# CHANGE OF ACCOUNTING PERIOD Return of Private Foundation

Form 990-PF
Department of the Treasury Internal Revenue Service

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

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2019

| For                          | calei    | ndar year 2019 or tax year beginning SI   | EP 1, 2019   | , and ending   | DEC 31, 2019   |  |
|------------------------------|----------|---|--|--|--|--|
| Na                           | me of    | f foundation  |  |  | A Employer identification  | number   |
| 1 F                          | יד כ     | HER FAMILY FOUNDATION   |  |  | 04-6899625   | ;  |
| _=                           |          | and street (or P O box number if mail is not delivered to street  | reet address)  | Room/suite   | B Telephone number   | ·  |
| 9                            | 9        | KIRKSTALL ROAD  |  |  | 617-332-11   | .06  |
|                              |          | own, state or province, country, and ZIP or foreig ${f TON}$ , ${f MA}$ 02460   | n postal code  |  | C If exemption application is p  | pending, check here  |
| _                            |          | call that apply: Initial return   | Instal return of a f   | ormer public charity   | D 1. Foreign organization:   | c chack hara   |
| u (                          | J11666   | Final return  | Amended return   | ormer public charky  | 1. Foreign organizations   | s, check liefe   |
|                              |          | Address change  | Name change  |  | Foreign organizations me<br>check here and attach co   | eeting the 85% test,   |
| H (                          | Check    | type of organization: X Section 501(c)(3  | ) exempt private foundation                                    | 12tion 04  | 1<br>E If private foundation sta   | tus was terminated   |
|                              | ] Se     | ection 4947(a)(1) nonexempt charitable trust  | Other taxable private found                                    | ation 09   | under section 507(b)(1)  |  |
| l Fa                         | air ma   | arket value of all assets at end of year   J   Accou  | inting method: X Cash  | Accrual  | F If the foundation is in a  | 60-month termination   |
|                              |          | Part II, col. (c), line 16)   | Other (specify)  |  | under section 507(b)(1)  | )(B), check here 🕨 🔲   |
|                              | <u> </u> | 22,478,132. (Part I, co   | lumn (d), must be on cash bas                                  | sis.)  |  | T. 40  |
| P                            | art I    | Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may no necessarily equal the amounts in column (a)) | (a) Revenue and expenses per books                             | (b) Net investment income  | (c) Adjusted net income  | (0) Disbursements<br>for charitable purposes<br>(cash basis only)  |
|                              | 1        | Contributions, gifts, grants, etc., received  | 4,913,521.   | THE RESTRICT OF THE PROPERTY O | N/A  |  |
|                              | 2        | Check I if the foundation is not required to attach Sch. B  |  |  |  |  |
| -                            | 3        | Interest on savings and temporary cash investments  | 771.   | 771.   |  | STATEMENT 2.   |
|                              | 4        | Dividends and interest from securities  | 70,515.  | 70,515.  |  | STATEMENT 3  |
|                              | 5a       | Gross rents   | HELION OR THE ON HELIOTE LEADING ON WHICH AND EXCHANGE         | 1 (4724 BRIMSHOWN AND ) TO MAN XXX (CR. T  | **************************************   |  |
|                              | l b      | Net rental income or (loss)   | 650 660  |  |  | <b>第二字版的文章。</b>  |
| e                            | Ι.       | Net gain or (loss) from sale of assets not on line 10 Gross sales price for all   | 650,662.   |  |  | STATEMENT 1  |
| Revenue                      | _b       | assets of fine oa   | AND PROPERTY AS PERSONALISMAN AS AND THE                       | 740,302.   | Photographic Compression   | E TOTAL PARTY OF THE PROPERTY OF   |
| Be.                          | ′,       | Capital gain net income (from Part IV, line 2)  |  | 740,302.   |  |  |
|                              | 8        | Net short-term capital gain Income modifications  |  | THE STATE OF THE PARTY OF THE P |  |  |
|                              | 10a      | Groce calce loce returns 1  |  | **************************************   |  |  |
|                              | 1.       | Less Cost of goods sold   |  |  |  | Description of the second  |
|                              | ŀ        | Gross profit or (loss)  | a Sicher wind of State Country of Today State China with 1 1 2 |  | Steen description of the steen  |  |
|                              | 11       | Other income  |  |  |  | NEW POLICE   |
|                              | 12       | Total. Add lines 1 through 11   | 5,635,469.   | 811,588.   |  |  |
|                              | 13       | Compensation of officers, directors, trustees, etc  | 0.   | 0.   | MEGE   | ARD O.   |
|                              | 14       | Other employee salaries and wages   |  |  | 12   | The state of the s |
| s                            | 15       | Pension plans, employee benefits  |  | -  | E NON 18   | 1 / LJ/ [1   1 / M   |
| JSe                          | l        | Legal fees  |  |  |  |  |
| Expenses                     | l        | Accounting fees   | 0.244  | 0 244  | OGDE   |  |
|                              |          | Other professional fees STMT 4  | 9,344.   | 9,344.   |  | 0.   |
| ôperating and Administrative | 17<br>18 | Interest Taxes STMT 5   | 11,488.  | 11,488.  | -  | <u> </u>   |
| stra                         | ŧ        | Taxes STMT 5 Depreciation and depletion   | 11,400.  | 11,400.  | <u></u>  | Table For Consideration and Cartesian Consideration and Considerat |
| , jį                         | 19<br>20 | Occupancy   | <del></del>  |  |  | 20年からは1946年の1962年1967  |
| ₽du                          | 21       | Travel, conferences, and meetings -   |  |  |  | <del>  · · · · · · · · · · · · · · · · · · ·</del>   |
| þ                            | 22       | Printing and publications   |  |  |  | <del></del>  |
| ga                           | 23       | Other expenses STMT 6   | 315.   | 0.   |  | 0.   |
| atin                         | 24       | Total operating and administrative  | -  |  |  | <u> </u>   |
| per                          |          | expenses Add lines 13 through 23  | 21,147.  | 20,832.  |  | 0.   |
| ō                            | 25       | Contributions, gifts, grants paid   | 756,100.   |  |  | 756,100.   |
|                              | 26       | Total expenses and disbursements  |  |  |  | •  |
|                              |          | Add lines 24 and 25   | 777,247.   | 20,832.  |  | 756,100.   |
|                              | 27       | Subtract line 26 from line 12.  |  |  |  |  |
| #                            | 1        | Excess of revenue over expenses and disbursements   | 4,858,222.   |  |  |  |
|                              | l        | Net investment income (if negative, enter -0-)  | ACTORES AND                | 790,756.   | AND THE REAL PROPERTY OF THE PERSON OF THE P | EDC REFRACTION   |
|                              | C        | Adjusted net income (if negative, enter -0-)  | <b>是你们必要的</b>  | CHEST WEST WAS   | N/A  |  |

923501 12-17-19 LHA For Paperwork Reduction Act Notice, see instructions.

| Į.                | Balance Sheets Altached schedules and amounts in the description column should be for end-of-year amounts only |  | Beginning of year  | End o   | End of year  |  |  |
|-------------------|--|--|--|---|--|--|--|
| 4.5               |  |  | (a) Book Value   | (b) Book Value  | (c) Fair Market Value  |  |  |
| . —               | 1  | Cash - non-interest-bearing  | 142,505.   | 384,019.  | 384,019.   |  |  |
|                   | 1  | Savings and temporary cash investments   | 299,566.   | 419,653.  | 419,653.   |  |  |
| _                 | 1  |  | SPECIAL SECURIOR SECURIOR SECURIOR SE  | CASE STATEMENT OF THE STATE OF |  |  |  |
|                   | 1 3  | Accounts receivable  |  |   | 1 2227 22874 12 12 1   |  |  |
|                   | ١.   | Less; allowance for doubtful accounts  | THE STATE OF THE S | TO CONTRACTOR SPRENCES A TRACTOR STRAIGHT AS  | • Detailed and the composition of the compositio    |  |  |
|                   | 4  | Pledges receivable   |  |   |  |  |  |
|                   |  | Less; allowance for doubtful accounts  |  |   |  |  |  |
|                   | 5  | Grants receivable  |  |   |  |  |  |
|                   | 6  | Receivables due from officers, directors, trustees, and other                  |  |   |  |  |  |
|                   |  | disqualified persons   |  |   |  |  |  |
|                   | 7  | Other notes and loans receivable   44,300.                                     |  |   |  |  |  |
|                   | 1  | Less; allowance for doubtful accounts  | 44,300.  | 44,300.   | 44,300.  |  |  |
| S                 | 8  | Inventories for sale or use  |  |   |  |  |  |
| Assets            | 9  | Prepaid expenses and deferred charges  |  |   |  |  |  |
| As                | 1 -  | Investments - U.S. and state government obligations                            |  |   |  |  |  |
|                   |  | Investments - corporate stock STMT 7   | 6,407,128.   | 10,903,749.   | 21,630,160.  |  |  |
|                   |  |  | 0,407,120.   | 10,505,745.   | 21,030,100.  |  |  |
|                   | Ι  | Investments - corporate bonds  | Program and Appendix Application   |   |  |  |  |
|                   | יין  | tovestments - land, buildings, and equipment basis                             | 1944997 /38 01 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1   |   | **************************************   |  |  |
|                   | ١  | Less accumulated depreciation  |  |   |  |  |  |
|                   | 1  | Investments - mortgage loans   |  |   | <u>.</u>   |  |  |
|                   | 13   | Investments - other  |  |   |  |  |  |
|                   | 14   | Land, buildings, and equipment basis   |  |   |  |  |  |
|                   |  | Less accumulated depreciation  |  |   |  |  |  |
|                   | 15   | Other assets (describe )   |  |   |  |  |  |
|                   | 16   | Total assets (to be completed by all filers - see the                          |  |   |  |  |  |
|                   |  | instructions. Also, see page 1, item I)  | 6,893,499.   | 11,751,721.   | 22,478,132.  |  |  |
|                   | 17   | Accounts payable and accrued expenses  |  |   | 图为是12000000000000000000000000000000000000  |  |  |
|                   | 18   | Grants payable   |  |   |  |  |  |
| Š                 | 19   | Deferred revenue   |  |   | E-PENTENNIN TENNIN   |  |  |
| Liabilities       | 20   | Loans from officers, directors, trustees, and other disqualified persons       |  |   |  |  |  |
| abi               | 21   | Mortgages and other notes payable  |  |   |  |  |  |
| ⋍                 | 22   | Other liabilities (describe >  |  |   |  |  |  |
|                   |  | ,  |  |   | LEAD RETURNED TO   |  |  |
|                   | 23   | Total liabilities (add lines 17 through 22)                                    | 0.   | 0.  |  |  |  |
| _                 |  | Foundations that follow FASB ASC 958, check here                               |  |   | Frank and Saturday   |  |  |
| S                 |  | and complete lines 24, 25, 29, and 30.   |  | ,   |  |  |  |
| Balances          | 24   | Net assets without donor restrictions  |  |   |  |  |  |
| <u>a</u>          | 25   | Net assets with donor restrictions   |  |   |  |  |  |
| В                 |  | Foundations that do not follow FASB ASC 958, check here                        |  |   | 2 1751 1 4 1950 1 5 455 1  |  |  |
|                   |  | and complete lines 26 through 30.  |  |   |  |  |  |
| F                 | 26   | Capital stock, trust principal, or current funds                               | 0.   | 0.  |  |  |  |
| Net Assets or Fun | 27   | Paid-in or capital surplus, or land, bldg., and equipment fund                 | 4,400,150.   | 4,400,150.  | N. 5 27 340 44 704 1. 1 38 544   |  |  |
| Se                | 28   | Retained earnings, accumulated income, endowment, or other funds               | 2,493,349.   | 7,351,571.  | ALCOHOLOGICA CONTRACTOR OF THE STATE OF THE  |  |  |
| ¥                 | l  | Total net assets or fund balances  | 6,893,499.   | 11,751,721.   | Development of the control of the co |  |  |
| Š                 | 29   | Total liet assets of fully datafices   | 0,000,400.   | 11,731,721.   |  |  |  |
|                   | ١,,  | Total Babilistan and not constationed believes                                 | 6,893,499.   | 11,751,721.   |  |  |  |
|                   | 30   | Total liabilities and net assets/fund balances                                 | 0,033,433.   | 11,731,721.   | N. Lander P. California (1997)   |  |  |
| <sup>§</sup> P    | art  | Analysis of Changes in Net Assets or Fund B                                    | alances  |   |  |  |  |
| 1                 | Total  | net assets or fund balances at beginning of year - Part II, column (a), line   | 29   |   |  |  |  |
|                   |  | at agree with end-of-year figure reported on prior year's return)              |  | 1   | 6,893,499.   |  |  |
|                   | •  | amount from Part I, line 27a   |  | 2   | 4,858,222.   |  |  |
|                   |  | r increases not included in line 2 (itemize)                                   |  | 3   | 0.   |  |  |
|                   |  | lines 1, 2, and 3  |  | 4   | 11,751,721.  |  |  |
|                   |  | eases not included in line 2 (itemize)   |  | 5   | 0.   |  |  |
|                   |  | net assets or fund balances at end of year (line 4 minus line 5) - Part II, ci | olumn (b), line 29   | - 6   | 11,751,721.  |  |  |
| <u> </u>          |  | Tarris of Tarris, or   |  | L *   | Form 990-PE (2019)   |  |  |

| (a) List and describe<br>2-story brick wa  | the kind(s) of property sold irehouse, or common stock,       | (for example, real esta                               |                                      | ` P - Pu       | acquired<br>rchase<br>onation |                | acquired<br>lay, yr.)          | (d) Date sold<br>(mo., day, yr.)       |
|--|---|---|--------------------------------------|----------------|-------------------------------|----------------|--------------------------------|--|
| 1a   | CM3 MDMCTS  |   |                                      |                |                               |                |                                |  |
| b SEE ATTACHED   | STATEMENT   |   |                                      |                |                               |                |                                |  |
| d d  |   |   |                                      |                |                               |                | <del>.</del>                   |  |
| e  |   |   |                                      |                |                               |                |                                |  |
| (e) Gross sales price  | (f) Depreciation allowe<br>(or allowable)                     |   | st or other basis<br>expense of sale |                |                               |                | ain or (loss)<br>s (f) minus ( |  |
| a  |   |   |                                      |                |                               |                |                                |  |
| b  |   |   |                                      |                |                               |                |                                |  |
| C  |   |   |                                      |                |                               |                |                                |  |
| d 0.000 E11  |   |   | 1 000 000                            |                |                               |                |                                |  |
| e 2,028,511.   |   |   | 1,288,209                            | 9.             |                               |                |                                | 740,302.                               |
| Complete only for assets showing   |   |   |                                      | _              |                               |                | ol. (h) gain<br>not less thar  |  |
| (i) FMV as of 12/31/69   | (j) Adjusted basis<br>as of 12/31/69                          | (k) Ex<br>over  | cess of col. (I)<br>col. (I), If any |                |                               |                | (from col. (                   |  |
| a  |   |   |                                      |                |                               |                |                                |  |
| b  |   |   |                                      | _              |                               |                |                                |  |
| c<br>d   |   |   |                                      | -              |                               |                |                                |  |
| e  |   |   |                                      | _              |                               |                |                                | 740,302.                               |
| -  |   |   |                                      | <del>\</del>   | 1                             |                |                                | 740,302                                |
| 2 Capital gain net income or (net ca   |   | so enter in Part I, line<br>enter -0- in Part I, line |                                      | <u>}</u> 2     | ļ                             |                | <del> </del>                   | 740,302.                               |
| 3 Net short-term capital gain or (los  |   | 22(5) and (6):  |                                      | ٦              |                               |                |                                |  |
| If gain, also enter in Part I, line 8, If (loss), enter -0- in Part I, line 8  | column (c).   |   |                                      | ) <sub>a</sub> |                               |                | N/A                            |  |
|  | nder Section 4940(  | e) for Reduced  | Tax on Net                           | Invest         | ment Inco                     | me             | 11/12                          | <del> </del>                           |
| f section 4940(d)(2) applies, leave the<br>Was the foundation liable for the sect<br>f "Yes," the foundation doesn't qualif<br>1 Enter the appropriate amount in e | tion 4942 tax on the distribut<br>y under section 4940(e). Do | not complete this par                                 | t                                    |                |                               |                |                                | Yes X No                               |
| (a)  |   |   | fore making any em                   |                |                               | Ĭ              |                                | (d)                                    |
| Base period years<br>Calendar year (or tax year beginning  |   | (b)<br>ying distributions                             | Net value of non                     |                |                               |                | Distrib<br>(col. (b) divi      | (d)<br>ution ratio<br>ided by col (c)) |
| 2018   |   | 643,113.  |                                      |                | 51,668.                       | ·              |                                | .036851                                |
| 2017   |   | 557,188.  |                                      |                | 66,319.                       |                |                                | .035118                                |
| 2016   |   | 746,205.  |                                      |                | 28,393.                       | _              |                                | .052445                                |
| 2015   |   | 587,379.<br>533,780.                                  |                                      |                | 27,742.<br>10,476.            |                |                                | .052785                                |
| 2014   |   | 333,760.  |                                      | 14,1           | 10,470.                       | <del>'  </del> |                                | .041333                                |
| 2 Total of line 1, column (d)  |   |   |                                      |                |                               | 2              |                                | .219194                                |
| 3 Average distribution ratio for the 5   | 5-vear hase period - divide th                                | e total on line 2 by 5                                | ) or hy the number                   | r of vears     | <u>.</u>                      | -              |                                | • 21717                                |
| the foundation has been in exister   |   | io total on mio 2 by b                                | o, or by the number                  | o. your        | ,                             | 3              |                                | .043839                                |
| 4 Enter the net value of noncharitab   |   | Part X line 5   |                                      |                |                               | 4              | 1                              | 6,900,135.                             |
| - Enter the net value of mononantal  | 10 000 00000 101 2013 110111                                  | , arra, mio o   |                                      |                |                               | Ė              |                                | 0,,,00,,200                            |
| 5 Multiply line 4 by line 3  |   |   |                                      |                |                               | 5              |                                | 740,885.                               |
| 6 Enter 1% of net investment incom   | ie (1% of Part I, line 27b)                                   |   |                                      |                |                               | 6              |                                | 7,908.                                 |
| 7 Add lines 5 and 6  |   |   |                                      |                |                               | 7              |                                | 748,793.                               |
| B Enter qualifying distributions from  | Part XII, line 4  |   |                                      |                |                               | 8              |                                | 756,100.                               |
| If line 8 is equal to or greater than<br>See the Part VI instructions.   | line 7, check the box in Part                                 | VI, line 1b, and comp                                 | lete nat using                       | a 1% tax       | x rate.                       |                |                                |  |

|  | 3   |                     |
|--|---|---------------------|
| Form 990-PF (2019) FISHER FAMILY FOUNDATI  | ION 04-6  | 899625 Page 4       |
| Part VI Excise Tax Based on Investment Income (  | (Section 4940(a), 4940(b), 4940(e), or 4948 - s                   | see instructions)   |
| 1a Exempt operating foundations described in section 4940(d)(2), check her                           | re ▶ and enter "N/A" on line 1.                                   |                     |
| Date of ruling or determination letter (attach co  | opy of letter if necessary-see instructions)                      |                     |
| b Domestic foundations that meet the section 4940(e) requirements in Part                            | :V, check here 🕨 🗶 and enter 1%                                   | 7,908.              |
| of Part I, line 27b  |   |                     |
| c All other domestic foundations enter 2% of line 27b. Exempt foreign orga                           | inizations, enter 4% of Part I, line 12, col. (b)                 |                     |
| 2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable fo                           | oundations only; others, enter -0-)                               | 0.                  |
| 3 Add lines 1 and 2  | 3   | 7,908.              |
| 4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable for                        | oundations only, others, enter -0-)                               | 0.                  |
| 5 Tax based on investment income. Subtract line 4 from line 3. If zero or le                         | ess, enter -0- 5  | 7,908.              |
| 6 Credits/Payments*  |   | <b>"解"。这种是对</b>     |
| a 2019 estimated tax payments and 2018 overpayment credited to 2019                                  | 6a 0.   |                     |
| <b>b</b> Exempt foreign organizations - tax withheld at source                                       | 6b 0.   |                     |
| c Tax paid with application for extension of time to file (Form 8868)                                | 6c 0.   |                     |
| d Backup withholding erroneously withheld  | 6d 0.   |                     |
| 7 Total credits and payments. Add lines 6a through 6d  | 7   | 0.                  |
| 8 Enter any penalty for underpayment of estimated tax. Check here if                                 | Form 2220 is attached 8   | 41.                 |
| 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount ow                        | <del></del>   | 7,949.              |
| 10 Overpayment If line 7 is more than the total of lines 5 and 8, enter the an                       |   | ·                   |
| 11 Enter the amount of line 10 to be: Credited to 2020 estimated tax                                 | Refunded ► 11   |                     |
| Partivil A Statements Regarding Activities   | 1   | L2 2 2790 Law Law   |
| 1a During the tax year, did the foundation attempt to influence any national, s                      | state, or local legislation or did it participate or intervene in | ∰ Yes No            |
| any political campaign?  |   | 1a X                |
| b Did it spend more than \$100 during the year (either directly or indirectly)                       |   | 1b X                |
| If the answer is "Yes" to 1a or 1b, attach a detailed description of the active                      | vities and copies of any materials published or                   |                     |
| distributed by the foundation in connection with the activities.                                     |   | لترق تعظ عنيد       |
| c Did the foundation file Form 1120-POL for this year?   | and the same  | 1c X                |
| d Enter the amount (if any) of tax on political expenditures (section 4955) in                       |   |                     |
|  |   |                     |
| e Enter the reimbursement (if any) paid by the foundation during the year formanagers. ► \$ 0 •      | or political expenditure tax imposed on foundation                |                     |
| managers. ► \$ 0 •  2 Has the foundation engaged in any activities that have not previously beer     | n reported to the IDC2  | 2 X                 |
| If "Yes," attach a detailed description of the activities.   | r reported to the ino;  | - 2.25 Groot \$5.05 |
| 3 Has the foundation made any changes, not previously reported to the IRS.                           | in its governing instrument, articles of incornoration, or        |                     |
| bylaws, or other similar instruments? If "Yes," attach a conformed copy of                           |   | 3 X                 |
| 4a Did the foundation have unrelated business gross income of \$1,000 or mo                          |   | 4a X                |
| b If "Yes," has it filed a tax return on Form 990-T for this year?                                   | N/.   |                     |
| 5 Was there a liquidation, termination, dissolution, or substantial contraction                      | ·   | 5 X                 |
| If "Yes," attach the statement required by General Instruction T                                     | osg the year  |                     |
| 6 Are the requirements of section 508(e) (relating to sections 4941 through                          | 1 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 X                 |
| <ul> <li>7 Did the foundation have at least \$5,000 in assets at any time during the year</li> </ul> | ear? If "Yes," complete Part II, col. (c), and Part XV            | 7 X                 |
|  |   | res ver res         |
| 8a Enter the states to which the foundation reports or with which it is register                     | red. See instructions.  |                     |
| MA   |   |                     |
| h If the answer is "Yes" to line 7, has the foundation furnished a copy of Form                      | m 990-PF to the Attorney General (or designate)                   |                     |

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of each state as required by General Instruction G? If "No," attach explanation

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 tax year beginning in 2019? See the instructions for Part XIV. If "Yes," complete Part XIV

10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses

| Part VII-A Statements Regarding Activities (continued)   |                                 |                    |                     |
|--|---------------------------------|--------------------|---------------------|
|  | 25                              | 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                              |                    | х                   |
| 13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application?   | 13                              | X                  | <del></del>         |
| Website address ► N/A  | _ 10 ]                          |                    | Ц                   |
| 14 The books are in care of ► LISA ROSENBAUM  Telephone no. ► 617.3  | 32.1                            | 106                |                     |
| Located at ▶99 KIRKSTALL ROAD, NEWTON, MA ZIP+4 ▶0   |                                 |                    |                     |
| 15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here   | 2400                            | _                  | т                   |
|  | N                               | /A                 |                     |
| the state of the s |                                 | Yes                | No                  |
| 16 At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority over a bank,  | $\rightarrow$                   | 162                | X                   |
| securities, or other financial account in a foreign country?   | 16                              | \$7.0%_1%i         | eyna<br>eyna        |
| See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the   |                                 |                    |                     |
| foreign country ►    Parts VII-B  Statements Regarding Activities for Which Form 4720 May Be Required  | 122523                          | \$\$\$\$\$\$       | 能特別                 |
|  | u kanadi san                    | V                  | NI.                 |
| File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.  | 34364<br>46.54                  | Yes                | No                  |
| 1a During the year, did the foundation (either directly or indirectly):  |                                 |                    | L.                  |
| (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?   |                                 |                    |                     |
| (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?  Yes X No   | 1.45                            |                    |                     |
| (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?   | 200                             |                    |                     |
| (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)?  | 24-4<br>7.753                   |                    | 羅別                  |
| (6) Agree to pay money or property to a government official? (Exception. Check "No"  | 製選                              | i dina             |                     |
| 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.)   | ¥.                              |                    | 3,11                |
| 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 N/A  | 1b                              |                    |                     |
| Organizations relying on a current notice regarding disaster assistance, check here  |                                 |                    | 隐约                  |
| 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  | الْمُرَاثِينَ الْمُرْسَدُ الْمُ |                    |                     |
| before the first day of the tax year beginning in 2019?  | 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)):  |                                 | 2.4                |                     |
| a At the end of tax year 2019, did the foundation have any undistributed income (Part XIII, lines  |                                 |                    |                     |
| 6d and 6e) for tax year(s) beginning before 2019?  | , (C)                           |                    |                     |
| If "Yes," list the years 🕨 , , ,   |                                 |                    |                     |
| 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  |                                 |                    | 6                   |
| valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach   |                                 | 3.44               |                     |
| 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.   | #/25                            |                    |                     |
| <b>&gt;</b>  |                                 |                    |                     |
| 3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time   | 美養                              |                    |                     |
| during the year?   |                                 |                    |                     |
| 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   |                                 |                    | Date:               |
| 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   | 30,47                           |                    | TO SERVICE SERVICES |
| of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Form 4720,  | \$3.45°                         | Wast.              |                     |
| Schedule C, to determine if the foundation had excess business holdings in 2019.)  N/A   | 3b                              | . heteroit failure | التنسئيست           |
| 4a 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   | Z, "A                           | 2-6                | 2750X   44          |
| had not been removed from jeopardy before the first day of the tax year beginning in 2019?   | 4b                              | للسستند            | X                   |
|  | orm <b>990</b>                  | -PF                |                     |

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| Part VII B Statements Regarding Activities for Which  | Form 4720 May Be I  | Required (contin            | ued)   |                               |
|---|---|-----------------------------|--|-------------------------------|
| 5a During the year, did the foundation pay or incur any amount to:  |   |                             | i i  | Yes No                        |
| (1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?   |   |                             |  |                               |
| (2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly,                                 |   |                             |  |                               |
| any voter registration drive?   |   |                             | es 🗶 No  |                               |
| (3) Provide a grant to an individual for travel, study, or other similar purposes?  |   |                             |  |                               |
| (4) Provide a grant to an organization other than a charitable, etc., organization  |   |                             |  |                               |
| 4945(d)(4)(A)? See instructions   |   |                             | es 🗶 No 🧗  |                               |
|   | (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for |                             |  |                               |
| the prevention of cruelty to children or animals?   | , or oddounonar parpooto, or  |                             | es 🗶 No 🥞  |                               |
| b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify un   | der the exceptions described  |                             |  |                               |
| section 53,4945 or in a current notice regarding disaster assistance? See instr   |   |                             | N/A  | 5b                            |
| Organizations relying on a current notice regarding disaster assistance, check  |   |                             |  | <b>₩</b> ₩.54 <b>₩</b> %.79   |
| c If the answer is "Yes" to question 5a(4), does the foundation claim exemption f   |   | ined                        |  |                               |
| expenditure responsibility for the grant?   |   |                             | es 🔲 No 🧗  |                               |
| If "Yes," attach the statement required by Regulations section 53 4945-5(d).  |   | .,                          | 13   |                               |
| 6a Did the foundation, during the year, receive any funds, directly or indirectly, to   | pay premiums on   |                             | i i  |                               |
| a personal benefit contract?  | pa) p   | ☐ <b>Y</b> €                | es 🗶 No 🕄  |                               |
| b Did the foundation, during the year, pay premiums, directly or indirectly, on a p   | personal benefit contract?  | ··                          |  | 6b X                          |
| If "Yes" to 6b, file Form 8870.   |   |                             |  | 38 % C 68 3                   |
| 7a At any time during the tax year, was the foundation a party to a prohibited tax s  | shelter transaction?  | Ye                          | es 🗶 No 🍰  |                               |
| b If "Yes," did the foundation receive any proceeds or have any net income attrib   |   |                             |  | 7b                            |
| 8 Is the foundation subject to the section 4960 tax on payment(s) of more than \$   |   | r                           | · §  |                               |
| excess parachute payment(s) during the year?  |   |                             | es 🗶 No 🥻  |                               |
| Rart VIII Information About Officers, Directors, Trust  | ees, Foundation Ma  | nagers, Highl               | у  |                               |
| Paid Employees, and Contractors   |   |                             |  |                               |
| 1 List all officers, directors, trustees, and foundation managers and to  |   |                             |  |                               |
| (a) Name and address  | (b) Title, and average hours per week devoted   | (c) Compensation            | (d) Contributions to<br>employee benefit plans<br>and deferred | (e) Expense<br>account, other |
|   | to position   | (If not paid,<br>enter -0-) | and deterred<br>compensation                                   | allowances                    |
| RONALD FISHER   | TRUSTEE   |                             |  |                               |
| 99 KIRKSTALL ROAD   | 1   |                             |  |                               |
| NEWTON, MA 02460  | 1.00  | 0.                          | 0.   | 0.                            |
| LISA ROSENBAUM  | TRUSTEE   |                             |  |                               |
| 99 KIRKSTALL ROAD   | 1   |                             |  | _                             |
| NEWTON, MA 02460  | 1.00  | 0.                          | Ι 0.   |                               |
| MATTHEW FISHER  | TRUSTEE   |                             | <u> </u>   | 0.                            |
| 99 KIRKSTALL ROAD   | 11100122  |                             | 0.   | 0.                            |
|   | ]   |                             |  |                               |
| NEWTON, MA 02460  | 1.00  | 0.                          | 0.   | 0.                            |
|   | ]   | 0.                          |  |                               |
|   | ]   | 0.                          |  |                               |
| NEWTON, MA 02460  | 1.00  |                             |  |                               |
|   | 1.00  |                             | 0.   | 0.                            |
| NEWTON, MA 02460  | 1.00  cluded on line 1). If none, (b) Title, and average hours per week   |                             | (d) Contributions to employee benefit plans and deterred       | (e) Expense account, other    |
| NEWTON , MA 02460  2 Compensation of five highest-paid employees (other than those ind  (a) Name and address of each employee paid more than \$50,000 | 1.00  Cluded on line 1). If none,   | enter "NONE."               |  | 0.                            |
| NEWTON , MA 02460  2 Compensation of five highest-paid employees (other than those inc  | 1.00  cluded on line 1). If none, (b) Title, and average hours per week   | enter "NONE."               | (d) Contributions to employee benefit plans and deterred       | (e) Expense account, other    |
| NEWTON , MA 02460  2 Compensation of five highest-paid employees (other than those ind  (a) Name and address of each employee paid more than \$50,000 | 1.00  cluded on line 1). If none, (b) Title, and average hours per week   | enter "NONE."               | (d) Contributions to employee benefit plans and deterred       | (e) Expense account, other    |
| NEWTON , MA 02460  2 Compensation of five highest-paid employees (other than those ind  (a) Name and address of each employee paid more than \$50,000 | 1.00  cluded on line 1). If none, (b) Title, and average hours per week   | enter "NONE."               | (d) Contributions to employee benefit plans and deterred       | (e) Expense account, other    |
| NEWTON , MA 02460  2 Compensation of five highest-paid employees (other than those ind  (a) Name and address of each employee paid more than \$50,000 | 1.00  cluded on line 1). If none, (b) Title, and average hours per week   | enter "NONE."               | (d) Contributions to employee benefit plans and deterred       | (e) Expense account, other    |
| NEWTON , MA 02460  2 Compensation of five highest-paid employees (other than those ind  (a) Name and address of each employee paid more than \$50,000 | 1.00  cluded on line 1). If none, (b) Title, and average hours per week   | enter "NONE."               | (d) Contributions to employee benefit plans and deterred       | (e) Expense account, other    |
| NEWTON , MA 02460  2 Compensation of five highest-paid employees (other than those ind  (a) Name and address of each employee paid more than \$50,000 | 1.00  cluded on line 1). If none, (b) Title, and average hours per week   | enter "NONE."               | (d) Contributions to employee benefit plans and deterred       | (e) Expense account, other    |
| NEWTON , MA 02460  2 Compensation of five highest-paid employees (other than those ind  (a) Name and address of each employee paid more than \$50,000 | 1.00  cluded on line 1). If none, (b) Title, and average hours per week   | enter "NONE."               | (d) Contributions to employee benefit plans and deterred       | (e) Expense account, other    |
| NEWTON , MA 02460  2 Compensation of five highest-paid employees (other than those ind  (a) Name and address of each employee paid more than \$50,000 | 1.00  cluded on line 1). If none, (b) Title, and average hours per week   | enter "NONE."               | (d) Contributions to employee benefit plans and deterred       | (e) Expense account, other    |

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

 $\triangleright$ 

Total. Add lines 1 through 3

| P  | art'X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations  | ndation    | s, see instructions.) |
|----|---|------------|-----------------------|
| 1  | Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:   |            | <del></del>           |
| а  | Average monthly fair market value of securities   | 1a         | 17,185,672.           |
| b  | Average of monthly cash balances  | 1b         | <28,175.              |
| С  | Fair market value of all other assets   | 1c         |                       |
| d  | Total (add lines 1a, b, and c)  | 1d         | 17,157,497.           |
| e  | Reduction claimed for blockage or other factors reported on lines 1a and  |            | 1                     |
|    | 1c (attach detailed explanation) 1e 0.  |            |                       |
| 2  | Acquisition indebtedness applicable to line 1 assets  | 2          | 0.                    |
| 3  | Subtract line 2 from line 1d  | 3          | 17,157,497.           |
| 4  | Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)   | 4          | 257,362.              |
| 5  | Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4  | 5          | 16,900,135.           |
| 6  | Minimum investment return. Enter 5% of line 5 ADJUSTED FOR SHORT TAX PERIOD   | 6          | 282,435.              |
| P  | art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations, check here and do not complete this part.) | nd certaii |                       |
| 1  | Minimum investment return from Part X, line 6   | 1          | 282,435.              |
| 2a | Tax on investment income for 2019 from Part VI, line 5 2a 7,908.  |            | <u></u>               |
| b  | Income tax for 2019 (This does not include the tax from Part VI.)   | ]          |                       |
| C  | Add lines 2a and 2b   | 2c         | 7,908.<br>274,527.    |
| 3  | Distributable amount before adjustments. Subtract line 2c from line 1   | 3          | 274,527.              |
| 4  | Recoveries of amounts treated as qualifying distributions   | 4          | 0.                    |
| 5  | Add lines 3 and 4   | 5          | 274,527.              |
| 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          | 274,527.              |
| P  | art XII Qualifying Distributions (see instructions)   |            |                       |
| 1  | Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:  |            | TEC 100               |
| а  |   | 1a         | 756,100.              |
| 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:  | <u> </u>   |                       |
| а  | Suitability test (prior IRS approval required)  | 3a         |                       |
|    | ,   | 3b         | 7.5.4.0.0             |
| 4  | Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8; and Part XIII, line 4   | 4          | 756,100.              |
| 5  | Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment  |            | <b>=</b>              |
|    | income. Enter 1% of Part I, line 27b  | 5          | 7,908.                |
| 6  | Adjusted qualifying distributions. Subtract line 5 from line 4  | 6          | 748,192.              |
|    | 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       |

Part XIII Undistributed Income (see instructions)

|  | (a)<br>Corpus | (b)<br>Years prior to 2018 | (c)<br>2018 | (d)<br>2019      |
|--|---------------|----------------------------|-------------|------------------|
| 1 Distributable amount for 2019 from Part XI,  | ·             |                            |             | <u>.</u>         |
| line 7   |               |                            |             | 274,527.         |
| 2 Undistributed income, if any, as of the end of 2019  |               |                            |             |                  |
| a Enter amount for 2018 only   |               |                            | 147,601.    |                  |
| b Total for prior years:   |               |                            |             |                  |
| , ,  |               | 0.                         |             |                  |
| 3 Excess distributions carryover, if any, to 2019.   |               | _                          |             |                  |
| a From 2014  |               |                            |             |                  |
| b From 2015  |               |                            |             |                  |
| c From 2016  |               |                            |             |                  |
| dFrom 2017   |               |                            |             |                  |
| eFrom 2018   |               |                            |             |                  |
| f Total of lines 3a through e  | 0.            |                            |             |                  |
| 4 Qualifying distributions for 2019 from   |               |                            |             |                  |
| Part XII, line 4: ►\$ 756,100.   |               |                            |             | ,                |
| a Applied to 2018, but not more than line 2a   |               |                            | 147,601.    |                  |
| 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   |               |                            |             | 274,527.         |
| e Remaining amount distributed out of corpus   | 333,972.      |                            |             |                  |
| 5 Excess distributions carryover applied to 2019 (If an amount appears in column (d), the same amount must be shown in column (a))               | 0.            |                            |             | 0.               |
| 6 Enter the net total of each column as indicated below:   |               |                            |             |                  |
| a Corpus Add lines 3f, 4c, and 4e Subtract line 5  | 333,972.      |                            |             | !                |
| b Prior years' undistributed income. Subtract  | 300,0121      |                            |             |                  |
| line 4b from line 2b   |               | 0.                         |             |                  |
| c Enter the amount of prior years'   |               |                            |             |                  |
| undistributed income for which a notice of<br>deficiency has been issued, or on which<br>the section 4942(a) tax has been previously<br>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 instr.   |               |                            | 0.          |                  |
| f Undistributed income for 2019. Subtract  |               |                            |             |                  |
| lines 4d and 5 from line 1. This amount must   |               |                            |             |                  |
| be distributed in 2020   | n             |                            | 1.111       | 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  | 0.            |                            |             |                  |
| 9 Excess distributions carryover to 2020   |               |                            |             |                  |
| Subtract lines 7 and 8 from line 6a  | 333,972.      |                            |             |                  |
| 10 Analysis of line 9:   |               |                            |             |                  |
| a Excess from 2015   |               |                            |             |                  |
| b Excess from 2016   |               |                            |             |                  |
| c Excess from 2017   |               |                            |             |                  |
| d Excess from 2018   |               |                            |             |                  |
| e Excess from 2019 333, 972.   |               |                            |             |                  |
|  |               |                            |             | 5 000 DE (00 (0) |

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| Supplementary information                     |   |                      |                                  |         |
|---|---|----------------------|----------------------------------|---------|
| 3 Grants and Contributions Paid During the    | ear 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 | Purpose of grant or contribution | Amount  |
|   | or substantial contributor  | recipient            |                                  |         |
| a Paid during the year                        |   |                      |                                  |         |
| COMBINED JEWISH PHILANTHROPIES OF             | NONE  | PUBLIC CHARITY       | OPERATING SUPPORT                |         |
| GREATER BOSTON                                |   |                      |                                  |         |
| 126 HIGH STREET                               |   |                      |                                  |         |
| BOSTON, MA 02110                              |   |                      |                                  | 750,000 |
|   |   |                      |                                  |         |
| FRIENDS OF JERUSALEM COLLEGE OF TECHNOLOGY    | NONE  | PUBLIC CHARITY       | OPERATING SUPPORT                |         |
| PO BOX 1703                                   |   |                      |                                  |         |
| NEW YORK, NY 10150                            |   |                      |                                  | 1,000   |
|   |   |                      |                                  |         |
|   |   |                      |                                  |         |
| MARTA BEDOYA DE CLAURE FOUNDATION             | NONE  | PUBLIC CHARITY       | OPERATING SUPPORT                |         |
| 200 S BISCAYNE BLVD SUITE 4420                |   |                      |                                  |         |
| MIAMI, FL 33131                               | <u> </u>  |                      |                                  | 5,100   |
|   |   |                      |                                  |         |
|   |   |                      |                                  |         |
|   |   |                      |                                  |         |
|   |   |                      |                                  |         |
|   |   |                      |                                  |         |
|   |   |                      |                                  |         |
|   |   |                      |                                  |         |
|   |   |                      |                                  |         |
|   |   |                      |                                  |         |
|   |   |                      |                                  |         |
| Total   | .1  | L                    | <b>▶</b> 3a                      | 756,100 |
| b Approved for future payment                 |   |                      |                                  |         |
| • •   |   |                      |                                  |         |
|   |   |                      |                                  |         |
| NONE  |   |                      |                                  |         |
|   |   |                      |                                  |         |
|   |   |                      |                                  |         |
| <del></del>                                   |   |                      |                                  |         |
|   |   |                      |                                  |         |
|   |   |                      |                                  |         |
|   |   |                      |                                  |         |
|   |   |                      |                                  |         |
| <del></del>                                   |   |                      |                                  |         |
|   |   |                      |                                  |         |
|   |   |                      |                                  |         |
|   |   |                      |                                  |         |
|   |   |                      |                                  |         |
|   |   |                      |                                  |         |
| Total   |   |                      | <b>▶</b> 3b                      | 0       |

| Part XVI-A Ana | lysis of Income- | -Producing | <b>Activities</b> |
|----------------|------------------|------------|-------------------|
|----------------|------------------|------------|-------------------|

| 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  4 Dividends and interest from securities  5 Net rental income or (loss) from real estate:  a Debt-financed property | (a)<br>Business<br>code                          | (b)<br>Amount   | Exclu-<br>sion<br>code                             | (d)<br>Amount   | Related or exempt function income     |
|---|--|-----------------|--|-----------------|---------------------------------------|
| 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 4 Dividends and interest from securities 5 Net rental income or (loss) from real estate:   |  | Amount          | code   | Amount          | function income                       |
| 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 4 Dividends and interest from securities 5 Net rental income or (loss) from real estate:   |  |                 |  | -               |                                       |
| c d e f g Fees and contracts from government agencies 2 Membership dues and assessments 3 Interest on savings and temporary cash investments 4 Dividends and interest from securities 5 Net rental income or (loss) from real estate:   |  |                 |  |                 |                                       |
| 2 Membership dues and assessments 3 Interest on savings and temporary cash investments 4 Dividends and interest from securities 5 Net rental income or (loss) from real estate:   |  |                 |  |                 |                                       |
| 2 Membership dues and assessments 3 Interest on savings and temporary cash investments 4 Dividends and interest from securities 5 Net rental income or (loss) from real estate:   |  |                 |  |                 |                                       |
| 2 Membership dues and assessments 3 Interest on savings and temporary cash investments 4 Dividends and interest from securities 5 Net rental income or (loss) from real estate:   | <b></b>  |                 |  |                 |                                       |
| 2 Membership dues and assessments 3 Interest on savings and temporary cash investments 4 Dividends and interest from securities 5 Net rental income or (loss) from real estate:   |  | ···             |  |                 |                                       |
| 2 Membership dues and assessments 3 Interest on savings and temporary cash investments 4 Dividends and interest from securities 5 Net rental income or (loss) from real estate:   |  |                 | $\bot\bot$   |                 |                                       |
| 3 Interest on savings and temporary cash investments 4 Dividends and interest from securities 5 Net rental income or (loss) from real estate:   |  |                 | +  |                 |                                       |
| investments 4 Dividends and interest from securities 5 Net rental income or (loss) from real estate:  | <u> </u>   |                 | +  |                 |                                       |
| 4 Dividends and interest from securities 5 Net rental income or (loss) from real estate:  | 1  |                 |  | 771             |                                       |
| 5 Net rental income or (loss) from real estate:   | <b></b>  |                 | 14   | 771.<br>70,515. |                                       |
| • •   | $\vdash$   |                 | 14   | /0,515.         |                                       |
| a Debt-financed property  | $\vdash$   |                 | +  |                 | •                                     |
| h. Nat dalik faranan danan saka   | $\vdash$   |                 | +  |                 |                                       |
| b Not debt-financed property  | $\vdash$   |                 | +-+  |                 |                                       |
| 6 Net rental income or (loss) from personal   |  |                 |  |                 |                                       |
| property 7 Other investment income  | $\vdash$   |                 | +-   |                 | · · · · · · · · · · · · · · · · · · · |
| B Gain or (loss) from sales of assets other   | <del>                                     </del> |                 | ++-  | +               |                                       |
| than inventory  | ]  |                 | 18   | 650,662.        |                                       |
| 9 Net income or (loss) from special events  |  | <del></del>     | +  | - 030,0021      | ·                                     |
| O Gross profit or (loss) from sales of inventory  |  |                 | + + -  |                 |                                       |
| 1 Other revenue:  |  |                 | <del>      -   -     -                      </del> |                 |                                       |
| a   |  |                 |  |                 |                                       |
| b   |  |                 |  |                 |                                       |
| C   |  |                 |  |                 |                                       |
| d   |  |                 |  |                 |                                       |
| е   |  |                 |  |                 |                                       |
| 2 Subtotal. Add columns (b), (d), and (e)   |  | 0               | ).   | 721,948.        | 0                                     |
| 3 Total. Add line 12, columns (b), (d), and (e)   |  |                 |  | 13              | 721,948                               |
| See worksheet in line 13 instructions to verify calculations.)  |  |                 |  |                 |                                       |
| Part XVI-B Relationship of Activities to  |  |                 |  |                 |                                       |
| Line No. Explain below how each activity for which incom  | the Accom  | iplishment of I | Exempt Pu  | irposes         |                                       |

| ▼ | the foundation's exempt purposes (other than by providing funds for such purposes). |
|---|---|
|   | N/A   |
|   |   |
|   |   |
|   |   |
| - |   |
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|   |   |

923621 12-17-19

| Form 990-I  |  | R FAMILY FOU<br>egarding Transfers    |  | nd Relationships With Nonch                       | 399625<br>naritable         |   | age 13         |
|-------------|--|---------------------------------------|--|---|-----------------------------|---|----------------|
|             | Exempt Organ   |                                       |  |   |                             |   |                |
|             |  |                                       | following with any other organization        | described in section 501(c)                       |                             | Yes   | No             |
|             |  |                                       | relating to political organizations?         |   |                             |   |                |
|             | fers from the reporting found                                    | ation to a noncharitable exe          | empt organization of                         |   |                             |   | <u> </u>       |
| (1) (       |  |                                       |  |   | 1a(1)                       |   | X              |
|             | Other assets<br>transactions:                                    |                                       |  |   | 1a(2)                       | <del>                                      </del> | <del>  ^</del> |
|             | dansactions.<br>Gales of assets to a noncharita                  | hle exempt organization               |  |   | 1b(1)                       |   | X              |
|             | urchases of assets from a no                                     | · ·                                   | ation  |   | 1b(2)                       |   | X              |
|             | tental of facilities, equipment,                                 |                                       |  |   | 1b(3)                       |   | Х              |
| (4) F       | leimbursement arrangements                                       |                                       |  |   | 1b(4)                       |   | Х              |
| (5) L       | oans or loan guarantees  |                                       |  |   | 1b(5)                       |   | Х              |
|             | erformance of services or me                                     | •                                     |  |   | 1b(6)                       | L   | Х              |
|             | ng of facilities, equipment, ma                                  | •                                     | . •  |   | 10                          |   | X              |
|             |  |                                       |  | ays show the fair market value of the good        |                             | ets,  |                |
|             | vices given by the reporting t<br>in (d) the value of the goods, |                                       |  | in any transaction or sharing arrangemen          | it, snow in                 |   |                |
| (a)Line no  | (b) Amount involved  | <u> </u>                              | aritable exempt organization                 | (d) Description of transfers, transactions,       | and sharing ar              | rangeme   | ents           |
| (-,         | (4)  |                                       | I/A  | (=,====================================           |                             |   |                |
|             |  | _                                     | .,   |   |                             |   |                |
|             |  |                                       |  |   |                             |   |                |
|             |  |                                       |  |   |                             |   |                |
|             |  |                                       |  |   |                             |   |                |
|             |  |                                       |  |   |                             |   |                |
|             |  |                                       |  |   |                             |   |                |
|             |  |                                       |  |   |                             |   |                |
|             |  | · · · · · · · · · · · · · · · · · · · | <del></del>                                  |   |                             |   |                |
| -           |  |                                       |  | +   |                             |   |                |
| <del></del> |  |                                       |  |   |                             |   |                |
|             |  |                                       |  |   |                             |   |                |
|             | . ,  |                                       |  |   |                             |   |                |
|             |  |                                       |  |   |                             |   |                |
|             |  |                                       |  |   |                             |   |                |
|             | foundation directly or indirection 501(c) (other than section    |                                       | to, one or more tax-exempt organiza<br>279   | ations described                                  | Yes                         | X   | No             |
| b If "Yes   | s," complete the following sch                                   |                                       |  |   |                             |   |                |
|             | (a) Name of org  | janization                            | (b) Type of organization                     | (c) Description of relation                       | onship                      |   |                |
|             | N/A  |                                       |  |   |                             |   |                |
|             |  |                                       |  |   | •                           |   |                |
|             |  |                                       |  |   |                             |   |                |
|             |  |                                       |  |   |                             |   |                |
|             |  |                                       |  | tatements, and to the best of my knowledge        | May lka luc                 | hecuse  | This           |
| Sign Here   | nd belief it is true, correct, and cor                           | nplete Declaration of preparer (c     | other than taxpayer) is based on all informa | tion of which preparer has any knowledge  TRUSTEE | return with the shown below | e prepar<br>? See in                              | rer            |
| [ ]         | Signature of officer or trustee                                  |                                       | Date   | Title   |                             |   |                |

Paid

Preparer

**Use Only** 

Preparer's signature

Firm's name ► KAHN, LITWIN, RENZA & CO., LTD.

Firm's address ► 1075 MAIN STREET, SUITE 130 WALTHAM, MA 02451

MITCHELL HALPERN

Print/Type preparer's name

MITCHELL HALPERN

Date

11/10/20

Check if self- employed

P00297038

Firm's EIN ▶ 05-0409384

Phone no. 781-547-8800

| Part IV Capital Gains and Lo   | osses for Tax on Investment Income  |  |  |  |                                  |
|--|---|--|--|--|----------------------------------|
| (a) List and<br>2-story b  | d describe the kind(s) of property so<br>rick warehouse; or common stock, 2 | ld, e.g., real estate,<br>200 shs. MLC Co        | (b) How acquired<br>P - Purchase<br>D - Donation | (c) Date acquired<br>(mo., day, yr.)         | (d) Date sold<br>(mo., day, yr.) |
| 1a FIDUCIARY TRUS  | T INTERNATIONAL   | #5700 (DETAILS AV                                |  |  |                                  |
| b FIDUCIARY TRUS   |   | #5700 (DETAILS AV                                |  |  |                                  |
| c FIDUCIARY TRUS   |   | #5700 (DETAILS AV                                | 'AI D  |  |                                  |
|  | T INTERNATIONAL   | #5700 (DETAILS AV                                | 'AI D  |  |                                  |
|  | DIVIDENDS   | •  |  |  |                                  |
| f  |   |  |  |  |                                  |
| g  |   |  |  |  |                                  |
| h  |   |  |  |  |                                  |
| 1  |   |  |  |  |                                  |
| 1  |   |  |  |  |                                  |
| k  |   |  |  |  |                                  |
| 1  |   |  |  |  |                                  |
| m  |   |  |  |  |                                  |
| n  |   |  |  |  |                                  |
| 0  | <del>,</del>  | · · · · · · · · · · · · · · · · · · ·            |  |  |                                  |
| (e) Gross sales price  | (f) Depreciation allowed (or allowable)                                     | (g) Cost or other basis<br>plus expense of sale  |  | ) Gain or (loss)<br>lus (f) minus (g)        |                                  |
| a 596,384.   |   | 541,617.   |  |  | 54,767.                          |
| ь 579,923.   |   | 547,165.   |  | -  | 32,758.                          |
| c 24,204.  |   | 8,750.   |  | <u></u>                                      | 15,454.                          |
| d 825,846.   |   | 190,677.   |  |  | 635,169.                         |
| e 2,154.   |   |  |  |  | 2,154.                           |
| f  |   |  |  |  |                                  |
| g  |   |  |  |  |                                  |
| h  |   |  |  |  |                                  |
| 1  |   |  |  |  | ·                                |
| 1  |   |  |  |  |                                  |
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| m  |   |  |  |  |                                  |
| П  |   |  |  |  |                                  |
| 0  | L   |  |  |  |                                  |
| Complete only for assets showin  | ng gain in column (h) and owned by  |  |  | ses (from col. (h))                          | ant ///                          |
| (i) F M.V. as of 12/31/69  | (j) Adjusted basis<br>as of 12/31/69  | (k) Excess of col. (i)<br>over col. (j), if any  | but n  | of col. (h) gain over<br>ot less than "-0-") |                                  |
| a  |   |  |  |  | 54,767.                          |
| b  |   |  |  |  | 32,758.                          |
| С  |   |  |  |  | 15,454.                          |
| d  |   |  |  |  | 635,169.                         |
| <u>e</u>   |   |  |  |  | 2,154.                           |
| <u>f</u>   |   |  |  |  |                                  |
| g  |   |  |  |  |                                  |
| h  |   |  |  |  |                                  |
| I  |   |  |  |  |                                  |
| 1  |   |  |  |  |                                  |
| k  |   | ļ  |  |  |                                  |
| <u> </u>   |   |  |  |  | <u> </u>                         |
| <u>m</u>   |   | <del>                                     </del> |  |  |                                  |
| n  |   | <del> </del>                                     |  |  |                                  |
| 0  |   | <u> </u>   |  |  |                                  |
| 2 Capital gain net income or (net ca   | apital loss) { If gain, also ente<br>If (loss), enter "-                    | r in Part I, line 7<br>0-" in Part I, line 7     | 2  | ,  | 740,302.                         |
| 3 Net short-term capital gain or (los If gain, also enter in Part I, line 8, | column (c)  | nd (6).  |  |  |                                  |
| If (loss), enter "-0-" in Part I, line 8                                     | 3   |  | 3  | N/A  |                                  |

## 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

2019

Name of the organization

Employer identification number

| F   | ISHER FAMILY FOUNDATION   | 04-6899625  |
|---|---|---|
| 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   | X 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.   |   |
| , ,   | c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special R  | ule See instructions                                  |
|   |   |   |
| General Rule  |   |   |
| · ·   | on filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totalin<br>y one contributor. Complete Parts I and II. See instructions for determining a contributo  | · · · · · · · · · · · · · · · · · · ·                 |
| Special Rules   |   |   |
| sections 509(a)(1<br>any one contribut                      | on described in section 501(c)(3) filing Form 990 or 990·EZ that met the 33 1/3% suppor<br>) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990·EZ), Part II, line 13, 16a<br>tor, during the year, total contributions of the greater of (1) \$5,000, or (2) 2% of the amon<br>Z, line 1 Complete Parts I and II   | , or 16b, and that received from                      |
| year, total contrib   | on described in section 501(c)(7), (8), or (10) filing Form 990 or 990 EZ that received from outions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or eduelty to children or animals. Complete Parts I, II, and III   |   |
| year, contribution<br>is checked, enter<br>purpose Don't co | on described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from is exclusively for religious, charitable, etc., purposes, but no such contributions totaled in here the total contributions that were received during the year for an exclusively religious complete any of the parts unless the <b>General Rule</b> applies to this organization because it ble, etc., contributions totaling \$5,000 or more during the year | nore than \$1,000 If this box<br>s, charitable, etc , |
| but it must answer "No" o                                   | that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (in Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its forthe 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) (2019)

Name of organization

Employer identification number

#### FISHER FAMILY FOUNDATION

04-6899625

| T T DITT.  | R TIBILDI TOORDIITOR   | <u> </u>                   | 0033023   |
|------------|--|----------------------------|---|
| Part I     | Contributors (see instructions) Use duplicate copies of Part I if additi | onal space is needed       |   |
| (a)<br>No. | (b)<br>Name, address, and ZIP + 4  | (c)<br>Total contributions | (d) Type of contribution  |
| 1          | RONALD D. FISHER & LISA ROSENBAUM  99 KIRKSTALL ROAD  NEWTON, MA 02460   | * 4,913,521.<br>-          | Person X Payroll  |
| (a)<br>No. | (b)<br>Name, address, and ZIP + 4  | (c) Total contributions    | (d) Type of contribution  |
|            |  | <br>\$                     | Person Payroll Oncash Complete Part II for noncash contributions )  |
| (a)<br>No. | (b)<br>Name, address, and ZIP + 4  | (c)<br>Total contributions | (d) Type of contribution  |
|            |  |                            | Person Payroll Noncash (Complete Part II for noncash contributions) |
| (a)<br>No. | (b)<br>Name, address, and ZIP + 4  | (c)<br>Total contributions | (d)<br>Type of contribution   |
|            |  | <br>\$                     | Person Payroll Noncash (Complete Part II for noncash contributions) |
| (a)<br>No. | (b)<br>Name, address, and ZIP + 4  | (c)<br>Total contributions | (d) Type of contribution  |
|            |  | \$                         | Person Payroll Noncash (Complete Part II for noncash contributions) |
| (a)<br>No. | (b)<br>Name, address, and ZIP + 4  | (c) Total contributions    | (d)<br>Type of contribution   |
|            |  | <br>\$                     | Person Payroll Oncash Complete Part II for noncash contributions )  |

Name of organization

Employer identification number

## FISHER FAMILY FOUNDATION

04-6899625

| ISHE                         | R FAMILY FOUNDATION  |  | 04-6899625                     |
|------------------------------|--|--|--------------------------------|
| Part II                      | Noncash Property (see instructions) Use duplicate copies of Part II if a | dditional space is needed                |                                |
| (a)<br>No.<br>from<br>Part I | (b)  Description of noncash property given                               | (c) FMV (or estimate) (See instructions) | (d)<br>Date received           |
| 1                            | VARIOUS STOCKS - DETAIL AVAILABLE UPON REQUEST                           | s 4,913,521                              |                                |
| (a)<br>No.<br>from<br>Part I | (b)  Description of noncash property given                               | (c) FMV (or estimate) (See instructions) | (d)<br>Date received           |
| Parti                        |  | \$                                       |                                |
| (a)<br>No.<br>from           | (b)  | (c) FMV (or estimate)                    | (d)                            |
| Part I                       | Description of noncash property given                                    | (See instructions)                       | Date received                  |
| (-)                          |  | \$                                       |                                |
| (a)<br>No.<br>from<br>Part I | (b)  Description of noncash property given                               | (c) FMV (or estimate) (See instructions) | (d)<br>Date received           |
|                              |  | \$                                       |                                |
| (a)<br>No.<br>from<br>Part I | (b)  Description of noncash property given                               | (c) FMV (or estimate) (See instructions) | (d)<br>Date received           |
|                              |  | \$                                       |                                |
| (a)<br>No<br>from<br>Part I  | (b)  Description of noncash property given                               | (c) FMV (or estimate) (See instructions) | (d)<br>Date received           |
|                              |  |  |                                |
|                              |  | \$                                       | form 990, 990-EZ, or 990-PF) ( |

| Marile Ói O               | vganization  |   |                                   | Employer identification number |
|---------------------------|--|---|-----------------------------------|--------------------------------|
|                           | R FAMILY FOUNDATION  |   |                                   | 04-6899625                     |
| Part III                  | from any one contributor Complete columns to   | through (e) and the following line entry          | For organizations                 |                                |
|                           | completing Part III, enter the total of exclusively religious, Use duplicate copies of Part III if additiona | charitable, etc., contributions of \$1,000 or les | s for the year (Enter this info o | nce) > \$                      |
| (a) No.                   |  |   | <u> </u>                          |                                |
| from<br>Part I            | (b) Purpose of gift  | (c) Use of gift                                   | (d) Des                           | scription of how gift is held  |
|                           |  |   |                                   |                                |
|                           |  |   |                                   |                                |
|                           |  |   | _                                 |                                |
| }                         |  | 1)= (1)   |                                   |                                |
|                           |  | (e) Transfer of gift                              |                                   |                                |
|                           | Transferee's name, address, a  | ind ZIP + 4                                       | Relationship of to                | ransferor to transferee        |
| Ì                         |  |   | ·                                 |                                |
|                           |  |   |                                   |                                |
|                           |  |   |                                   |                                |
| (a) No.                   |  | <u> </u>  |                                   |                                |
| (a) No.<br>from<br>Part I | (b) Purpose of gift  | (c) Use of gift                                   | (d) Des                           | scription of how gift is held  |
|                           | 4,   |   |                                   |                                |
|                           |  |   |                                   |                                |
|                           |  |   | _                                 |                                |
|                           |  | 1.  |                                   |                                |
|                           |  | (e) Transfer of gift                              |                                   |                                |
|                           | Transferee's name, address, a  | ind ZIP + 4                                       | Relationship of to                | ransferor to transferee        |
|                           |  |   |                                   |                                |
|                           |  |   |                                   |                                |
|                           |  |   |                                   |                                |
| (a) No.<br>from           |  |   |                                   |                                |
| Part I                    | (b) Purpose of gift  | (c) Use of gift                                   | (d) De:                           | scription of how gift is held  |
|                           |  |   |                                   |                                |
|                           |  |   | _                                 |                                |
|                           |  |   | _                                 |                                |
| ŀ                         |  | (e) Transfer of gift                              |                                   |                                |
|                           |  |   |                                   |                                |
|                           | Transferee's name, address, a  | ind ZIP + 4                                       | Relationship of to                | ransferor to transferee        |
|                           |  |   |                                   |                                |
|                           |  | <del></del>                                       | <del>-</del>                      |                                |
|                           |  |   |                                   |                                |
| (a) No.<br>from<br>Part I | (b) Purpose of gift  | (c) Use of gift                                   | (d) De                            | scription of how gift is held  |
| Part I                    | (5) Turpose or give  | (0, 000 or give                                   | (4,20)                            |                                |
|                           |  |   | _                                 |                                |
|                           |  |   | _                                 |                                |
|                           |  |   |                                   |                                |
| ĺ                         |  | (e) Transfer of gift                              | <u> </u>                          |                                |
|                           |  |   |                                   |                                |
|                           | Transferee's name, address, a  | ind ZIP + 4                                       | Relationship of ti                | ransferor to transferee        |
|                           |  |   |                                   |                                |
|                           |  |   |                                   |                                |
|                           |  |   |                                   |                                |

| FORM 99  | 0-PF (                               | GAIN OR (LOSS) F                              | ROM SALE               | OF | ASSETS             | STA              | ATEMENT 1        |
|----------|--------------------------------------|---|------------------------|----|--------------------|------------------|------------------|
| DESCRIP  | (A)<br>TION OF PROPERTY              | <u>,                                     </u> |                        |    | MANNER<br>CQUIRED  | DATE<br>ACQUIRED | DATE SOLD        |
|          | RY TRUST INTERNA<br>LE UPON REQUEST) |   | ETAILS                 | PU | RCHASED            |                  |                  |
|          | (B)<br>GROSS<br>SALES PRICE          | (C)<br>COST OR<br>OTHER BASIS                 | (D)<br>EXPENSE<br>SALE | OF | (E)<br>DEPREC      | . GAIN           | (F)<br>OR LOSS   |
|          | 596,384.                             | 541,617.                                      |                        | 0. |                    | 0.               | 54,767.          |
| DESCRIP' | (A)<br>FION OF PROPERTY              |   |                        |    | MANNER<br>.CQUIRED | DATE<br>ACQUIRED | DATE SOLD        |
|          | RY TRUST INTERNA<br>LE UPON REQUEST) |   | ETAILS                 | PU | RCHASED            |                  |                  |
|          | (B)<br>GROSS<br>SALES PRICE          | (C)<br>COST OR<br>OTHER BASIS                 | (D)<br>EXPENSE<br>SALE | OF | (E)<br>DEPREC      | . GAIN           | (F)<br>I OR LOSS |
| <u>-</u> | 579,923.                             | 547,165.                                      |                        | 0. |                    | 0.               | 32,758.          |
| DESCRIP' | (A)<br>FION OF PROPERTY              | 7   |                        |    | MANNER<br>CQUIRED  | DATE<br>ACQUIRED | DATE SOLD        |
|          | RY TRUST INTERNA<br>LE UPON REQUEST) |   | ETAILS                 | D  | ONATED             |                  |                  |
|          | (B)<br>GROSS<br>SALES PRICE          | (C)<br>VALUE AT<br>TIME OF ACQ.               | (D)<br>EXPENSE<br>SALE | OF | (E)<br>DEPREC      | . GAIN           | (F)              |
| -        | 24,204.                              | 22,503.                                       |                        | 0. |                    | 0.               | 1,701.           |

| DESCRIPT                                  | (A)<br>ION OF E        | PROP  | ERTY                   |       |                            |                    |                     | NNE<br>QUIR                                |             | DA'<br>ACQU  |   | DATE                    | SOLD  |
|---|------------------------|-------|------------------------|-------|----------------------------|--------------------|---------------------|--|-------------|--------------|---|-------------------------|-------|
| FIDUCIAR<br>AVAILABL                      |                        |       | ERNATIONAL =           | #5700 | ) (DETAIL                  | S                  | DON                 | IATE                                       | D D         |              |   |                         |       |
|   | (B)<br>GROS<br>SALES E | SS    | (C<br>VALUI<br>TIME OI | E AT  | EXPE                       | D)<br>NSE (<br>ALE | OF                  |  | (E)<br>PREC | ·            | GAI   | (F)<br>N OR L           | oss   |
|   | 82                     | 25,84 | 16. 20                 | 66,56 | 54.                        |                    | 0.                  |  |             | 0.           |   | 559                     | ,282. |
|   |                        |       | ENDS FROM PA           |       |                            |                    |                     |  |             | -<br>-       |   |                         | ,154. |
| FORM 990                                  | -PF INT                | TERES | T ON SAVING            | GS AN | ND TEMPOR                  | ARY (              | CASH                | INV  | ESTM        | IENTS        | ST  | ATEMEN                  | T 2   |
| SOURCE                                    |                        |       |                        |       | (A)<br>REVENUE<br>PER BOOK |                    | NET                 |  |             | ENT          |   | (C)<br>ADJUST<br>ET INC |       |
| FIDUCIAR<br>#5700<br>MORGAN S             |                        |       | ERNATIONAL<br>5        |       | 6                          | 93.<br>78.         |                     |  | 6           | 93.          |   |                         |       |
| TOTAL TO                                  | PART I,                | LII   | <b>IE</b> 3            |       | 7                          | 71.                |                     |  | 7           | 71.          |   |                         |       |
| FORM 990                                  | -PF                    |       | DIVIDENDS              | AND   | INTEREST                   | FROM               | 1 SEC               | URI  | PIES        | <br>         | ST  | ATEMEN                  | т 3   |
| SOURCE                                    |                        |       | GROSS<br>AMOUNT        | C     | APITAL<br>GAINS<br>VIDENDS | REV                | (A)<br>ENUE<br>BOOK |  |             | (B)<br>INVES |   | (C<br>ADJU<br>NET I     | STED  |
| FIDUCIAR<br>INTERNAT<br>#5700<br>FIDUCIAR | IONAL Y TRUST          |       | 9,027.                 |       | 0.                         |                    | 9,02                | 27.  |             | 9,02         | 27.   |                         |       |
| INTERNAT<br>#5700<br>MORGAN S             |                        |       | 2,154.                 |       | 2,154.                     |                    |                     | 0.   |             |              | 0.  |                         |       |
| #9106                                     |                        | _     | 61,488.                |       | 0.                         |                    | 51,48               |  |             | 61,48        |   |                         |       |
| TO PART                                   | I, LINE                | 4 =   | 72,669.                |       | 2,154.                     |                    | 70,51               | .o.<br>=================================== |             | 70,5         | 15.<br>==================================== | <del></del>             |       |

| FORM 990-PF   | OTHER PROFES                     | SIONAL FEES                             | STATEMENT 4                  |   |                |  |
|---|----------------------------------|---|------------------------------|---|----------------|--|
| DESCRIPTION   | (A)<br>EXPENSES<br>PER BOOKS     | (B)<br>NET INVEST-<br>MENT INCOME       |                              |   |                |  |
| INVESTMENT ADVISORY FEES  | 9,344.                           | 9,344.                                  |                              |   | 0.             |  |
| TO FORM 990-PF, PG 1, LN 16C  | 9,344.                           | 9,344.                                  |                              |   | 0.             |  |
| FORM 990-PF   | TAX                              | ES                                      |                              | STATEMENT                                   | 5              |  |
| DESCRIPTION   | (A)<br>EXPENSES<br>PER BOOKS     | (B)<br>NET INVEST-<br>MENT INCOME       |                              |   |                |  |
| FOREIGN TAXES FEDERAL TAXES   | 9,417.<br>2,071.                 |   |                              |   | 0.             |  |
| TO FORM 990-PF, PG 1, LN 18   | 11,488.                          | 11,488.                                 |                              |   | 0.             |  |
| FORM 990-PF   | OTHER E                          | XPENSES                                 |                              | STATEMENT                                   | 6              |  |
|   |                                  |   |                              |   |                |  |
| DESCRIPTION   | (A)<br>EXPENSES<br>PER BOOKS     |   | (C)<br>ADJUSTED<br>NET INCOM |   |                |  |
| DESCRIPTION  BANK FEES STATE FILING FEES                            | EXPENSES                         | NET INVEST-                             | ADJUSTED<br>NET INCOM        | CHARITAB DURPOSE                            |                |  |
| BANK FEES   | EXPENSES PER BOOKS               | NET INVEST-<br>MENT INCOME              | ADJUSTED<br>NET INCOM        | CHARITAB DE PURPOSE                         | 0.             |  |
| BANK FEES STATE FILING FEES   | EXPENSES PER BOOKS 65. 250.      | NET INVEST- MENT INCOME  0. 0.          | ADJUSTED<br>NET INCOM        | CHARITAB DE PURPOSE                         | 0.<br>0.       |  |
| BANK FEES STATE FILING FEES TO FORM 990-PF, PG 1, LN 23             | EXPENSES PER BOOKS 65. 250.      | NET INVEST- MENT INCOME  0. 0.  E STOCK | ADJUSTED<br>NET INCOM        | CHARITAB IE PURPOSE                         | 0.<br>0.<br>0. |  |
| BANK FEES STATE FILING FEES TO FORM 990-PF, PG 1, LN 23 FORM 990-PF | EXPENSES PER BOOKS 65. 250. 315. | NET INVEST- MENT INCOME  0. 0.  E STOCK | ADJUSTED NET INCOM           | CHARITAB IE PURPOSE  STATEMENT  FAIR MARKET | 0.<br>0.<br>0. |  |

FORM 990-PF

PART XV - LINE 1A LIST OF FOUNDATION MANAGERS STATEMENT

NAME OF MANAGER

RONALD FISHER LISA ROSENBAUM MATTHEW FISHER