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#### Form 990-PF

### **Return of Private Foundation**

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

Department of the Treasury Internal Revenue Service Treated as a Private Foundation

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

2010

OMB No 1545-0052

For calendar year 20	0, or tax year beginning		, and ending		
G Check all that apply	r: Initial return	Initial return of a fo	ormer public charity	Final return	1
	Amended return	Address chan	ge 🔲	Name change	
Name of foundation				A Employer identification	number
THE	SCHECHTER FAMILY	FOUNDATION		04-3339430	)
Number and street (or P	D box number if mail is not delivered to stre	et address)	Room/suite	<b>B</b> Telephone number	
55 F	OBIN ROAD			781-647-98	319
City or town, state, a				C If exemption application is p	
	ON, MA 02493-24			D 1 Foreign organization	s, check here
H Check type of orga	· <u>`</u>	exempt private foundation		Foreign organizations me check here and attach co	omputation Lest,
	)(1) nonexempt charitable trust	Other taxable private found		E If private foundation sta	
	- I	nting method: X Cash	Accrual	under section 507(b)(1	
(from Part II, col	c), line 16)	Other (specify)	hacie l	F If the foundation is in a	
►\$ Part   Analysis o	f Revenue and Expenses			under section 507(b)(1	(d) Disbursements
(The total of	amounts in columns (b), (c), and (d) may not equal the amounts in column (a)	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	for charitable purposes (cash basis only)
1 Contribution	is, gifts, grants, etc., received	99,876.		N/A	
	if the foundation is not required to attach Sch. B				
3 Interest on sa cash investm	vings and temporary ents	4.	4.		STATEMENT 2
4 Dividends a	nd interest from securities	12,215.	12,215.		STATEMENT 3
5a Gross rents					
b Net rental inci	me or (loss)				
6a Net gain or (id	ss) from sale of assets not on line 10	-12,121.			STATEMENT 1
assets on line	6a <u>292,073.</u>		41 205		
7 Capital gain n	et income (from Part IV, line 2)		41,385.		<del></del>
8 Net Short-te	rm capital gain				
9 Income mo	ee returne				
10a and allowance					
c Gross profit	·				
11 Other incon	, ,	198.	198.		STATEMENT 4
1	lines 1 through 11	100,172.	53,802.		
13 Compensatio	n of officers, directors, trustees, etc	0.	0.		0
14 Other empl	oyee salaries and wages				
15 Pension pla	ns, employee benefits				
16a Legal fees					
b Accounting		1,385.	1,385.	DECE	
c Other profe	ssional fees	-			
partition of the state of the s					0 2011
18 Taxes					0 2011
19 Depreciatio	n and depletion			ш	<u> </u>
20 Occupancy 21 Travel, con	erences, and meetings			OGDE	
75	d publications				
22 Other exper		92.	92.		0
<u>_</u>	ting and administrative			***	
ехрепѕеѕ	Add lines 13 through 23	1,477.	1,477.		0
25 Contributio	ns, gifts, grants paid	90,800.			90,800
26 Total expe	ises and disbursements				
Add lines 2	1 and 25	92,277.	1,477.		90,800
27 Subtract lin	e 26 from line 12:				
a Excess of rev	enue over expenses and disbursements	7,895.			
b Net investr	nent income (if negative, enter -0-)		52,325.		
c Adjusted n	et income (if negative, enter -0-)		<u>L.</u> .	N/A	<u>L</u>

023501 12-07-10 LHA For Paperwork Reduction Act Notice, see the instructions

D	art	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End of	-
	ai (	Balance Sneets   column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	11,452.	34,832.	<u>34,832.</u>
	2	Savings and temporary cash investments			
	3	Accounts receivable ►			
		Less: allowance for doubtful accounts ▶			
	4	Pledges receivable ►			
		Less; allowance for doubtful accounts ▶			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons			<del></del>
	7	Other notes and loans receivable			
		Less: allowance for doubtful accounts ▶			
ţ	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
∢	10a	Investments - U.S. and state government obligations			
	b	Investments - corporate stock STMT 7	401,258.	385,773.	448,203.
	C	Investments - corporate bonds			
	11	Investments - land, buildings, and equipment basis			
		Less accumulated depreciation			
	12	Investments - mortgage loans			
	13	Investments - other			
	14	Land, buildings, and equipment; basis			
		Less accumulated depreciation			
	15	Other assets (describe)			
			410 510	400 605	402 025
_	16	Total assets (to be completed by all filers)	412,710.	420,605.	483,035.
	17	Accounts payable and accrued expenses			
	18	Grants payable			
les	19	Deferred revenue			
Ħ	20	Loans from officers, directors, trustees, and other disqualified persons		<del></del>	
Liabilıtıes	21	Mortgages and other notes payable			
	22	Other liabilities (describe >)			
		Total Make I May (add been 47 through 00)	0.	0.	
	23	Total liabilities (add lines 17 through 22)  Foundations that follow SFAS 117, check here	0.		
		, , , , , , , , , , , , , , , , , , , ,			
S		and complete lines 24 through 26 and lines 30 and 31 Unrestricted	412,710.	420,605.	
õ			412,710.	420,005.	
ala	25	Temporarily restricted			
ğ	26	Permanently restricted  Foundations that do not follow SFAS 117, check here			
Ē		and complete lines 27 through 31.			
ō	27	Capital stock, trust principal, or current funds			
ets	28	Paid-in or capital surplus, or land, bldg., and equipment fund			
Ass	29	Retained earnings, accumulated income, endowment, or other funds		<del></del>	
Net Assets or Fund Balance	30	Total net assets or fund balances	412,710.	420,605.	
Z	30	Total list assets of fulla balantes	114/1101		
	31	Total liabilities and net assets/fund balances	412,710.	420,605.	
				,,	
P	art	Analysis of Changes in Net Assets or Fund B	aiances		
1	Tota	I net assets or fund balances at beginning of year - Part II, column (a), line	30		
•		st agree with end-of-year figure reported on prior year's return)		1	412,710.
2	•	r amount from Part I, line 27a		2	7,895.
		er increases not included in line 2 (itemize)		3	0.
		lines 1, 2, and 3	, <del>, , , , , , , , , , , , , , , , , , </del>	4	420,605.
		reases not included in line 2 (itemize)		5	0.
		I net assets or fund balances at end of year (line 4 minus line 5) - Part II, c	olumn (b), line 30	6	420,605.

Part IV Capital Gains a	and Lo	sses for Tax on In	vestment	Income	_				
(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)					low acquire - Purchase - Donation	d (c	) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)	
1a FIDELITY						P			
b FIDELITY		<del></del>		<del></del>	—	P			
c 1,854 SHS FRAN			EC META	ALS ADV	1	D			12/22/10
d CAPITAL GAINS	DIVI	DENDS			-		_		
<u>e</u>					۲.,		l		<del></del>
(e) Gross sales price	(f) I	Depreciation allowed (or allowable)		t or other basis xpense of sale				(h) Gain or (loss (e) plus (f) minus	(g)
a 167,304.				180,40					-13,100.
ь 29,096.				28,10					988.
<u>c</u> 95,247.				42,97	6.				52,271.
d 1,226.									1,226.
e Complete only for assets showin	0 0010 10	column (h) and owned by t	he foundation	on 12/31/60			(1) (	Sounce (Col. (b) gave	n 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. (l	iains (Col. (h) gair k), but not less tha Losses (from col.	an -0-) or
		45 01 12/3 1/03	0461	Coi. (j), ii ariy					-13,100.
a									988.
<u>b</u>									52,271.
d d									1,226.
e									
		∫ If gain, also enter	ın Part I. line		1				
2 Capital gain net income or (net ca		)	ın Part I, line	7	}	2			41,385.
3 Net short-term capital gain or (los If gain, also enter in Part I, line 8,			d (6):		}			<b>37</b> / 3	
If (loss), enter -0- in Part I, line 8  Part V Qualification U	ndor C	Section 4940(e) for	Poducod	Tay on No	t Inv	3 cetmon	lnco	N/A	<u> </u>
If section 4940(d)(2) applies, leave the Was the foundation liable for the section "Yes," the foundation does not qual 1. Enter the appropriate amount in the section of th	tion 4942 ify under	tax on the distributable am section 4940(e). Do not co	mplete this pa	rt					Yes X No
1 Enter the appropriate amount in (a)	each colu		TCHOILS DETOILE	making any enu		\			(d)
Base periód years Calendar year (or tax year beginni	ng in)	(b) Adjusted qualifying dist		Net value of n	(c) oncha	rıtable-use a		(d) Distribution ratio (col. (b) divided by col. (c))	
2009			2,248.			417,			.293046 .191599
2008	_		0,375. 3,388.			576, 518,			.218793
2007	-		9,136.			$\frac{510,}{253,}$			.154222
2006 2005			2,001.			236,			.093026
2 Total of line 1, column (d)	. —	<u> </u>	270020			2007	<del></del>	2	.950686
3 Average distribution ratio for the the foundation has been in existe			on line 2 by 5,	or by the numbe	r of ye	ears		3	.190137
4 Enter the net value of noncharitat	ole-use as	sets for 2010 from Part X,	Ііле 5					4	424,284.
5 Multiply line 4 by line 3								5	80,672.
6 Enter 1% of net investment incor	ne (1% o	f Part I, line 27b)						6	523.
7 Add lines 5 and 6								7	81,195.
8 Enter qualifying distributions from	n Part XII	, line 4						8	90,800.
If line 8 is equal to or greater than See the Part VI instructions.	n line 7, c	heck the box in Part VI, line	1b, and comp	lete that part us	ng a 1	% tax rate			
023521 12-07-10									Form <b>990-PF</b> (2010)

Form	990-PF (2010) THE SCHECHTER FAMILY FOUNDATION 04-3	339430		Page 4
Pa	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - s	ee instru	ıctio	ns)
1a	Exempt operating foundations described in section 4940(d)(2), check here  and enter "N/A" on line 1.			
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here 🕨 🗓 and enter 1%		5	<u> 23.</u>
	of Part I, line 27b			
C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			0.
3	Add lines 1 and 2		5	<u>23.</u>
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		_	0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		5	<u> 23.</u>
6	Credits/Payments:			
a	2010 estimated tax payments and 2009 overpayment credited to 2010 6a 31.			
b	Exempt foreign organizations - tax withheld at source 6b			
C	Tax paid with application for extension of time to file (Form 8868) 6c 1,250.			
d	Backup withholding erroneously withheld 6d			
7	Total credits and payments. Add lines 6a through 6d		1,2	81.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8			4.
9	Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		7	54.
	Enter the amount of line 10 to be; Credited to 2011 estimated tax ▶ 754 . Refunded ▶ 11			0.
Pa	rt VII-A Statements Regarding Activities			
1a	During the tax year, did the foundation attempt to influence any national, 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) for political purposes (see instructions for definition)?	1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or			
	distributed by the foundation in connection with the activities			
C	Did the foundation file Form 1120-POL for this year?	10		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			
	(1) On the foundation. ▶ \$ 0 . (2) On foundation managers. ▶ \$			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation			
	managers. ► \$0.			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		X
	If "Yes," attach a detailed description of the activities			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or			
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3	<u></u>	X
4a	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?	A 4b		<u> </u>
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5	<u> </u>	X
	If "Yes," attach the statement required by General Instruction T			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) 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	
7	Did the foundation have at least \$5,000 in assets at any time during the year?	7	X	<u> </u>
	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)			
	MA			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)			
	of each state as required by General Instruction G? If "No," attach explanation	8b	X	<u> </u>
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 2010 or the taxable year beginning in 2010 (see instructions for Part XIV)? If "Yes," complete Part XIV	9		X_
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses STMT	8 10	X	l
		Form <b>990</b>	-PF	(2010)

had not been removed from jeopardy before the first day of the tax year beginning in 2010?

orm 990-PF (2010) THE SCHECHTER FAMILY FOU			04-33394	30 · Page 6		
Part VII-B   Statements Regarding Activities for Which Form 4720 May Be Required (continued)  5a During the year did the foundation pay or incur any amount to:  (1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?   Yes   X No (2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive?   Yes   X No (3) Provide a grant to an individual for travel, study, or other similar purposes?   Yes   X No (4) Provide a grant to an organization other than a charitable, etc., organization described in section 509(a)(1), (2), or (3), or section 4940(d)(2)?   Yes   X No (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?   Yes   X No (5) If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)?   N/A    Organizations relying on a current notice regarding disaster assistance check here   N/A   Yes   No (ff "Yes," attach the statement required by Regulations section 53.4945-5(d)  6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?   Yes   X No (contract)   Yes   Yes   X No (contract)   Yes   Yes   X No (contract)   Yes   Yes						
<b>b</b> Did the foundation, during the year, pay premiums, directly or indirectly, on a p If "Yes" to 6b, file Form 8870.				6b X		
7a At any time during the tax year, was the foundation a party to a prohibited tax s  b if "Yes," did the foundation receive any proceeds or have any net income attribution.  Information About Officers Directors Trust	table to the transaction?			7b		
Part VIII Information About Officers, Directors, Truston Paid Employees, and Contractors		gers, riigilis				
List all officers, directors, trustees, foundation managers and their		(c) Compensation	(d) Contributions to	(a) Evnense		
(a) Name and address	(b) Title, and average hours per week devoted to position	(If not paid, enter -0-)	(d) Contributions to employee benefit plans and deterred compensation	(e) Expense account, other allowances		
	TRUSTEE					
55 ROBIN ROAD WESTON, MA 02493	1.00	0.	0.	0.		
	TRUSTEE	- 0.	•	<u>.</u>		
55 ROBIN ROAD						
WESTON, MA 02493	1.00	0.	0.	0.		
2 Compensation of five highest-paid employees (other than those inc	luded on line 1). If none,	enter "NONE."				
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances		
NONE						
Total number of other employees paid over \$50,000			<b></b>	0		

Part VIII Information About Officers, Directors, Trustees, For Paid Employees, and Contractors (continued)	oundation ivialitagers, nignly	
3 Five highest-paid independent contractors for professional services. If none	e, enter "NONE."	<del></del>
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
		-
Total number of others receiving over \$50,000 for professional services		<b>&gt;</b> (
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include releva number of organizations and other beneficiaries served, conferences convened, research pap	nt statistical information such as the	Expenses
1 N/A	010 910000000, 010.	
1		
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 lines 1 and 2.	Amount
1 <u>N/A</u>		
2		
All other program-related investments. See instructions.		
3		

Total. Add lines 1 through 3

P	Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	ndations, s	ee instructions )
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
-	Average monthly fair market value of securities	1a	413,978.
b	Average of monthly cash balances	1b	16,767.
	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	430,745.
-	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	430,745.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	6,461.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	424,284.
6	Minimum investment return Enter 5% of line 5	6	21,214.
Р	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 certain	
1	Minimum investment return from Part X, line 6	1	21,214.
2a	Tax on investment income for 2010 from Part VI, line 5	]	
b	Income tax for 2010. (This does not include the tax from Part VI.)	] [	
C	Add lines 2a and 2b	2c	523.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	20,691.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	20,691.
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	20,691.
P	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	90,800.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	<del></del>
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	90,800.
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	523.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	90,277.
	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

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4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2009	(c) 2009	( <b>d</b> ) 2010
1 Distributable amount for 2010 from Part XI,	Обіраз	rears prior to 2003	2003	2010
line 7			!	20,691.
2 Undistributed income, if any, as of the end of 2010				
a Enter amount for 2009 only			0.	
<b>b</b> Total for prior years:				
		0.		
3 Excess distributions carryover, if any, to 2010:				
a From 2005 10,488.				
b From 2006 27, 390.				
c From 2007 87,629.				
d From 2008 110, 375.				
e From 2009 122, 248.	250 120			
f Total of lines 3a through e	358,130.			
4 Qualifying distributions for 2010 from				
Part XII, line 4: ► \$ 90,800.			0	
a Applied to 2009, but not more than line 2a			0.	
<b>b</b> Applied to undistributed income of prior		0		
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus	00 000			
(Liection required - See mondetions)	90,800.			0.
d Applied to 2010 distributable amount	0			<u> </u>
e Remaining amount distributed out of corpus	0. 20,691.			20,691.
5 Excess distributions carryover applied to 2010 (If an amount appears in column (d), the same amount must be shown in column (a))	20,691.			20,691.
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	428,239.			
<b>b</b> Prior years' undistributed income. Subtract	120,237.			
line 4b from line 2b		0.		
c Enter the amount of prior years'				
undistributed income for which a notice of				
deficiency has been issued, or on which				
the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2009. Subtract line				
4a from line 2a. Taxable amount - see instr			0.	
f Undistributed income for 2010. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2011				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 2005				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2011.	400 000			
Subtract lines 7 and 8 from line 6a	428,239.			
10 Analysis of line 9:				
a Excess from 2006 17,187.				
b Excess from 2007 c Excess from 2008 87,629.				
c Excess from 2008 110,375. d Excess from 2009 122,248.				
e Excess from 2010 90,800.				
E LACESS II UIII 20 IU	** SEE STATE	MENT Q	I	Form <b>990-PF</b> (2010)

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Part XV Supplementary Informa	ition (continued)	-							
3 Grants and Contributions Paid During the Year or Approved for Future Payment									
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount					
Name and address (home or business)	or substantial contributor	recipient	Contribution	,,,,,,					
a Paid during the year									
SEE STATEMENT 11									
Total	I		▶ 3a	90,800.					
b Approved for future payment									
NONE									
110212									
Total			<b>▶</b> 3b	0.					
023611 12-07-10			F	orm <b>990-PF</b> (2010)					

Enter gross amounts unless otherwise indicated.	Unrelated I	ousiness income		y section 512, 513, or 514	(e)	
·	(a) Business	(b) Amount	(c) Exclu- sion	(d) Amount	Related or exempt function income	
1 Program service revenue;	code	Amount	code	Amount	Tunction income	
a	_		1			
b		-				
c		<del></del>				
d	-					
e		<del></del>				
Topo and contracts from accomment accomme					·	
<ul><li>g Fees and contracts from government agencies</li><li>2 Membership dues and assessments</li></ul>						
3 Interest on savings and temporary cash		·				
investments			14	4.		
4 Dividends and interest from securities			14	12,215.		
5 Net rental income or (loss) from real estate:		<del></del>	1.4	12,213.		
a Debt-financed property	-	-				
b Not debt-financed property						
6 Net rental income or (loss) from personal				<del>-</del>		
property						
7 Other investment income			14	198.		
8 Gain or (loss) from sales of assets other						
than inventory	j		18	-12,121.		
9 Net income or (loss) from special events						
10 Gross profit or (loss) from sales of inventory						
11 Other revenue:					· · ·	
a						
b						
C	1 1					
d						
e						
12 Subtotal. Add columns (b), (d), and (e)		(	0.	296.		
13 Total Add line 12, columns (b), (d), and (e)				13	296	
(See worksheet in line 13 instructions to verify calculations.	.)					

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

023621 12-07-10	Form <b>990-PF</b> (	(2010)						
	the foundation's exempt purposes (other than by provious funds for such purposes).							
Line No.	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes).							

# Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

		Exempt Organi								T 1	NI -
<b>1</b> Did 1	the org	janization directly or indir	ectly engage in any o	f the followin	g with any other organizat	ition de	escribed in sect	ion 501(c) of		Yes	No
the (	Code (	other than section 501(c)	(3) organizations) or	ın section 52	7, relating to political orga	anızatı	ons?				
<b>a</b> Tran	isfers f	from the reporting founda	ition to a noncharitab	le exempt orç	ganızatıon of:						
	Cash								1a(1)		<u>X</u>
		assets							1a(2)		_X_
		sactions,							1	i	
		of assets to a noncharitat							1b(1)		_ <u>X</u> _
٠,		ases of assets from a nor	•	ganization					1b(2)		X
٠,		l of facilities, equipment, o	or other assets						1b(3)		X
		oursement arrangements							1b(4)		<u>X</u>
(5)	Loans	or loan guarantees							1b(5)		X
		mance of services or me	•	•					1b(6)		X
		facilities, equipment, mai							1c	ll	X
		-	•	-	dule. Column (b) should a					ets,	
					ed less than fair market va	alue in	any transaction	n or sharing arrange	ment, show in		
		) the value of the goods, (					4.00				
(a) Line no		(b) Amount involved	(c) Name of		e exempt organization		(d) Description	n of transfers, transaction	ons, and sharing ar	rangeme	nts
	_			N/A							
					_ <del></del> .						
								<del></del>			
	<u> </u>										
							<del></del>				
2a Is th	ne four	idation directly or indirect	tly affiliated with, or re	elated to, one	or more tax-exempt orga	anızatıo	ons described				_
ın s	ection	501(c) of the Code (other	r than section 501(c)	(3)) or in sect	tion 527 <b>?</b>				Yes	X	No
<b>b</b> If "Y	es," co	implete the following sche	edule.		· · · · · · · · · · · · · · · · · · ·						
		(a) Name of org	anızatıon		(b) Type of organization	n		(c) Description of r	elationship		
		N/A									
								<u> </u>			
						_			,		
			<u> </u>								
					ing accompanying schedules a ased on all information of whice				e and belief, it is tr	ue, corre	ct,
Sign	and	/V. A 6/1/		inducially) is b	asco on all important of the	Thepe	arca nao any kitow	icage			
Here		fan avoi	~~ <u>~</u>		77131	1201		RUSTEE			
		Signature of officer or tru	ıstee		Date l			Title			
		Print/Type preparer's na	ame	Preparer's s	ignature	Dat	te	Check if	PTIN		
		RICUAL A	. K. a.s.	11		1111	N 2 8 2011	self- employed	80126	Ø1 ~	
Paid		MENDEN H	· vota	1		וטע	1 L U ZUII		10126	065	
Prepa		Firm's name ► FRI	EDMAN LLP					Firm's EIN ▶			
Use C	nly				. 10			13-11	908010		
					ENUE STE 20	0			-		
		EA	ST HANOVE	R, NJ	07936			Phone no (		9-3	
									Form <b>990</b>	)-PF (	2010)

023622 04-26-11

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

Department of the Treasury Internal Revenue Service Schedule of Contributors

➤ Attach to Form 990, 990-EZ, or 990-PF.

OMB No 1545-004

**2010** 

Name of the organization **Employer identification number** THE SCHECHTER FAMILY FOUNDATION 04-3339430 Organization type (check one) Filers of Section: 501(c)( Form 990 or 990-EZ ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization X 501(c)(3) exempt private foundation Form 990-PF 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions **General Rule** X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II **Special Rules** For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1 Complete Parts I and II 🔟 For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000 If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF),

but it must answer "No" on Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ, or on line 2 of its Form 990-PF, to certify

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) (2010)

that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Name of organization	

Employer identification number

## THE SCHECHTER FAMILY FOUNDATION

04-3339430

Part I	Contributors (see instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	ROBERT AND SUSAN P. SCHECHTER  55 ROBIN ROAD  WESTON, MA 02493	\$\$,876.	Person Payroll Noncash X (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		 \$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
022452 12 /		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)

Name of organization

Employer identification number

## THE SCHECHTER FAMILY FOUNDATION

04-3339430

Part II	Noncash Property (see instructions)
(a)	
Na	0.3

(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	1,900 SHS FRANKLIN GOLD AND PREC METALS (FGADX)		
		\$\$8	12/21/10
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		  \$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		s	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
023453 12-2	1 <del></del>		990, 990-EZ, or 990-PF) (2010)

Schedule B (Form 990, 990-EZ, or 990-PF) (2010) of Part III Name of organization Employer identification number THE SCHECHTER FAMILY FOUNDATION 04-3339430 Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations aggregating more than \$1,000 for the year. Complete columns (a) through (e) and the following line entry For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year (Enter this information once See instructions) > \$ (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

FORM 990	)-PF . G.	AIN OR (LOSS) F	ROM SALE	OF A	ASSETS		STA	TEMENT	1
DESCRIPT	(A) TION OF PROPERTY				IANNER CQUIRED	DA ACQU		DATE S	OLI
FIDELITY	7			PUR	RCHASED	_			<u> </u>
	(B) GROSS SALES PRICE	(C) COST OR OTHER BASIS	(D) EXPENSE SALE	OF	(E) DEPREC	! <b>.</b>		(F) OR LOS	s
<del>-</del>	167,304.	180,404.		0.		0.		-13,1	00.
DESCRIPT	(A) TION OF PROPERTY				IANNER CQUIRED	DA ACQU		DATE S	OLI
FIDELITY	Z .	_		PUR	RCHASED				
	(B) GROSS SALES PRICE	(C) COST OR OTHER BASIS	(D) EXPENSE SALE	OF	(E) DEPREC	:.	GAIN	(F) OR LOS	S
_	29,096.	28,108.		0.		0.	<u>-</u>	9	88.
DESCRIPT	(A) TION OF PROPERTY				ANNER CQUIRED	DA ACQU		DATE S	OLI
1,854 SH	IS FRANKLIN GOLD	- AND PREC METAL	S ADV	DC	NATED			12/22	/10
	(B) GROSS	(C) VALUE AT	(D) EXPENSE	OF	(E)			(F)	
	SALES PRICE	TIME OF ACQ.	SALE		DEPREC	:.	GAIN	OR LOS	S
<u>-</u>	95,247.	96,482.		0.		0.		-1,2	35.
CAPITAL	GAINS DIVIDENDS	FROM PART IV						1,2	26.
יייי זג ייי	O FORM 990-PF, P.	ART I. LINE 6A				•		-12,1	21.

FORM 990-PF INTEREST ON SAVINGS AN	D TEM	PORARY CA	ASH :	INVESTMENTS	STATEMENT	2
SOURCE					AMOUNT	
FIDELITY				-		4.
TOTAL TO FORM 990-PF, PART I, LINE	3, CO	LUMN A		=		4.
FORM 990-PF DIVIDENDS AND	INTER	EST FROM	SEC	JRITIES	STATEMENT	3
SOURCE	GROSS	AMOUNT		PITAL GAINS DIVIDENDS	COLUMN (A AMOUNT	)
FIDELITY		13,441.		1,226.	12,2	15.
TOTAL TO FM 990-PF, PART I, LN 4		13,441.		1,226.	12,2	15.
FORM 990-PF OT	THER I	NCOME			STATEMENT	4
DESCRIPTION		(A) REVENUE PER BOOKS		(B) NET INVEST- MENT INCOME		
OTHER INCOME		:	198.	198	•	
TOTAL TO FORM 990-PF, PART I, LINE	11	:	198.	198	•	
FORM 990-PF ACC	COUNTI	NG FEES			STATEMENT	5
CAN EXPENDESCRIPTION PER E		(B) NET INVI MENT IN		(C) ADJUSTED NET INCOM		
ACCOUNTING FEES 1	1,385.	1	, 385	•		0.
TO FORM 990-PF, PG 1, LN 16B 1	L,385.	1	,385			0.

FORM 990-PF	OTHER E	XPENSES		STATEMENT	6
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME			
COMMONWEALTH OF MA - FILING FEE MISCELLANEOUS EXPENSES	35. 57.				0.
TO FORM 990-PF, PG 1, LN 23	92.	92.			0.
FORM 990-PF	CORPORAT	E STOCK		STATEMENT	7
DESCRIPTION		ВО	OK VALUE	FAIR MARKET VALUE	
INVESTMENTS			385,773.	448,20	3.
TOTAL TO FORM 990-PF, PART II	, LINE 10B		385,773.	448,20	3. —
	SUBSTANTIA PART VII-A,	L CONTRIBUTORS	5	STATEMENT	8
NAME OF CONTRIBUTOR	ADDR	ESS			
ROBERT AND SUSAN SCHECHTER		OBIN RD ON, MA 02493			

FORM 990-PF

ELECTION UNDER REGULATIONS SECTION 53.4942(A)-3(D)(2) TO TREAT EXCESS QUALIFYING DISTRIBUTIONS AS DISTRIBUTIONS OUT OF CORPUS

STATEMENT

Ģ

ELECTION UNDER IRC REG.SEC.53-4942(A)-3(D)(2)

THE SCHECHTER FAMILY FOUNDATION HEREBY ELECTS TO TREAT THE CURRENT YEAR'S QUALIFYING DISTRIBUTIONS IN EXCESS OF THE IMMEDIATLEY PRECEDING YEAR'S UNDISTRIBUTED INCOME A MADE AS OF CORPUS.

SIGNED:

TRUSTEE

FORM 990-PF . STATEMENT 10 PART XV - LINE 1A LIST OF FOUNDATION MANAGERS

#### NAME OF MANAGER

ROBERT P. SCHECHTER SUSAN P. SCHECHTER

	AND CONTRIBUTIONS DURING THE YEAR	STAT	EMENT 11
RECIPIENT NAME AND ADDRESS	RECIPIENT RELATIONSHIP AND PURPOSE OF GRANT		AMOUNT
UNITING AGAINST LUNG CANCER 27 UNION SQUARE WEST, SUITE #304 NEW YORK, NY 10003		PUBLIC	600.
HEBREW COLLEGE 160 HERRICK ROAD NEWTON CENTRE, MA 02459		PUBLIC	500.
MASS COLLEGE OF ART 621 HUNTINGTON AVENUE BOSTON, MA 02115		PUBLIC	26,000.
THE LEONARD P. ZAKIM CENTER FUND 33 ARCH STREET, 26TH FLOOR BOSTON, MA 02110	NONE NON-RESTRICTED	PUBLIC	250.
BOSTON CHILDREN'S MUSEUM 308 CONGRESS STREET BOSTON, MA 02210		PUBLIC	1,000.
PAN-MASS CHALLENGE 77 FOURTH AVENUE NEEDHAM, MA 02494	NONE NON-RESTRICTED	PUBLIC	1,500.

 THE SCHECHTER FAMILY FOUNDATION			04-3339430
	NONE NON-RESTRICTED	PUBLIC	1,000.
	NONE NON-RESTRICTED	PUBLIC	2,500.
GREATER BOSTON FOODBANK 70 SOUTH BAY AVENUE BOSTON, MA 02118		PUBLIC	1,000.
	NONE NON-RESTRICTED	PUBLIC	5,000.
TEMPLE BETH ELOHIM 10 BETHEL ROAD WELLSLEY , MA 02481	NONE NON-RESTRICTED	PUBLIC	37,000.
COMBINED JEWISH PHILANTHROPIES, GREATER BOSTON'S JEWISH FEDERATION - 126 HIGH STREET BOSTON, MA 02110	NONE NON-RESTRICTED	PUBLIC	7,000.
RENSSELAER POLYTECHNIC INSTITUTE 110 8TH ST. TROY, NY 12180	NONE NON-RESTRICTED	PUBLIC	1,000.
VILNA SHUL 18 PHILLIPS STREET BOSTON, MA 02114	NONE NON-RESTRICTED	PUBLIC	1,000.
BREWSTER MEETING HOUSE 1969 MAIN ST. BREWSTER, MA 02631	NONE NON-RESTRICTED	PUBLIC	2,500.
WBUR 890 COMMONWEALTH AVE.,3RD FL BOSTON, MA 02215	NONE NON-RESTRICTED	PUBLIC	1,200.

THE SCHECHTER FAMILY FOUNDATION			04-3339430
MAKE-A-WISH FOUNDATION 4742 N. 24TH ST., SUITE 400 PHOENIX, AZ 85016	NONE NON-RESTRICTED	PUBLIC	1,500.
CHILDREN'S HOSPITAL BOSTON 300 LONGWOOD AVENUE BOSTON, MA 02115	NONE NON-RESTRICTED	PUBLIC	250.
TOTAL TO FORM 990-PF, PART XV, LII	NE 3A	_	90,800.

#### Form **8868**

(Rev January 2011)

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 you a	re filing for an Automatic 3-Month Extension, complet	te only Pa	art I and check this box			•	- X
If you a	re filing for an Additional (Not Automatic) 3-Month Ex	tension, c	complete only Part II (on page 2 of this	form)			
Do not co	mplete Part II unless you have already been granted a	n automa	itic 3-month extension on a previously fi	led Fo	m 8868	3	
Electronic	c filing (e-file). You can electronically file Form 8868 if y	ou need a	a 3-month automatic extension of time to	o file (6	month	s for a corp	oration
equired to	o file Form 990-T), or an additional (not automatic) 3-mor	nth extens	sion of time. You can electronically file F	orm 88	368 to re	equest an e	extension
of time to	file any of the forms listed in Part I or Part II with the exc	ception of	Form 8870, Information Return for Tran	sfers /	Associat	ted With Ce	ertain
	Benefit Contracts, which must be sent to the IRS in pap	•	,				
	irs gov/efile and click on e-file for Charities & Nonprofits		(coo men de none) y ev meve de lame en a			9 00	,
Part I	Automatic 3-Month Extension of Time		ibmit original (no copies needed)				
	tion required to file Form 990-T and requesting an auton			nlete			
Part I only			one of the control of				
All other c	orporations (including 1120-C filers), partnerships, REM me tax returns	ICs, and t	rusts must use Form 7004 to request an	exten	sion of	time	
Гуре or	Name of exempt organization			Emp	loyer id	entification	n number
orint	THE SCHECHTER FAMILY FOUNDA	ΑͲΤΟΝ		0	4-33	39430	
File by the	Number, street, and room or suite no. If a P O box, so	***************************************	tions	, ,		JJ 430	<del></del>
due date for iling your	55 ROBIN ROAD	cc mondo	tions.				
eturn See nstructions	City, town or post office, state, and ZIP code For a fo	reign add	Iress see instructions				<del></del>
	WESTON, MA 02493-2436	neigii add	mess, see mstructions				
	MEDION, MI 02493 2430						
Enter the I	Return code for the return that this application is for (file	a sanara	te application for each return)				0 4
Lintor tino i	Totally code for the retails that this application to for the	a oopara	as application for each retain,				0 2
Application	· · · · · · · · · · · · · · · · · · ·	Return	Application				Return
is For	ni	Code	Is For				Code
Form 990		01	Form 990-T (corporation)				07
Form 990-	PI	02	Form 1041-A				08
Form 990-		03	Form 4720				09
Form 990-		04	Form 5227				10
	T (sec 401(a) or 408(a) trust)	05	Form 6069				11
-orm 990-	T (trust other than above)  ROBERT & SUSAN	06	Form 8870	_			12
• The be	oks are in the care of <b>55 ROBIN ROAD</b>						
		- MES					
	one No ► 781-647-9819	41 1 1	FAX No				
	rganization does not have an office or place of business						·
. г	s for a Group Return, enter the organization's four digit	1					
00x ▶ L	If it is for part of the group, check this box				ers tne	extension is	s for
	quest an automatic 3-month (6 months for a corporation						
		t organiza	tion return for the organization named a	ibove	ine ext	ension	
	r the organization's return for						
<b>▶</b> L	X calendar year 2010 or						
►L	tax year beginning	, an	id ending		_		
2 If th	e tax year entered in line 1 is for less than 12 months, c  Change in accounting period	heck reas	on Initial return Fina	al retur	n		
20 1544	is application in for Form 000 BL 000 BE 000 T 4700	or 6060 -	enter the tentative tay less and	Ι			
	is application is for Form 990-BL, 990-PF, 990-T, 4720, i	ur ouby, e	mer the tentative tax, less any		_		1 201
	refundable credits. See instructions		vef indeble are discord	3a	\$		1,281.
	is application is for Form 990-PF, 990-T, 4720, or 6069,	•					21
	mated tax payments made Include any prior year overp			3b	\$		31.
	ance due. Subtract line 3b from line 3a Include your pa	•	•				1 050
	ising EFTPS (Electronic Federal Tax Payment System)			3c	\$		<u>1,250.</u>
	f you are going to make an electronic fund withdrawal v		orm 8868, see Form 8453-EO and Form	8879-	EO for p	ayment ins	tructions
LHA F	or Paperwork Reduction Act Notice, see Instructions	<b>.</b>			Fo	orm <b>8868</b> (F	Rev 1-2011)

023841 01-03-11