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Department of the Treasury

### EXTENSION GRANTED TO 11/15/10

## **Return of Private Foundation**

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

Note The foundation may be able to use a copy of this return to satisfy state reporting requirements.

2000

<b>-</b>	intern	a He	venue Service NC	vie the loundation may i	be able to use a copy of this	return to satisfy state reput	i ung requirements.	
7	Ford	calen	dar year 2009, or tax year	r beginning		, and ending		
7	GC	heck	all that apply:	initial return	Initial return of a fo	rmer public charity	Final return	
>	_			Amended return	Address chan	· · · · ·	Name change	
<u>П</u>		the I	Name of foundation				A Employer identification	number
Ω		ahal	ino					
ш	()th	ievel. Jerwie	THE SCOTT	FAMILY FOUN	DATION, INC.		65-0300419	
Ā	Jul	orint	Number and street (or P (	D box number if mail is not de		Room/suite	B Telephone number	
X	01	r type	ŀ	DERAL HIGHW	•	310	561-347-23	68
A	See	Spec	City or town, state, an		<u> </u>	510		
Σ	Insti	ructio	BOCA RATON				C If exemption application is p D 1. Foreign organizations	
٥Š		\ha-l-	buck KATUN		<del></del>		2. Foreign organizations me	eting the 85% test.
۵	H C	neck √	type of organization:	X Section 501(c)(3) ex			Foreign organizations me check here and attach co	mputation
	ئ		ction 4947(a)(1) nonexemp		Other taxable private founda	<del></del>	E If private foundation sta	
			rket value of all assets at e	· · · —	=	Accrual	under section 507(b)(1)	(A), check here
			Part II, col. (c), line 16)		her (specify)		F If the foundation is in a	
	_	-\$			mn (d) must be on cash l	pasis.)	under section 507(b)(1)	
	Pa	art I	Analysis of Revenue and	I Expenses	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements for charitable purposes
			(The total of amounts in colun necessarily equal the amount	s in column (a) )	expenses per books	income	income	(cash basis only)
		1	Contributions, gifts, grants	s, etc., received			N/A	
		2	Check X If the foundation		-			
		3	Interest on savings and tempor cash investments	rary		-		
		4	Dividends and interest from		2,374.	2,374.		STATEMENT 1
		5a	Gross rents			•		
		b	Net rental income or (loss)		t		,	
>		6a	Net gain or (loss) from sale of a	assets not on line 10	-3,296.	-	ì	
2010	Revenue	b	Gross sales price for all assets on line 6a	6,840.	3,220		DEN	MACO 1
i	Ve	7		-		0.	1	3 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
) J	æ	8	Net short-term capital gair	•		<b></b>	8	10
₹		9	Income modifications	•			F 55P 3	7 25.0
ī		10a	Gross sales less returns		- 1	·	10	ic
		Ι.					- Figh	TI IA
		ŀ	Cross profit or (loss)				* * * * * * * * * * * * * * * * * * * *	F X 9 And S
		I	Gross profit or (loss) Other income		-	<del></del>		
		11		h 11	-922.	2 274		-
		12	Total. Add lines 1 through		12.	2,374.		-
		13	Compensation of officers, direct		0.	0.		0.
	į	14	Other employee salaries a	•				
	es	1	Pension plans, employee I	benetits				
	ıse	16a	Legal fees					
	per	b	Accounting fees					
	ŭ	C	Other professional fees					
	<u>X</u>	17	Interest					
	rat	18	Taxes			· · · · · · · · · · · · · · · · · · ·		
	nist	19	Depreciation and depletion	n				
	Ē	20	Occupancy					
	A	21	Travel, conferences, and r	neetings				
	P	22	Printing and publications	-				
	<u> </u>	23	Other expenses	STMT 2	61.	0.		0.
	atin	24	Total operating and admi					
	Operating and Administrative Expense		expenses Add lines 13 th		61.	0.		0.
	ŏ	25	Contributions, gifts, grants	_	30,500.			30,500.
		1	Total expenses and disbu	•	30,300.	<del> </del>	<u> </u>	30,300.
		[	Add lines 24 and 25	giveniend.	30,561.	0.		30,500.
	—	27	Subtract line 26 from line	12.	30,301.			30,300.
					31,483.			
		I	Excess of revenue over expens		-31,403.	2,374.	<del> </del>	-
	į	1	Net investment income (if			4,3/4.	NT / 7	
		<u>∟ c</u>	Adjusted net income (if ne	gative, enter -0-)	1		N/A	L.,

02-02-10

LHA For Privacy Act and Paperwork Reduction Act Notice, see the instructions.

Form **990-PF** (2009)

WNE

6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30

	SCOTT FAMILY FOR						65-030	0419 Page 3
(a) List and describ	be the kind(s) of property sold (e.g.	, real estate,	t mcome	(b) H	low acquired Purchase Donation		Date acquired	(d) Date sold
	ehouse; or common stock, 200 shs			D.		-	mo., day, yr.)	(mo., day, yr.)
	H STRATEGY MUTU.				<u>Р</u> Р		5/22/08	12/14/09 12/16/09
b GS EQUITY GROWT	'H STRATEGY MUTU.	AL FUN	D-INSIL	-	Р	0:	5/22/08	12/16/09
d								
e								
(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale			((	(h) Gain or (loss e) plus (f) minus (	
a 4,340.			6,42					-2,089.
b 2,500.			3,70	7.				_1,207.
C					<del>.</del>			
d					<del></del>			
Complete only for assets showing	gain in column (h) and owned by t	the foundation	nn 12/31/69	$\dashv$		(I) Ga	uns (Col. (h) gain	minue
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Ex	cess of col. (i)		(	còl. (k)	, but not less that osses (from col. (	n -0-) <b>or</b>
a								-2.089.
b								-2,089. $-1,207.$
C								
d								
е				_	· · · · · · · · · · · · · · · · · · ·			
2 Capital gain net income or (net cap	$\{$ If gain, also enter ital loss $\}$ $\{$ If (loss), enter -0-			}	2		_	-3,296.
3 Net short-term capital gain or (loss		d (6):		٦				
If gain, also enter in Part I, line 8, co	olumn (c).				,		N/A	
If (loss), enter -0- in Part I, line 8  Part V   Qualification Un	der Section 4940(e) for	Reduced	Tax on Net	Inve	stment li	ncor		
(For optional use by domestic private f				_			· · ·	
	•	( )			•			
If section 4940(d)(2) applies, leave this								
	s part diank.							
Was the foundation liable for the section	on 4942 tax on the distributable am		· ·	rıod?				Yes X No
If "Yes," the foundation does not qualif	on 4942 tax on the distributable am y under section 4940(e). Do not co	mplete this pa	ırt.					Yes X No
If "Yes," the foundation does not qualif 1 Enter the appropriate amount in ea	on 4942 tax on the distributable am y under section 4940(e). Do not co ich column for each year; see instru	mplete this pa	ırt.	es.				
If "Yes," the foundation does not qualif 1 Enter the appropriate amount in ea (a) Base period years	on 4942 tax on the distributable am y under section 4940(e). Do not co ich column for each year; see instru (b)	mplete this pa uctions before	ırt.	es. (c)	ıtable-use asse	ets	Distrit (col. (b) div	(d)
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-orn		iC.		<u>0300</u>			Page 4
Pa	int VI Excise Tax Based on Investment Income (Section 4940)	a), 4940(b), 4940(e), or	1948	- see ir	ıstru	ctior	ıs)
1a	Exempt operating foundations described in section 4940(d)(2), check here and ente	r "N/A" on line 1.					
	Date of ruling or determination letter: (attach copy of letter if necess	sary-see instructions)		İ			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here		1_1_		_		24.
	of Part I, line 27b						
C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of	f Part I, line 12, col. (b)		-			-
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Other		2				0.
	Add lines 1 and 2	,	3				24.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Other	ers enter -0-)	4				0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	•	5				24.
	Credits/Payments;				_	-	
	l e e e e e e e e e e e e e e e e e e e	6a				=	
	· · · · · · · · · · · · · · · · · · ·	6b	7		'	-	
		6c	1				-
	- · · · · · · · · · · · · · · · · · · ·	6d	1				
	Total credits and payments. Add lines 6a through 6d	00	7				0.
	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	ad.	8				••
	Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed	su •	9				24.
	Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		10	<del> </del>			<u> </u>
	• •	Potunded	11	<u> </u>			
	Enter the amount of line 10 to be: Credited to 2010 estimated tax  Int VII-A Statements Regarding Activities	Refunded	1.11	1			• =
_	During the tax year, did the foundation attempt to influence any national, state, or local legislati	on or did it narticinate or interien	A ID			Yes	No
14	any political campaign?	ion of the R participate of interven	C III		1a		X
		(can instructions for definition)?			1b		X
U	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes		od or		טו		<u>.</u>
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and c	opies or arry materials publish	eu or				:
_	distributed by the foundation in connection with the activities.				4.		v
	Did the foundation file Form 1120-POL for this year?				10		X
O	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year						-
_	(1) On the foundation.  \$ 0. (2) On foundation managers.   [The state of the state		<u>-</u>				
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditur	e tax imposeu on toundation					
	managers. > \$ 0.	n			_	- '	v
2	Has the foundation engaged in any activities that have not previously been reported to the IRS'	,			2		X
	If "Yes," attach a detailed description of the activities.				'		-
3	Has the foundation made any changes, not previously reported to the IRS, in its governing inst	trument, articles of incorporation,	or				-
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes				3		X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			. / .	4a		_X_
	If "Yes," has it filed a tax return on Form 990-T for this year?		1	I/A	4b		w
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		-		5		X
_	If "Yes," attach the statement required by General Instruction T.					İ	
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either	<b>#1.</b>					-
	By language in the governing instrument, or						
	By state legislation that effectively amends the governing instrument so that no mandatory d	directions that conflict with the sta	te Iaw		_		
	remain in the governing instrument?				6	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year?				7	X	<del>.</del>
	If "Yes," complete Part II, col. (c), and Part XV						
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)	) >					
	FL_						
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Atto	rney General (or designate)					
	of each state as required by General Instruction G? If "No," attach explanation				8b	X	
9	Is the foundation claiming status as a private operating foundation within the meaning of section		lendar				
	year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If "Yes," con				9	_	<u>X</u>
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule I	listing their names and addresses			10		<u> </u>
				Forr	n <b>990</b>	-PF(	2009)

	1990-PF (2009) THE SCOTT FAMILY FOUNDATION, INC. 65-0300  Art VII-A   Statements Regarding Activities (continued)	419	_	Page 5
		$\Box$		
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)	,,		v
19		11		X
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before	,,		v
12	August 17, 2008?  Did the foundation comply with the public independent convergence for its angual returns and examples and examples and examples.	12	х	X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13		
44	Website address N/A  The backs are in core of N PERFOCA T COOME.  Talesbase as N 5.61 3.3	0 7	017	
14	The books are in care of REBECCA J. SCOTT  Telephone no. > 561-33		<u> </u>	
4-	Located at ► 1877 S. FEDERAL HIGHWAY #310, BOCA RATON, FL ZIP+4 ►33	432		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		<b>,</b> ▶	
	and enter the amount of tax-exempt interest received or accrued during the year	N	/ <u>A</u>	
Pi	art VII-B Statements Regarding Activities for Which Form 4720 May Be Required	<del></del>		
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
18	ı Durıng the year dıd the foundation (either directly or indirectly):			-
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?		-	-
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)	-		_
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(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)?			
	(6) Agree to pay money or property to a government official? (Exception Check "No"			
	if the foundation agreed to make a grant to or to employ the official for a period after	-		
	termination of government service, if terminating within 90 days.)	-		
	of fany answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			
٠		1, 1	-	-
		1b		
_	Organizations relying on a current notice regarding disaster assistance check here	-		
(	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected	1. 1	-	7,7
_	before the first day of the tax year beginning in 2009?	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)):		- 1	-
ā	At the end of tax year 2009, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning	-	-	
	before 2009?			
	If "Yes," list the years 🛌 ,,,,,,,			ı
t	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect		' -	-
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach			
	statement - see instructions.) N/A	2b		
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			,
	<b>•</b>			
38	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time	-		
	during the year?	1.		
ŀ	of "Yes," did it have excess business holdings in 2009 as a result of (1) any purchase by the foundation or disqualified persons after			
	May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose			-
	of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,			
	4-	25		
4-		3b	-	X
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?  Did the foundation make any investment in a prior year (but ofter December 21, 1990) that could populate the observable purpose that	4a		-
	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that	,		
	had not been removed from jeopardy before the first day of the tax year beginning in 2009?	1 4D		I 🔼

Form **990-PF** (2009)

Form 990-PF (2009) THE SCOTT FAMILY FOUNDAT			<u>65-03004</u>	19	Page 6
Part VII-B   Statements Regarding Activities for Which I	Form 4720 May Be F	Required (contin	ued)		
5a During the year did the foundation pay or incur any amount to:				·	
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	n 4945(e))?	Ye	s X No	ŀ	
(2) Influence the outcome of any specific public election (see section 4955); of	or to carry on, directly or indir	ectly,			
any voter registration drive?		Ye	s 🗓 No 📙	- î	
(3) Provide a grant to an individual for travel, study, or other similar purposes	?	Ye	s X No	_	-
(4) Provide a grant to an organization other than a charitable, etc., organizatio			-	-	
509(a)(1), (2), or (3), or section 4940(d)(2)?		Ye	s X No	ł	
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or t	for		·	
the prevention of cruelty to children or animals?	, , ,		s X No	.	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify uni	der the exceptions described	ın Regulations	1	-	
section 53.4945 or in a current notice regarding disaster assistance (see instru		Ü	N/A	5b	1
Organizations relying on a current notice regarding disaster assistance check h	•		▶ □	-	
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fi		ined			
expenditure responsibility for the grant?		I/A 🔲 Ye	s No		
If "Yes," attach the statement required by Regulations section 53 494		.,			
<b>6a</b> Did the foundation, during the year, receive any funds, directly or indirectly, to					
a personal benefit contract?	pay promisers on	☐ Ye	s X No		
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	nersonal henefit contract?			6Ь	x
If "Yes" to 6b, file Form 8870.	or donar borront donardet			-	
7a At any time during the tax year, was the foundation a party to a prohibited tax s	chalter transaction?	□ v <sub>e</sub>	es X No		-
b If yes, did the foundation receive any proceeds or have any net income attribut				7b	
Information About Officers Diseases Truck		nagers Highly		70	
Part VIII Paid Employees, and Contractors	ccs, i dundation me	inagers, riigini	•		
1 List all officers, directors, trustees, foundation managers and their	compensation.				
	(b) Title, and average hours per week devoted	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(€	Expense count, other
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	and deferred compensation	acc	count, otner illowances
STEVEN M. SCOTT, M.D.	PRESIDENT				
1877 S. FEDERAL HIGHWAY, #310	1				
BOCA RATON, FL 33432	0.00	0.	0.		0.
REBECCA J. SCOTT	VICE PRESIDEN				
1877 S. FEDERAL HIGHWAY, #310	1102 1112525	<b>\</b>		ì	
BOCA RATON, FL 33432	0.00	0.	0.		0.
STEVEN R. SCOTT	SEC/TREAS	<u> </u>		<u> </u>	
1877 S. FEDERAL HIGHWAY, #310					
BOCA RATON, FL 33432	0.00	0.	0.		0.
BOCK RATON, TH 33432	0.00		•		
2 Compensation of five highest-paid employees (other than those inc	luded on line 1). If none,	enter "NONE."	L		<del></del>
	(b) Title, and average		(d) Contributions to employee benefit plans	(6	e) Expense
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	and deferred compensation		count, other Illowances
NONE	dovoted to position		compensation	<del>                                     </del>	
HOND				1	
				<del>                                     </del>	
	1				
				1	<u></u>
	1				
		+		1	
	-				
	· · · · · · · · · · · · · · · · · · ·	-		+	
	-			1	
Total number of other employees part over \$50,000	<u> </u>	L		<u> —</u>	0
Total number of other employees paid over \$50,000	<del> · · · · · · · · · · · · · · · · ·</del>				

Form 990-PF (2009) THE SCOTT FAMILY FOUNDATION, INC.		0300419 Page 7
Part VIII Information About Officers, Directors, Trustees, Foundat Paid Employees, and Contractors (continued)	ion Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter	"NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE	(3,2)	
	7	
	1	
	1	
	7	
-		
Total number of others receiving over \$50,000 for professional services		. • 0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistic number of organizations and other beneficiaries served, conferences convened, research papers produced.	cal information such as the iced, etc.	Expenses
1 N/A		
2		
3		
4		
Part IX-B Summary of Program-Related Investments		· · · · · · · · · · · · · · · · · · ·
Describe the two largest program-related investments made by the foundation during the tax year on la	nes 1 and 2.	Amount
1 <u>N/A</u>		
2		
All other program-related investments. See instructions.		
3		
Total. Add lines 1 through 3	<b>&gt;</b>	

Form **990-PF** (2009)

Page 8

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations	, see instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities	1a	108,187.
	Average of monthly cash balances	1b	13,905.
C	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	122,092.
е	Reduction claimed for blockage or other factors reported on lines 1a and	-	
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	122,092.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	1,831.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	120,261.
6_	Minimum investment return Enter 5% of line 5	6	6,013.
P	art XI Distributable Amount (see instructions) (Section 4942(i)(3) and (i)(5) private operating foundations are foreign organizations check here  and do not complete this part.)	ıd certaın	
1	Minimum investment return from Part X, line 6	1	6,013.
2a	Tax on investment income for 2009 from Part VI, line 5		
b	Income tax for 2009. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	24.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	5,989.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	5,989.
6	Deduction from distributable amount (see instructions)	6	0.
<u>7</u>	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	5,989.
=	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	-	
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	30,500.
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:		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	30,500.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	income. Enter 1% of Part I, line 27b	5	24.
6	Adjusted qualifying distributions Subtract line 5 from line 4	6	30,476.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation (4940(e) reduction of tax in those years.	qualifies fo	or the section

Form **990-PF** (2009)

Part XIII Undistributed Income (see instructions)

		(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
1	Distributable amount for 2009 from Part XI,				
	line 7				5,989.
	Undistributed income, if any, as of the end of 2009			:	
	Enter amount for 2008 only			0.	
t	Total for prior years:		_		
			0.		
-	Excess distributions carryover, if any, to 2009:				
	a From 2004		<u>-</u>		-
_	From 2005	•		i.	
	From 2006				e .
	1 From 2007		-		
	From 2008	•		-	_
	Total of lines 3a through e	0.	-	·	
4	Qualifying distributions for 2009 from				
	Part XII, line 4: ► \$ 30,500.				
	Applied to 2008, but not more than line 2a			0.	
t	Applied to undistributed income of prior			_	-
	years (Election required - see instructions)	1	0.		
(	Treated as distributions out of corpus		<del>-</del>		-
	(Election required - see instructions)	0.			5 000
	Applied to 2009 distributable amount		-		5,989.
•	Remaining amount distributed out of corpus	24,511.	<u>-</u>		
5	Excess distributions carryover applied to 2009 (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:	-	-		
á	Corpus Add lines 3f, 4c, and 4e Subtract line 5	24,511.		-	
	Prior years' undistributed income. Subtract	•		-	-
	line 4b from line 2b		0.		-
(	Enter the amount of prior years'				
	undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed	Ē	0.		
	Subtract line 6c from line 6b. Taxable	-			
	amount - see instructions		0.	-	
	Undistributed income for 2008. Subtract line	· · · · · · · · · · · · · · · · · · ·			
	4a from line 2a. Taxable amount - see instr.	-		0.	
1	Undistributed income for 2009. Subtract	-			
	lines 4d and 5 from line 1. This amount must				
	be distributed in 2010				0.
7	Amounts treated as distributions out of		-		
	corpus to satisfy requirements imposed by				
	section 170(b)(1)(F) or 4942(g)(3)	0.			
8	Excess distributions carryover from 2004				
	not applied on line 5 or line 7	0.		-	_
9	Excess distributions carryover to 2010.	<del></del>			-
•	Subtract lines 7 and 8 from line 6a	24,511.	-	,	-
0	Analysis of line 9:				
	Excess from 2005				
	Excess from 2006				
	Excess from 2007				
	Excess from 2008		-	_	
	Excess from 2009 24,511.				

Form 990-PF (2009) THE SC	OTT FAMILY F	OUNDATION,	INC.	65-03	00419 Page 10
Part XIV Private Operating I	Foundations (see in	structions and Part VI	-A, question 9)	N/A	<u> </u>
1 a If the foundation has received a ruling	or determination letter tha	it it is a private operating			
foundation, and the ruling is effective for	or 2009, enter the date of	the ruling	<b>▶</b>		
b Check box to indicate whether the four	idation is a private operati	ng foundation described	n section	4942(j)(3) or 49	)42(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum	(a) 2009	(b) 2008	(c) 2007	(d) 2006	(e) Total
investment return from Part X for					
each year listed					
b 85% of line 2a					
c Qualifying distributions from Part XII,			·		
line 4 for each year listed					
d Amounts included in line 2c not					
used directly for active conduct of					
exempt activities					
·				<u> </u>	
e Qualifying distributions made directly			1	1	
for active conduct of exempt activities.					
Subtract line 2d from line 2c 3 Complete 3a, b, or c for the				<u> </u>	
alternative test relied upon:	1				
a "Assets" alternative test - enter:					
(1) Value of all assets					
(2) Value of assets qualifying	İ				
under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter					
2/3 of minimum investment return shown in Part X, line 6 for each year	į				
listed					
c "Support" alternative test - enter:					
(1) Total support other than gross					
investment income (interest,					
dividends, rents, payments on			1		
securities loans (section 512(a)(5)), or royalties)			1		
(2) Support from general public		-			
and 5 or more exempt					
organizations as provided in					
section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from					
an exempt organization	-				
(4) Gross investment income		<u> </u>			
Part XV Supplementary Info			if the foundation	n had \$5,000 or me	ore in assets
at any time during	tne year-see tne	instructions.)			
1 Information Regarding Foundation	on Managers:				
a List any managers of the foundation w			ributions received by th	e foundation before the clo	se of any tax
year (but only if they have contributed	more than \$5,000). (See s	section 507(d)(2).)			
NONE					
b List any managers of the foundation w	no own 10% or more of th	he stock of a corporation	or an equally large port	ion of the ownership of a p	artnership or
other entity) of which the foundation ha	as a 10% or greater intere	st			
NONE					
2 Information Regarding Contribu	tion, Grant, Gift, Loan	. Scholarship, etc., Pr	ograms:		
Check here ► X If the foundation				not accent unsolicited requ	ests for funds. If
the foundation makes gifts, grants, etc.					
a The name, address, and telephone num					
N/A	ibor of the person to who	in applications should be	auurosseu.		
N/A					
h. The form in which applications about	he submitted and informs	stop and materials they of	hould include:		
b The form in which applications should	de sudmitted and informa	iuon and materials they si	noula include:		
N/A					
c Any submission deadlines:					
N/A					
d Any restrictions or limitations on award	is, such as by geographic	al areas, charitable fields,	kinds of institutions, or	other factors:	
N/A					
	<u>,                                      </u>				
923801 02-02-10					Form 990-PF (2009)

Part XV Supplementary Information (continued)								
3 Grants and Contributions Paid During the Ye		Payment						
Recipient  Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount				
	or substantial contributor	recipient		-				
a Paid during the year SAINT ANDREWS SCHOOL 3900 JOG ROAD BOCA RATON, FL 33434		EDUCATION	EDUCATIONAL ACTIVITIES	20,000.				
LUCY DANIELS CENTER 9003 WESTON PKWY CARY, NC 27513		EDUCATION	EDUCATIONAL ACTIVITIES	10,000.				
SPANISH RIVER CHURCH 2400 YAMATO ROAD BOCA RATON, FL 33431		CHURCH	RELIGIOUS ACTIVITIES	500.				
Total	r		► 3a	30,500.				
b Approved for future payment SPANISH RIVER CHURCH 2400 YAMATO ROAD BOCA RATON, FL 33431		CHURCH	RELIGIOUS ACTIVITIES	34,500.				
Total			<b>▶</b> 3b	34,500.				

# Part XVI-A Analysis of Income-Producing Activities

				<del></del>	
Enter gross amounts unless otherwise indicated.	(a) Business	usiness income (b) Amount	(C) Exclu- sion	y section 512, 513, or 514 (d) Amount	(e) Related or exempt function income
1 Program service revenue:	code	Antount	code	AHOUR	Tunction income
a	_				
b			+		
c		-	+		
d			<del>                                     </del>		
e	-				
Topo and contracts from government connects	-		+		
g Fees and contracts from government agencies			<del>                                     </del>		
2 Membership dues and assessments 3 Interest on savings and temporary cash					
investments					
4 Dividends and interest from securities			14	2,374.	
5 Net rental income or (loss) from real estate:					
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal					
property			1 1		
7 Other investment income			$\perp$		
8 Gain or (loss) from sales of assets other				2 225	
than inventory			18	-3,296.	
9 Net income or (loss) from special events			<del>- </del>		
10 Gross profit or (loss) from sales of inventory			+		
11 Other revenue:					
a	1		1		
b			+		
c d	1		+ +		
0	_	· · · · · · · · · · · · · · · · · · ·	1		
12 Subtotal. Add columns (b), (d), and (e)		0		-922.	0.
13 Total. Add line 12, columns (b), (d), and (e)	<del>1 '</del>	<u>v</u> .	<u> </u>		-922.
(See worksheet in line 13 instructions to verify calculations	}				
Part XVI-B Relationship of Activities	•	inlishment of F	vemnt P	umoses	
Telediolismp of Activities					
Line No Explain below how each activity for which in				d importantly to the accomp	olishment of
the foundation's exempt purposes (other th	an by providing funds	for such purposes).			- · · · · · · · · · · · · · · · · · · ·
	<del> </del>				
			<del></del>		
		<del></del>			
<del>-  </del>					
			<u> </u>	<del>.</del>	
	- <u></u>				
				·······	
				, ,	
	•				

2a	Is the	foundation directly or indirectly affiliated with, or related to, on	e or more tax-exempt organ	nizations described			
	ın sec	tion 501(c) of the Code (other than section 501(c)(3)) or in sec	ction 527?			Y	es X No
b		s," complete the following schedule.					
		(a) Name of organization	(b) Type of organization		(c) Description of	f relationship	
		N/A					
							-
						-	
		enalties of perjury, declare that I have examined this return, including acc			of my knowledge and	belief, it is true, c	orrect,
	and con	plete Declaration of preparer (other than tax payer or fiduciary) is based or		er has any knowledge	_		
		1 certain	9-1-10	Presis	dent		
Here	Sı	gnature of officer or trustee	Date	Title			
Ī		Preparer's		Date, Ch	heck if	Preparer's ide	ntifying number
Sign	Paid Preparer's Use Only	signature / / / / / / / / / / / / / / / / / / /			nployed 🕨 🔙	]	
	Paid pare e On	Firm's name (or yours DASZKAL BOLTON LLP		,	EIN ▶		
	_ S S	if self-employed). 2401 NW BOCA RATON	BLVD				
		address, and ZIP code BOCA RATON, FLORIDA	A 33431-6639		Phone no.	(561) 3	67-1040

FORM 990-PF DIVIDENT	OS ANI	O INTER	EST FROM	SECUE	RITIES	STATEMENT	1	
SOURCE					ITAL GAINS IVIDENDS	COLUMN (A) AMOUNT 2,374.		
GOLDMAN SACHS ACCT # 4383					0.			
TOTAL TO FM 990-PF, PART I, I	Ln 4		2,374.		0.	0. 2,374		
FORM 990-PF	(	OTHER E	XPENSES			STATEMENT	2	
DESCRIPTION	EXP	(A) ENSES BOOKS	NSES NET INVES		(C) ADJUSTED NET INCOM			
STATE FILING REQUIREMENT		61.		0.			0.	
TO FORM 990-PF, PG 1, LN 23		61.		0.		0		
FORM 990-PF	CC	ORPORAT	E STOCK			STATEMENT	3	
DESCRIPTION				вос	OK VALUE	FAIR MARKE VALUE	т	
GS EQUITY GROWTH STRATEGY MUT (GAPIX)	TUAL I	FUND -	INSTL		176,688.	125,8	13.	
TOTAL TO FORM 990-PF, PART II, LINE 10B					176,688.	125,813.		

# Form **8868** (Rev April 2009)

Department of the Treasury Internal Revenue Service

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

File a separate application for each return

OMB No 1545-1709

• If yo	ou are filing for an Automatic 3-Month Extension, complete only Part I and check this box			<b>▶</b> X			
• If yo	ou are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this	form)					
Do no	t complete Part II unless you have already been granted an automatic 3-month extension on a previously f	led Fo	rm 8868.				
Par	Automatic 3-Month Extension of Time. Only submit original (no copies needed)		<del></del>				
A corp	poration required to file Form 990-T and requesting an automatic 6-month extension - check this box and con	nolete					
Part I	· · · · · · · · · · · · · · · · · · ·			•			
	er corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request a Income tax returns.	n exten	sion of time				
noted (not at you m	onic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electron atomatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or column the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic fires gov/efile and click on e-file for Chanties & Nonprofits.	ically if	f (1) you want th ated Form 990-	e additional			
Type o	Name of Exempt Organization	Employer identification number					
print	THE SCOTT FAMILY FOUNDATION, INC.	65-0300419					
File by the clue date for filing your 1877 S. FEDERAL, HTGHWAY NO. 310							
return S instruction							
Check	type of return to be filed (file a separate application for each return)						
	Form 990 Form 990-T (corporation) Form 4	720					
1	Form 990-BL Form 990-T (sec. 401(a) or 408(a) trust) Form 5	227					
1	Form 990-EZ Form 990-T (trust other than above) Form						
X	Form 990-PF Form 1041-A Form 8	870					
Tele ● If th	REBECCA J. SCOTT  a books are in the care of ▶ 1877 S. FEDERAL HIGHWAY #310 - BOCA RATE  apphone No ▶ 561-338-7017 FAX No ▶  the organization does not have an office or place of business in the United States, check this box has is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If the states of the group, check this box and attach a list with the names and EINs of all	is is fo	r the whole gro	▶ up, check this			
!	request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time unitary and the organization of the organization of time unitary and the organization of t	bove					
2 I	f this tax year is for less than 12 months, check reason. Initial return Final return		Change in acco	ounting period			
	f this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any		l	•			
-	nonrefundable credits. See instructions	3a	\$	0.			
	f this application is for Form 990-PF or 990-T, enter any refundable credits and estimated			^			
-	ax payments made, include any prior year overpayment allowed as a credit	3b	\$	0.			
	Balance Due. Subtract line 3b from line 3a Include your payment with this form, or, if required,						
	deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System)			^			
	See instructions	3c		0.			

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

Form 8	868 (Rev. 4-2009)					Page 2	
• If vo	u are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II and ch	eck this box	· .		▶ 🖸	K)	
-	Only complete Part II if you have already been granted an automatic 3-month extension on a prev			868.			
• If yo	u are filing for an Automatic 3-Month Extension, complete only Part I (on page 1).						
Part II Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed).							
Туре	Name of Exempt Organization	= <sub>p</sub>	Employer identification number 65-0300419				
print	THE SCOTT FAMILY FOUNDATION, INC.						
File by the extended due date	Number, street, and room or suite no. If a P.O. box, see instructions.	For IRS use only					
filing the return. So instruction					;		
	type of return to be filed (File a separate application for each return).  Form 990 Form 990-EZ Form 990-T (sec. 401(a) or 408(a) trust) Form 1990-BL Torm 990-PF Form 1990-T (trust other than above) Form 4	= = =	= ' - '	m 5227 m 6069	Form	n 8870	
STOP	Do not complete Part II if you were not already granted an automatic 3-month extension or	n a previous	ly file	form 8	868.		
Tele if the lifth box back back back back back back back back	request an additional 3-month extension of time until NOVEMBER 15, 2010. For calendar year 2009, or other tax year beginning, and this tax year is for less than 12 months, check reason: Initial return Final months in detail why you need the extension ADDITIONAL TIME IS REQUESTED IN ORDER TO FILE A GRETURN.	. If this EINs of all of the ending	s is for membe	the wholes the ex	► [ e group, che	r.  period	
b !	f this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less an nonrefundable credits. See instructions.  If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimate payments made, include any prior year overpayment allowed as a credit and any amount pakes and the state of	nated	8a 8b	_\$		<del></del>	
	previously with Form 8868. Belance Due, Subtract line 8b from line 8a. Include your payment with this form, or, if required, d	lenosit	<u></u>				
	with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See in	_	8c	\$		0.	
	Signature and Verification						
Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am puthprized to prepare this form.							
Signatu	ire > Mile file Title > 900		Date	****	rm <b>8868</b> (Rev	4-2000	
				10	0000 (1161		