES	76,472	76,472	76,472
OTHER INCOME	15,998	0	15,998

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TY 2019 Other Professional Fees Schedule

Name: HAZARD FAMILY FOUNDATION

EIN: 04-3338927

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
RINET COMPANY FEE	8,197	8,197		0
GRANAHAN MGMT FEE	3,519	3,519		0
FIDELITY ADR FEES	2,047	2,047		0
SM MGMT FEE	20,000	20,000		0

TY 2019 Taxes Schedule

Name: HAZARD FAMILY FOUNDATION

EIN: 04-3338927

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FOREIGN TAX - FIDELITY	1,937	1,937		0
FOREIGN TAX - PARTNERSHIPS	27	27		0
US TREASURY 2019 FORM 990T ESTIMATES	23,775	0		0
US TREASURY 2019 FORM 990PF ESTIMATE	27,750	0		0
US TREASURY 2018 990T EXT	9,000	0		0
US TREASURY 2018 990PF EXT	36,000	0		0
COMMONWEALTH OF MA 2018 M-990T EXT	3,000	3,000		0

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

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

▶ Attach to Form 990, 990-EZ, or 990-PF.
▶ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2019

Name of the organization
HAZARD FAMILY FOUNDATION

Employer identification number
04-3338927

Organization type (check one):

Filers of:	Section:
Form 990 or 990-EZ	☐ 501(c)( ) (enter number) organization
	☐ 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation
	☐ 527 political organization
Form 990-PF	☑ 501(c)(3) exempt private foundation
	☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation
	☐ 501(c)(3) taxable private foundation

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

General Rule

☑ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling $5,000 or more (in money or other property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

☐ For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** $5,000 or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.

☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than $1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.

☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than $1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling $5,000 or more during the year . . . . . ▶ $ _____

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization
HAZARD FAMILY FOUNDATION

Employer identification number
04-3338927

Part I **Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

Contributors

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	HAZARD LIMITED PARTNERSHIP 23 MARLBOROUGH ST BOSTON, MA 02116	$ 210,860	☐ Person ☐ Payroll ☑ Noncash (Complete Part II for noncash contributions.)
2	C MICHAEL HAZARD 23 MARLBOROUGH ST BOSTON, MA 02116	$ 3,732	☐ Person ☐ Payroll ☑ Noncash (Complete Part II for noncash contributions.)
3	C MICHAEL HAZARD 23 MARLBOROUGH ST BOSTON, MA 02116	$ 1	☐ Person ☐ Payroll ☑ Noncash (Complete Part II for noncash contributions.)
-		$	☐ Person ☐ Payroll ☐ Noncash (Complete Part II for noncash contributions.)
-		$	☐ Person ☐ Payroll ☐ Noncash (Complete Part II for noncash contributions.)
-		$	☐ Person ☐ Payroll ☐ Noncash (Complete Part II for noncash contributions.)

Name of organization
HAZARD FAMILY FOUNDATION

Employer identification number
04-3338927

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
1	18,400 SHS XPO LOGISTICSTAX COST $210,860FMV $1,495,920	$ 1,495,920	2019-12-10
2	1,200 SHS MASIMOTAX COST $3,732FMV $178,704	$ 178,704	2019-08-15
3	28,965 SHS BOSTON PRIVATE FINL HLDGSTAX COST $0.00FMV $327,449	$ 327,449	2019-12-09
-		$	
-		$	
-		$	

Name of organization	Employer identification number
HAZARD FAMILY FOUNDATION	04-3338927

Part III *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 completing Part III, enter the total of *exclusively* religious, charitable, etc., contributions of **$1,000 or less** for the year. (Enter this information once. See instructions.) ▶ $ ________

Use duplicate copies of Part III if additional space is needed.

(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 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
-	

(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
-	