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Return of Private Foundation

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

OMB No 1545-0052 2010

		ent of the Treasury Revenue Service	Note. The fo	undation ma	reated as a Priva y be able to use a copy of th			ortına requirements.	2010
_		endar year 2010, or			,	, and end			
		ck all that apply:	Initial retui		Initial return of a	former public ch	arity	Final return	
			Amended	return	X Address cha			Name change	
Na	me	of foundation						A Employer identification	number
			WRENCE H.	HYDE	JR. CHARITAI	BLE			
<u> </u>		TRUST						13-7024608	
Nu	mber	and street (or P O. box i			et address)	1.	Room/suite	B Telephone number	
Ŀ			WOOD DRI	VE		1	51	781-329-02	
Cit	y or	town, state, and ZIP						C if exemption application is p	
<u></u>	<u> </u>	WESTWOO		2090				D 1. Foreign organizations	
<u>"-</u> "	_	k type of organizatio		· · · · · · · · · · · · · · · · · · ·	exempt private foundation			Foreign organizations me check here and attach co	mputation
		ection 4947(a)(1) no		T	Other taxable private found		J	E if private foundation stat	
		narket value of all ass	•		ting method: X Cash	Accrua	1.9	under section 507(b)(1)	
	rom ►\$	Part II, col. (c), line	9 10) 721 710	(Part I col	Other (specify) Lumn (d) must be on cash	hacie)		F If the foundation is in a 6	
_		Analysis of Reve	nue and Expenses	11 41 1, 001				under section 507(b)(1)	
	<u>ai, t</u>	Analysis of Reve (The total of amounts necessarily equal the	s in columns (b), (c), ar	nd (d) may not	(a) Revenue and expenses per books	(b) Net inve		(c) Adjusted net income	(d) Disbursements for charitable purposes
	1	Contributions, gifts			96,830.		25 E. T. T.	N/A	(cash basis only)
	2		s, grants, etc., rece foundation is not required t	-	70,030				
	3	Interest on savings an cash investments			ment or restablished to the contract of the co	to a first of the second of the	a to i meit e "	. con-4-14-0, 2, easing-quest \$2, e.g., m.2* 2, *, 22,	Professional Action
	4	Dividends and inte			34,410.	34	,410.		STATEMENT 1
	1 -	a Gross rents			51/110	31	, 1100		
	Ι.	Net rental income or (le	oss)		1	PARTE STORY	##. \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$		
	١ ـ	Net gain or (loss) from		line 10	39,521.	1717 4 17 18			
ng	ı	Gross sales price for a assets on line 6a	101	,351.		WALL FROM	7 47486		
Revenue	7	Capital gain net incom			STATISTICAL	39	,521.	RECE	VED
Œ	8	Net short-term cap	ital gaın				iovak:		19 S
	9	Income modificatio						L IIIN 9	John O
	10a	Gross sales less return and allowances	ns .			\$19.54\\$65.17			160
	t	Less. Cost of goods so	old			MATERIA -		(1) 87 (A) (A) (B) (B) (B) (B) (B) (B) (B) (B) (B) (B	TO THE SECOND
	c	Gross profit or (los	s) .			3 8 P. T. N	zek v 🗟	OGDE	NUTUR SERVICE
	11	Other income							
	12	Total. Add lines 1 t	through 11		170,761.	73	,931.		
o	13	Compensation of office		, etc	0.	ļ	0.		0.
)	14	Other employee sal	-	•					
ρ	15	Pension plans, emp	oloyee benefits						
nse		Legal fees			4 24=		0.45		· · · · · · · · · · · · · · · · · · ·
Expenses		Accounting fees	S,T:	W.T. S	1,845.	1	,845.		0.
		Other professional t	rees						
		Interest		мт 2	1 421	1	121		
St	18		ST	MT .3	1,431.	<u></u>	,431.		0.
Ë	19 20	Depreciation and de		••• •					amapusan kabingsa 1698, al
וס		Occupancy Travel, conferences	and meetings						
and		Printing and publica							
				 МТ 4	35.		35.		0.
.⊨ ા		Total operating and		** *	33.		2,00		
je j	_7	expenses. Add lines			3,311.	3	,311.	}	0.
Ö	25	Contributions, gifts,	-	•••••	205,800.	Y213-131-#1	and the		205,800.
		Total expenses and			200,000	, y=445: \\	· · · · · · · · · · · · · · · · · · ·	MINGE STATE AND ASSESSED.	403,000.
		Add lines 24 and 25			209,111.	3	. 311.		205,800.
	27	Subtract line 26 from		· · · ·		Francis		(15 at 20	Constitution of the second
		Excess of revenue over		sements	-38,350.				
1		Net investment inco	•	=	THE STATE OF THE S	70	620.		
		Adjusted net incom					\$4K33	N/A	SPARAS AND MEDI
2350									

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

1000		
1 Total net assets or fund balances at beginning of year - Part II, column (a), line 30		
(must agree with end-of-year figure reported on prior year's return)	1	1,352,892.
2 Enter amount from Part I, line 27a	2	-38,350.
3 Other increases not included in line 2 (itemize)	3	0.
4 Add lines 1, 2, and 3	4	1,314,542.
5 Decreases not included in line 2 (itemize)	5	0.
6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	1,314,542.

.078586 .074001 130632 <u>.42</u>7174 <u>.</u>085435 Enter the net value of noncharitable-use assets for 2010 from Part X, line 5 <u>2,538,866.</u> Multiply line 4 by line 3 5 <u>216</u>,908. 6 Enter 1% of net investment income (1% of Part I, line 27b) 6 706. 7 Add lines 5 and 6 7 217,614. 8 8 Enter qualifying distributions from Part XII, line 4 205,800. If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions.

023521 12-07-10

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,

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that

Form 4720, to determine if the foundation had excess business holdings in 2010.)

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

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

THE LAWRENCE H. HYDE JR. CHARITABLE TRUST 13-7024608 Form 990-PF (2010) 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: Yes X 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, Yes X No any voter registration drive? (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 described in section Yes X No 509(a)(1), (2), or (3), or section 4940(d)(2)? (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)? 5b Organizations relying on a current notice regarding disaster assistance check here c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? If "Yes," attach the statement required by Regulations section 53.4945-5(d). 6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on **b** Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 6b If "Yes" to 6b, file Form 8870. Yes X No 7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? Information About Officers, Directors, Trustees, Foundation Managers, Highly Part VIII Paid Employees, and Contractors List all officers, directors, trustees, foundation managers and their compensation. (d) Contributions to employee benefit plans and deferred compensation (b) Title, and average hours per week devoted to position (c) Compensation (e) Expense account, other allowances (If not paid, enter -0-) (a) Name and address LAWRENCE H. HYDE, JR. PRESIDENT 10 LONGWOOD DRIVE, APT. #151 WESTWOOD, MA 02090 0.00 0. 0. 0. 2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE." (d) Contributions to employee benefit plans and deferred (e) Expense account, other (b) Title, and average (a) Name and address of each employee paid more than \$50,000 hours per week devoted to position (c) Compensation allowances NONE

Form **990-PF** (2010)

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

Part VIII Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)		, , , , , , , , , , , , , , , , , , , ,
3 Five highest-paid independent contractors for professional services. If none, ente	r "NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services		> (
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statis number of organizations and other beneficiaries served, conferences convened, research papers produced to the conference of the conferenc	tical information such as the duced, etc.	Expenses
1 <u>N/A</u>		
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		0.

Ţ	Minimum Investment Return (All domestic foundations must complete this part. Foreign for	indations,	see instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:	医	
а	Average monthly fair market value of securities	1a	2,087,675.
b	Average of monthly cash balances	1b	75,349.
C	Fair market value of all other assets	1c	414,505.
d	Total (add lines 1a, b, and c)	1d	2,577,529.
е	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	2,577,529.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	38,663.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	2,538,866.
6_	Minimum investment return. Enter 5% of line 5	6	126,943.
, P	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	126,943.
2a	Tax on investment income for 2010 from Part VI, line 5 2a 1,412.		
b	Income tax for 2010. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	1,412.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	125,531.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	125,531.
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	125,531.
P	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		<u> </u>
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	205,800.
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:	Marie de la constante de la co	· · · · · · · · · · · · · · · · · · ·
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	205,800.
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	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	205,800.
	Note. The amount on line 6 will be used in Part V. column (b), in subsequent years when calculating whether the foundation of	malifies for	the section

4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2009	(c) 2009	(d) 2010
1 Distributable amount for 2010 from Part X				-
line 7				125,531
2 Undistributed income, if any, as of the end of 2010				
a Enter amount for 2009 only			0.	
b Total for prior years:		0.		
3 Excess distributions carryover, if any, to 20	010:			THE COMPANY OF
a From 2005 283,84	10.			
b From 2006 93, 30				
c From 2007 130, 22				
d From 2008				
e From 2009 104,37	78. 温泉 美国			
f Total of lines 3a through e	611,752.			
4 Qualifying distributions for 2010 from				Magazia and and
Part XII, line 4: ► \$ 205, 80				
a Applied to 2009, but not more than line 2a	· · · · · · · · · · · · · · · · · · ·		0.	
b Applied to undistributed income of prior		and the second s		
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				Hoge season was an an a
(Election required - see instructions)	0.			
d Applied to 2010 distributable amount	MANAGEMENT ACT	Andrew Commence of the Angelow		125,531.
e Remaining amount distributed out of corpu	80,269.			
5 Excess distributions carryover applied to 2010	0.		neta : Handa e ses	0 .
(If an amount appears in column (d), the same amount to shown in column (a))	unt the second second		NAME OF THE PERSON OF THE PERS	525a - 42715 - 44
6 Enter the net total of each column as indicated below:				
2 Corpus Add lines 3f, 4c, and 4e Subtract line 5	692,021.			
b Prior years' undistributed income. Subtract	Manhadel alice, up took abliffered adde a con a side	3000		
line 4b from line 2b		0.		
c Enter the amount of prior years'				HAPARA TANANG SA
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		1		
amount - see instructions		0.		
e Undistributed income for 2009. Subtract line	e Karana ana ana			Light and the second
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2010. Subtract				
lines 4d and 5 from line 1. This amount mus	st de la			
be distributed in 2011				0.
Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)	0.			
Excess distributions carryover from 2005	×			
not applied on line 5 or line 7	283,840.			
Excess distributions carryover to 2011.	Ã			
Subtract lines 7 and 8 from line 6a	408,181.			ger ellerere
Analysis of line 9:				
a Excess from 2006 93,306	6.			
· · · · · · · · · · · · · · · · · · ·				
b Excess from 2007 130, 228			A STREET, TO SEE STREET, STREE	SELECTION CONTROL OF THE PARTY
b Excess from 2007 130, 228				
b Excess from 2007 c Excess from 2008	8.			

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023601 12-07-10

Form 990-PF (2010) TRUST Part XV: Supplementary Information			13-702	4608 Page 1
3 Grants and Contributions Paid During the Y		Dormont		<u> </u>
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
	or substantial contributor	recipient		
a Paid during the year	or substantial contributor	recipient		
SEE STATEMENT 7				
Total			▶ 3a	205,800.
b Approved for future payment NONE				
Total			▶ 3b	0.
23811 12-07-10				m 000- DE (0010)

Part XVI A **Analysis of Income-Producing Activities**

Enter gross amounts unless otherwise indicated.	Unrelate	d business income		ded by section 512, 513, or 514	(e)
	(a) Business	(b)	Exclu-	(d)	Related or exempt
1 Program service revenue:	code	Amount	code	Amount	function income
a					
b					
C				 	
d					
ef					
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			14	34,410.	
5 Net rental income or (loss) from real estate:	A THE REAL PROPERTY.				
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal					
property					
7 Other investment income					
8 Gain or (loss) from sales of assets other	l į				
than inventory			18	39,521.	
9 Net income or (loss) from special events					···
O Gross profit or (loss) from sales of inventory					
1 Other revenue:					
a					
b					
C					 _
d					
e	,2000000000000000000000000000000000000		#2488387g		
	4500). 739		
			-		73,931.
See worksheet in line 13 instructions to verify calculations.)	··· ···				
Part XVI-B Relationship of Activities to	the Acco	mplishment of	Exempt	Purposes	
Line No. Explain below how each activity for which incom	 	1 () (0, 1)		A. d	- behavior 1 d

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).
	NOT APPLICABLE
· ·	

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Form 990-PF (2010) TRUST	egarding Transfers	TDE JR. CHARITAI		- 7024608 oncharitable	Page 1
	rectly engage in any of the following pundation. If the following output on rections are seen as seen, or pair year, complete the following pundation.	on 527, relating to political organia pt organization of:	zations?		X
column (d) the value of the goods, (a) Line no. (b) Amount involved		itable exempt organization	(d) Description of transfers, transact	ions, and sharing arranger	ments
	N/				
2a Is the foundation directly or indirectly in section 501(c) of the Code (other b If "Yes," complete the following sche (a) Name of organization (b) N/A	than section 501(c)(3)) or in dule.	* =	tions described(c) Description of r		K No
Under penalties of persury, I declare	that I have examined this return. in	icluding accompanying schedules and s	statements, and to the best of my knowledg	e and belief, it is true, corr	ect.

		· · · · · · · · · · · · · · · · · · ·
	Signature of officer or trustee Date Date Date	Title
Paid	Print/Type preparer's name MICHAEL A LOCRICCHIO, CPA Preparer's signature Date	Check ff PTIN self- employed
Preparei Use Only	· · · · · · · · · · · · · · · · · · ·	Fırm's EIN ▶
	Firm's address ► 1800 W. BIG BEAVER - STE. 100	240,000,0010
	TROY, MI 48084	Phone no. 248-822-9010

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 1545-0047

Name of the organization

THE LAWRENCE H. HYDE JR. CHARITABLE

Employer identification number

TRUST 13-7024608

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				
	i	4947(a)(1) nonexempt charitable trust treated as a private foundation				
	ĺ	501(c)(3) taxable private foundation				
		covered by the General Rule or a Special Rule. (), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.				
		7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.				
General Rule	•					
	an organization f inbutor. Complet	filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one te Parts I and II.				
Special Rule:	s					
509(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.					
aggre	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.					
contr If this purpo	ributions for use s box is checked ose. Do not com	7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, exclusively for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. In the did not aggregate to more than \$1,000. In the part that were received during the year for an exclusively religious, charitable, etc., implete any of the parts unless the General Rule applies to this organization because it received nonexclusively etc., contributions of \$5,000 or more during the year.				

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

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)

Schedule B (F	Form 990, 890-EZ, or 990-PF) (2010)		Page 1 of 1 of Part I
Name of or		Em	ployer identification number
TRUST	AWRENCE H. HYDE JR. CHARITABLE		13-7024608
Part I			
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Aggregate contributions	Type of contribution
1	LAWRENCE H. HYDE, JR.		Person
	10 LONGWOOD DRIVE, APT. #151	\$ <u>96,830</u>	Noncash X (Complete Part II if there
	WESTWOOD, MA 02090		is a noncash contribution)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Aggregate contributions	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 Oncash 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 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.)
23452 12-23-	10	Schedule B (For	m 990, 990-EZ, or 990-PF) (2010)

THE LAWRENCE H. HYDE JR. CHARITABLE

13-7024608

Employer identification number

TRUST Part II Noncash Property (see instructions) (a) (c) No. (b) (d) FMV (or estimate) from Description of noncash property given Date received (see instructions) Part I 10,000 SHS HEALTHWAYS INC; 1 BASIS = \$96,830172,600. 04/23/10 (a) (c) No. (b) (d) FMV (or estimate) from **Date received** Description of noncash property given (see instructions) Part I (a) (c) No. (b) (d) FMV (or estimate) from Date received Description of noncash property given (see instructions) Part I (a) (c) No. (b) (d) FMV (or estimate) from Description of noncash property given Date received (see instructions) Part I (a) (c) No. (b) (d) FMV (or estimate) from Date received Description of noncash property given (see instructions) Part I (a) (c) No. (b) (d) FMV (or estimate) from Description of noncash property given Date received (see instructions) Part I

me of organ	990, 990-EZ, or 990-PF) (2010)		Page of of			
			Employer identification number			
	VRENCE H. HYDE JR. CHA	ARITABLE	13-7024608			
RUST art III	Exclusively religious, charitable, etc., i	ndividual contributions to section 5	01(c)(7), (8), or (10) organizations aggregating			
and in the	more than \$1,000 for the year. Comple Part III, enter the total of exclusively relig \$1,000 or less for the year (Enter this in	te columns (a) through (e) and the folloious, charitable, etc., contributions of	owing line entry. For organizations completing			
) No. rom	(b) Purpose of gift	(c) Use of gift				
Part I	(c) Use of girt		(d) Description of now gift is field			
-						
 -						
		(e) Transfer of gift				
<u> </u>	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee			
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No.	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
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		(e) Transfer of gift				
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	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee			
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No. om	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
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_ -		(e) Transfer of gift				
_ -	Transferee's name, address, a		Relationship of transferor to transferee			
	Transferee's name, address, a		Relationship of transferor to transferee			
	Transferee's name, address, a		Relationship of transferor to transferee			
	Transferee's name, address, a		Relationship of transferor to transferee			
		nd ZIP + 4				
No. om	Transferee's name, address, and the state of		Relationship of transferor to transferee (d) Description of how gift is held			
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No.		nd ZIP + 4				
No. om		nd ZIP + 4				
No.	(b) Purpose of gift	(c) Use of gift (e) Transfer of gift	(d) Description of how gift is held			
		(c) Use of gift (e) Transfer of gift				

FORM 990-PF DIVIDENT	OS AND	INTER	EST FI	ROM SE	ECUR	ITIES	STATE	MENT	1
SOURCE		GROSS AMOUNT			CAPITAL GAINS DIVIDENDS		COLUMN (A) AMOUNT		
UBS MONEY MARKET FUNDS UBS STOCK DIVIDENDS	-		34,40	10.		0.		34,4	10. 00.
TOTAL TO FM 990-PF, PART I, I	IN 4		34,43	10.		0.	34,410.		
FORM 990-PF	AC	COUNTI	NG FEI	ES .			STATE	MENT	2
DESCRIPTION	EXPE	A) NSES BOOKS	NET]	(B) (C) NET INVEST- ADJUSTED MENT INCOME NET INCOME					
METZLER LOCRICCHIO SERRA & CO	:	1,845.		1,84	15.				0.
TO FORM 990-PF, PG 1, LN 16B	-	1,845.		1,84	5.				0.
FORM 990-PF		TAX	ES				STATE	MENT	3
DESCRIPTION	EXPE	A) NSES BOOKS	NET I	B) INVEST INCOM		(C) ADJUSTED NET INCOM		(D) ARITAI JRPOSI	
2010 990-PF	1	1,431.		1,43	1.				0.
TO FORM 990-PF, PG 1, LN 18 =	1	1,431.		1,43	1.				0.
FORM 990-PF	O	OTHER EXPENSES			STATEMENT		MENT	4	
DESCRIPTION	(ISES	NET I	B) NVEST INCOM		(C) ADJUSTED NET INCOM		(D) RITAI RPOSI	
MASSACHUSETTS REPORTING FEES		35.		3	5.		 		0.
TO FORM 990-PF, PG 1, LN 23		35.		3	5.			0.	

FORM 990-PF CORPORATE	STOCK	STATEMENT	5
DESCRIPTION	BOOK VALUE	FAIR MARKE	T
1,000 SH - INTERDIGITAL	16,992.	41,6	40.
32,000 SH - HARRIS CORP	56,480.	1,449,6	00.
10,000 SH - ORASURE TECH	79,604.	57,5	00.
5,000 SH - ORASURE TECH	0.		0.
2,000 SH - GEN-PROBE INC	81,105.	116,7	
12,000 SH - HALLIBURTON CO	401,337.	489,9	
2,000 SH MEMC ELECTRONIC MATERIALS INC 7,949 SH - AVIAT NETWORKS INC / HARRIS STR	119,881.	22,5	20.
NETWORKS INC	42,654.	40,3	01.
TOTAL TO FORM 990-PF, PART II, LINE 10B	798,053.	2,218,2	21.
FORM 990-PF CORPORATE 1	BONDS	STATEMENT	6
DESCRIPTION	BOOK VALUE	FAIR MARKE	r
SOURCE PRECISION MEDICAL CONV	150,000.	150,00	00.
ACCELERATION KIKA, LLC	264,572.	264,5	
OTAL TO FORM 990-PF, PART II, LINE 10C	414,572.	414,5	

	AND CONTRIBUTIONS DURING THE YEAR	STATEMENT 7			
RECIPIENT NAME AND ADDRESS	RECIPIENT RELATIONSHIP AND PURPOSE OF GRANT	RECIPIENT STATUS	AMOUNT		
BOSTON COLLEGE HIGH SCHOOL MARYLAND	N/A GENERAL SUPPORT	PUBLIC	30,000.		
CATHOLIC LEADERSHIP INSTITUTE PENNSYLVANIA	N/A GENERAL SUPPORT	PUBLIC	55,000.		
FIRST THINGS NEW YORK	N/A GENERAL SUPPORT	PUBLIC	5,000.		
HARVARD RADCLIFFE CATHOLIC MASSACHUSETTS	N/A GENERAL SUPPORT	PUBLIC	100,000.		
SISTERS OF MERCY OF AMERICA MARYLAND	N/A GENERAL SUPPORT	PUBLIC	6,300.		
SOCIETY FOR PROPAGATION OF FAITH MASSACHUSETTS	N/A GENERAL SUPPORT	PUBLIC	1,000.		
SOCIETY OF JESUS NEW YORK	N/A GENERAL SUPPORT	PUBLIC	2,500.		
THE JESUITS MICHIGAN	N/A GENERAL SUPPORT	PUBLIC	6,000.		
TOTAL TO FORM 990-PF, PART XV, LI	NE 3A		205,800.		

Fore 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

	are filing for an Automatic 3-Month Extension, comp	-				• X		
	are filing for an Additional (Not Automatic) 3-Month E		-					
	complete Part II unless you have already been granted		-					
	nic filing (e-file). You can electronically file Form 8868 in							
	to file Form 990-T), or an additional (not automatic) 3-m							
	o file any of the forms listed in Part I or Part II with the e	-						
	Benefit Contracts, which must be sent to the IRS in pa		t (see instructions). For more details on t	the e	electronic filing of this	form,		
Market Mark Street Control	v.irs.gov/efile and click on e-file for Charities & Nonprofit							
geartil.								
	ation required to file Form 990-T and requesting an auto	matic 6-m	ionth extension - check this box and con		_			
Part I only	y	ACs and	truste must use Form 7004 to request at					
	ome tax returns.	viics, ariu	trusts must use Form 7004 to request at	I GAL	ension of time			
Type or	Name of exempt organization		Fn	nployer identification	number			
print	THE LAWRENCE H. HYDE JR. C	ARIE	13-7024608					
pilit	TRUST	1222						
File by the due date for	Number, street, and room or suite no. If a P.O box, s	see instruc	ctions.	<u> </u>	<u> </u>			
filing your return See	637 MAIN STREET	• • • • • • • • • • • • • • • • • • • •						
instructions	City, town or post office, state, and ZIP code. For a f	oreign add	dress, see instructions.					
	HARWICHPORT, MA 02646							
Enter the F	Return code for the return that this application is for (file	e a separa	ite application for each return)			0 4		
								
Applicatio	on	Return	Application			Return		
Is For		Code	Is For			Code		
Form 990		01	Form 990-T (corporation)			07		
Form 990-E		02	Form 1041-A			08		
Form 990-E		03	Form 4720			09		
Form 990-F		04	Form 5227			10		
	「(sec. 401(a) or 408(a) trust)	05	Form 6069			11		
romi 990-1	「(trust other than above) LAWRENCE H. HYI	06	Form 8870			12		
• The boo	oks are in the care of 637 MAIN STREET	-						
	ne No. ► 508-430-0104		FAX No. ►					
	ganization does not have an office or place of business	in the Lini						
	for a Group Return, enter the organization's four digit 0					eck this		
box 🕨 🗌	. If it is for part of the group, check this box							
	lest an automatic 3-month (6 months for a corporation							
			on return for the organization named ab		The extension			
ıs for t	the organization's return for:	•	-					
▶X	calendar year 2010 or							
▶□	tax year beginning	, and	ending					
2 If the t	tax year entered in line 1 is for less than 12 months, ch	eck reasoi	n. 🔲 Initial return 🔲 Final i	retur	'n			
	Change in accounting period							
	· · · · · · · · · · · · · · · · · · ·			_				
3a If this a	application is for Form 990-BL, 990-PF, 990-T, 4720, or	6069, ent	ter the tentative tax, less any					
nonref	fundable credits. See instructions			3a	\$	0.		
b If this a	application is for Form 990-PF, 990-T, 4720, or 6069, e	nter any re	efundable credits and					
	ted tax payments made. Include any pnor year overpa			3b	\$	969.		
	ce due. Subtract line 3b from line 3a. Include your pays		-		_	^		
	ng EFTPS (Electronic Federal Tax Payment System). Se			3c	\$	<u> </u>		
		n this For	m 8868, see Form 8453-EO and Form 88	s/9-l				
	ou are going to make an electronic fund withdrawal wit Paperwork Reduction Act Notice, see Instructions.	h this Forr	m 8868, see Form 8453-EO and Form 88	379-E	Form 8868 (Rev.			