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Form 990-PF

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

OMB No 1545-0052

2012

Department of the Treasury  
Internal Revenue Service

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

Open to public inspection

For calendar year 2012 or tax year beginning

SEP 1, 2012

, and ending

AUG 31, 2013

|                                                                                                                                                                                                                                                                                                        |                                                                                                                                                  |                                                                                                                                                                              |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Name of foundation<br><b>BENJAMIN &amp; SOPHIE SCHER<br/>CHARITABLE FOUNDATION</b>                                                                                                                                                                                                                     |                                                                                                                                                  | A Employer identification number<br><b>13-3965996</b>                                                                                                                        |
| Number and street (or P O box number if mail is not delivered to street address)<br><b>4380 JAMES ESTATE COURT</b>                                                                                                                                                                                     |                                                                                                                                                  | B Telephone number<br><b>561-969-3674</b>                                                                                                                                    |
| City or town, state, and ZIP code<br><b>WELLINGTON, FL 33449</b>                                                                                                                                                                                                                                       |                                                                                                                                                  | C If exemption application is pending, check here <input type="checkbox"/>                                                                                                   |
| G Check all that apply:<br><input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity<br><input type="checkbox"/> Final return <input type="checkbox"/> Amended return<br><input type="checkbox"/> Address change <input type="checkbox"/> Name change |                                                                                                                                                  | D 1. Foreign organizations, check here <input type="checkbox"/><br>2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/> |
| H Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation<br><input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation                                                      |                                                                                                                                                  | E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>                                                                |
| I Fair market value of all assets at end of year (from Part II, col (c), line 16)<br><b>\$ 1,387,751.</b>                                                                                                                                                                                              | J Accounting method: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual<br><input type="checkbox"/> Other (specify) _____ | F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>                                                             |

| Part I Analysis of Revenue and Expenses<br>(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)) |  | (a) Revenue and expenses per books | (b) Net investment income | (c) Adjusted net income | (d) Disbursements for charitable purposes (cash basis only) |
|----------------------------------------------------------------------------------------------------------------------------------------------------|--|------------------------------------|---------------------------|-------------------------|-------------------------------------------------------------|
| 1 Contributions, gifts, grants, etc., received                                                                                                     |  |                                    |                           | N/A                     |                                                             |
| 2 Check <input checked="" type="checkbox"/> if the foundation is not required to attach Sch B                                                      |  |                                    |                           |                         |                                                             |
| 3 Interest on savings and temporary cash investments                                                                                               |  | 22.                                | 22.                       |                         | STATEMENT 1                                                 |
| 4 Dividends and interest from securities                                                                                                           |  | 36,023.                            | 36,023.                   |                         | STATEMENT 2                                                 |
| 5a Gross rents                                                                                                                                     |  |                                    |                           |                         |                                                             |
| b Net rental income or (loss)                                                                                                                      |  |                                    |                           |                         |                                                             |
| 6a Net gain or (loss) from sale of assets not on line 10                                                                                           |  | 59,867.                            |                           |                         |                                                             |
| b Gross sales price for all assets on line 6a                                                                                                      |  | 326,828.                           |                           |                         |                                                             |
| 7 Capital gain net income (from Part IV, line 2)                                                                                                   |  |                                    | 59,867.                   |                         |                                                             |
| 8 Net short-term capital gain                                                                                                                      |  |                                    |                           |                         |                                                             |
| 9 Income modifications                                                                                                                             |  |                                    |                           |                         |                                                             |
| 10a Gross sales less returns and allowances                                                                                                        |  |                                    |                           |                         |                                                             |
| b Less Cost of goods sold                                                                                                                          |  |                                    |                           |                         |                                                             |
| c Gross profit or (loss)                                                                                                                           |  |                                    |                           |                         |                                                             |
| 11 Other income                                                                                                                                    |  |                                    |                           |                         |                                                             |
| 12 Total. Add lines 1 through 11                                                                                                                   |  | 95,912.                            | 95,912.                   |                         |                                                             |
| 13 Compensation of officers, directors, trustees, etc                                                                                              |  | 80,000.                            | 30,000.                   |                         | 30,000.                                                     |
| 14 Other employee salaries and wages                                                                                                               |  |                                    |                           |                         |                                                             |
| 15 Pension plans, employee benefits                                                                                                                |  | 9,689.                             | 2,713.                    |                         | 2,713.                                                      |
| 16a Legal fees                                                                                                                                     |  |                                    |                           |                         |                                                             |
| b Accounting fees STMT 3                                                                                                                           |  | 4,255.                             | 2,128.                    |                         | 0.                                                          |
| c Other professional fees                                                                                                                          |  |                                    |                           |                         |                                                             |
| 17 Interest                                                                                                                                        |  |                                    |                           |                         |                                                             |
| 18 Taxes STMT 4                                                                                                                                    |  | 250.                               | 0.                        |                         | 0.                                                          |
| 19 Depreciation and depletion                                                                                                                      |  |                                    |                           |                         |                                                             |
| 20 Occupancy                                                                                                                                       |  |                                    |                           |                         |                                                             |
| 21 Travel, conferences, and meetings                                                                                                               |  |                                    |                           |                         |                                                             |
| 22 Printing and publications                                                                                                                       |  |                                    |                           |                         |                                                             |
| 23 Other expenses STMT 5                                                                                                                           |  | 2,431.                             | 0.                        |                         | 0.                                                          |
| 24 Total operating and administrative expenses. Add lines 13 through 23                                                                            |  | 96,625.                            | 34,841.                   |                         | 32,713.                                                     |
| 25 Contributions, gifts, grants paid                                                                                                               |  | 55,000.                            |                           |                         | 55,000.                                                     |
| 26 Total expenses and disbursements. Add lines 24 and 25                                                                                           |  | 151,625.                           | 34,841.                   |                         | 87,713.                                                     |
| 27 Subtract line 26 from line 12:                                                                                                                  |  |                                    |                           |                         |                                                             |
| a Excess of revenue over expenses and disbursements                                                                                                |  | -55,713.                           |                           |                         |                                                             |
| b Net investment income (if negative, enter -0-)                                                                                                   |  |                                    | 61,071.                   |                         |                                                             |
| c Adjusted net income (if negative, enter -0-)                                                                                                     |  |                                    |                           | N/A                     |                                                             |

223501 12-05-12 LHA For Paperwork Reduction Act Notice, see instructions.

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**BENJAMIN & SOPHIE SCHER  
CHARITABLE FOUNDATION**

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| Part II Balance Sheets                            |                                                                                         | Attached schedules and amounts in the description column should be for end-of-year amounts only |                |                       |
|---------------------------------------------------|-----------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------|----------------|-----------------------|
|                                                   |                                                                                         | Beginning of year                                                                               | End of year    |                       |
|                                                   |                                                                                         | (a) Book Value                                                                                  | (b) Book Value | (c) Fair Market Value |
| Assets                                            | 1 Cash - non-interest-bearing                                                           | 8,121.                                                                                          | 31,703.        | 31,703.               |
|                                                   | 2 Savings and temporary cash investments                                                | 71,670.                                                                                         | 271,531.       | 271,531.              |
|                                                   | 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    |                                                                                                 |                |                       |
|                                                   | 7 Other notes and loans receivable ▶                                                    |                                                                                                 |                |                       |
|                                                   | Less: allowance for doubtful accounts ▶                                                 |                                                                                                 |                |                       |
|                                                   | 8 Inventories for sale or use                                                           |                                                                                                 |                |                       |
|                                                   | 9 Prepaid expenses and deferred charges                                                 |                                                                                                 |                |                       |
|                                                   | 10a Investments - U.S. and state government obligations                                 |                                                                                                 |                |                       |
|                                                   | b Investments - corporate stock <span style="float:right">STMT 6</span>                 | 1,034,477.                                                                                      | 767,517.       | 1,084,517.            |
|                                                   | c Investments - corporate bonds                                                         |                                                                                                 |                |                       |
| Liabilities                                       | 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 ▶ )                                                           |                                                                                                 |                |                       |
|                                                   | 16 Total assets (to be completed by all filers)                                         | 1,114,268.                                                                                      | 1,070,751.     | 1,387,751.            |
|                                                   | 17 Accounts payable and accrued expenses                                                |                                                                                                 |                |                       |
|                                                   | 18 Grants payable                                                                       |                                                                                                 |                |                       |
| Net Assets or Fund Balances                       | 19 Deferred revenue                                                                     |                                                                                                 |                |                       |
|                                                   | 20 Loans from officers, directors, trustees, and other disqualified persons             |                                                                                                 |                |                       |
|                                                   | 21 Mortgages and other notes payable                                                    |                                                                                                 |                |                       |
|                                                   | 22 Other liabilities (describe ▶ )                                                      |                                                                                                 |                |                       |
| 23 Total liabilities (add lines 17 through 22)    | 0.                                                                                      | 0.                                                                                              |                |                       |
| Net Assets or Fund Balances                       | Foundations that follow SFAS 117, check here <input type="checkbox"/>                   |                                                                                                 |                |                       |
|                                                   | 24 Unrestricted and complete lines 24 through 26 and lines 30 and 31.                   |                                                                                                 |                |                       |
|                                                   | 25 Temporarily restricted                                                               |                                                                                                 |                |                       |
|                                                   | 26 Permanently restricted                                                               |                                                                                                 |                |                       |
|                                                   | Foundations that do not follow SFAS 117, check here <input checked="" type="checkbox"/> |                                                                                                 |                |                       |
|                                                   | 27 Capital stock, trust principal, or current funds                                     | 2,470,979.                                                                                      | 2,470,979.     |                       |
|                                                   | 28 Paid-in or capital surplus, or land, bldg., and equipment fund                       | 0.                                                                                              | 0.             |                       |
|                                                   | 29 Retained earnings, accumulated income, endowment, or other funds                     | -1,356,711.                                                                                     | -1,400,228.    |                       |
| 30 Total net assets or fund balances              | 1,114,268.                                                                              | 1,070,751.                                                                                      |                |                       |
| 31 Total liabilities and net assets/fund balances | 1,114,268.                                                                              | 1,070,751.                                                                                      |                |                       |

**Part III Analysis of Changes in Net Assets or Fund Balances**

|                                                                                                                                                                 |            |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------|------------|
| 1 Total net assets or fund balances at beginning of year - Part II, column (a), line 30<br>(must agree with end-of-year figure reported on prior year's return) | 1,114,268. |
| 2 Enter amount from Part I, line 27a                                                                                                                            | -55,713.   |
| 3 Other increases not included in line 2 (itemize) ▶                                                                                                            | 12,196.    |
| 4 Add lines 1, 2, and 3                                                                                                                                         | 1,070,751. |
| 5 Decreases not included in line 2 (itemize) ▶                                                                                                                  | 0.         |
| 6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30                                                         | 1,070,751. |

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**Part IV Capital Gains and Losses for Tax on Investment Income**

| (a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, or common stock, 200 shs. MLC Co.) | (b) How acquired<br>P - Purchase<br>D - Donation | (c) Date acquired<br>(mo., day, yr.) | (d) Date sold<br>(mo., day, yr.) |
|------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------|--------------------------------------|----------------------------------|
| <b>1a 10,000 SHS FAIRHOLME FD</b>                                                                                                  | <b>P</b>                                         | <b>02/27/07</b>                      | <b>01/07/13</b>                  |
| <b>b BP NOV 17 2012 PUT</b>                                                                                                        | <b>P</b>                                         | <b>10/23/12</b>                      | <b>11/19/12</b>                  |
| c                                                                                                                                  |                                                  |                                      |                                  |
| d                                                                                                                                  |                                                  |                                      |                                  |
| e                                                                                                                                  |                                                  |                                      |                                  |

| (e) Gross sales price | (f) Depreciation allowed<br>(or allowable) | (g) Cost or other basis<br>plus expense of sale | (h) Gain or (loss)<br>(e) plus (f) minus (g) |
|-----------------------|--------------------------------------------|-------------------------------------------------|----------------------------------------------|
| <b>a 319,582.</b>     |                                            | <b>266,961.</b>                                 | <b>52,621.</b>                               |
| <b>b 7,246.</b>       |                                            |                                                 | <b>7,246.</b>                                |
| c                     |                                            |                                                 |                                              |
| d                     |                                            |                                                 |                                              |
| e                     |                                            |                                                 |                                              |

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69

| (i) F.M.V. as of 12/31/69 | (j) Adjusted basis<br>as of 12/31/69 | (k) Excess of col. (i)<br>over col. (j), if any | (l) Gains (Col. (h) gain minus<br>col. (k), but not less than -0-) or<br>Losses (from col. (h)) |
|---------------------------|--------------------------------------|-------------------------------------------------|-------------------------------------------------------------------------------------------------|
| <b>a</b>                  |                                      |                                                 | <b>52,621.</b>                                                                                  |
| <b>b</b>                  |                                      |                                                 | <b>7,246.</b>                                                                                   |
| c                         |                                      |                                                 |                                                                                                 |
| d                         |                                      |                                                 |                                                                                                 |
| e                         |                                      |                                                 |                                                                                                 |

|                                                                                                                                                                                                                                                                                        |          |                |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|----------------|
| <b>2 Capital gain net income or (net capital loss)</b> <div style="float: right; border-left: 1px solid black; padding-left: 5px;">                     { If gain, also enter in Part I, line 7<br/>                     If (loss), enter -0- in Part I, line 7                 </div> | <b>2</b> | <b>59,867.</b> |
| <b>3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6):</b><br>If gain, also enter in Part I, line 8, column (c).<br>If (loss), enter -0- in Part I, line 8                                                                                                 | <b>3</b> | <b>N/A</b>     |

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

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

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

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?

☐ Yes ☒ No

If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part.

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

| (a) Base period years<br>Calendar year (or tax year beginning in) | (b) Adjusted qualifying distributions | (c) Net value of noncharitable-use assets | (d) Distribution ratio<br>(col. (b) divided by col. (c)) |
|-------------------------------------------------------------------|---------------------------------------|-------------------------------------------|----------------------------------------------------------|
| 2011                                                              | 47,500.                               | 1,416,766.                                | .033527                                                  |
| 2010                                                              | 102,921.                              | 1,543,261.                                | .066691                                                  |
| 2009                                                              | 115,667.                              | 1,444,053.                                | .080099                                                  |
| 2008                                                              | 110,637.                              | 1,336,259.                                | .082796                                                  |
| 2007                                                              | 129,194.                              | 2,465,565.                                | .052399                                                  |

|                                                                                                                                                                                                                                |          |                   |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|-------------------|
| <b>2 Total of line 1, column (d)</b>                                                                                                                                                                                           | <b>2</b> | <b>.315512</b>    |
| <b>3 Average distribution ratio for the 5-year base period - divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years</b>                                          | <b>3</b> | <b>.063102</b>    |
| <b>4 Enter the net value of noncharitable-use assets for 2012 from Part X, line 5</b>                                                                                                                                          | <b>4</b> | <b>1,463,580.</b> |
| <b>5 Multiply line 4 by line 3</b>                                                                                                                                                                                             | <b>5</b> | <b>92,355.</b>    |
| <b>6 Enter 1% of net investment income (1% of Part I, line 27b)</b>                                                                                                                                                            | <b>6</b> | <b>611.</b>       |
| <b>7 Add lines 5 and 6</b>                                                                                                                                                                                                     | <b>7</b> | <b>92,966.</b>    |
| <b>8 Enter qualifying distributions from Part XII, line 4</b><br>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.<br>See the Part VI instructions. | <b>8</b> | <b>87,713.</b>    |

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**Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions)**

|                                                                                                                                                                                                                                        |  |        |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--------|
| 1a Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1.<br>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 <input checked="" type="checkbox"/> and enter 1% of Part I, line 27b                                                                           |  | 1 611. |
| c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).                                                                                                             |  |        |
| 2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)                                                                                                                            |  | 2 0.   |
| 3 Add lines 1 and 2                                                                                                                                                                                                                    |  | 3 611. |
| 4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)                                                                                                                          |  | 4 0.   |
| 5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-                                                                                                                                              |  | 5 611. |
| 6 Credits/Payments:                                                                                                                                                                                                                    |  |        |
| a 2012 estimated tax payments and 2011 overpayment credited to 2012                                                                                                                                                                    |  | 6a     |
| b Exempt foreign organizations - tax withheld at source                                                                                                                                                                                |  | 6b     |
| c Tax paid with application for extension of time to file (Form 8868)                                                                                                                                                                  |  | 6c 0.  |
| d Backup withholding erroneously withheld                                                                                                                                                                                              |  | 6d     |
| 7 Total credits and payments. Add lines 6a through 6d                                                                                                                                                                                  |  | 7 0.   |
| 8 Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached                                                                                                                    |  | 8 13.  |
| 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed                                                                                                                                                        |  | 9 624. |
| 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid                                                                                                                                           |  | 10     |
| 11 Enter the amount of line 10 to be: Credited to 2013 estimated tax <input type="checkbox"/> Refunded <input type="checkbox"/>                                                                                                        |  | 11     |

**Part VII-A Statements Regarding Activities**

|                                                                                                                                                                                                                                                                                                                                           | Yes | No |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|----|
| 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?                                                                                                                                                                   |     | X  |
| 1b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)?<br>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 |     | X  |
| c Did the foundation file Form 1120-POL for this year?                                                                                                                                                                                                                                                                                    |     | X  |
| d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:<br>(1) On the foundation. \$ 0. (2) On foundation managers. \$ 0.                                                                                                                                                                    |     |    |
| e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. \$ 0.                                                                                                                                                                                             |     |    |
| 2 Has the foundation engaged in any activities that have not previously been reported to the IRS?<br>If "Yes," attach a detailed description of the activities                                                                                                                                                                            |     | X  |
| 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                                                                                                              |     | X  |
| 4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?                                                                                                                                                                                                                                            |     | X  |
| b If "Yes," has it filed a tax return on Form 990-T for this year?                                                                                                                                                                                                                                                                        |     |    |
| 5 Was there a liquidation, termination, dissolution, or substantial contraction during the year?<br>If "Yes," attach the statement required by General Instruction T.                                                                                                                                                                     |     | X  |
| 6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:<br>• By language in the governing instrument, or<br>• 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?      | X   |    |
| 7 Did the foundation have at least \$5,000 in assets at any time during the year?<br>If "Yes," complete Part II, col. (c), and Part XV.                                                                                                                                                                                                   | X   |    |
| 8a Enter the states to which the foundation reports or with which it is registered (see instructions) <u>NY</u>                                                                                                                                                                                                                           |     |    |
| 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                                                                                                                             | X   |    |
| 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 2012 or the taxable year beginning in 2012 (see instructions for Part XIV)? If "Yes," complete Part XIV                                                                                    |     | X  |
| 10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses                                                                                                                                                                                                     |     | X  |

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**Part VII-A: Statements Regarding Activities (continued)**

|                                                                                                                                                                                                                                                                                                                                      |    |             |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----|-------------|
| 11 At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)                                                                                                                                           | 11 | X           |
| 12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions)                                                                                                                                          | 12 | X           |
| 13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application?<br>Website address ► <u>N/A</u>                                                                                                                                                                               | 13 | X           |
| 14 The books are in care of ► <u>RICHARD SCHER</u> Telephone no. ► <u>561-969-3674</u><br>Located at ► <u>4380 JAMES ESTATE COURT, WELLINGTON, FL</u> ZIP+4 ► <u>33467</u>                                                                                                                                                           |    |             |
| 15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the year<br>► 15 <u>N/A</u>                                                                                                                            | 15 | N/A         |
| 16 At any time during calendar year 2012, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?<br>See the instructions for exceptions and filing requirements for Form TD F 90-22.1. If "Yes," enter the name of the foreign country ► | 16 | Yes No<br>X |

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

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                     |        |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------|--------|
| 1a During the year did the foundation (either directly or indirectly):                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                     | Yes No |
| (1) Engage in the sale or exchange, or leasing of property with a disqualified person?                                                                                                                                                                                                                                                                                                                                                                                                            | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |        |
| (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?                                                                                                                                                                                                                                                                                                                                                                                    | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |        |
| (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?                                                                                                                                                                                                                                                                                                                                                                                                        | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |        |
| (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?                                                                                                                                                                                                                                                                                                                                                                                                              | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |        |
| (5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?                                                                                                                                                                                                                                                                                                                                                     | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |        |
| (6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.)                                                                                                                                                                                                                                                   | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |        |
| b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?<br>Organizations relying on a current notice regarding disaster assistance check here                                                                                                                                                                                      | N/A<br>► <input type="checkbox"/>                                   | 1b     |
| c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2012?                                                                                                                                                                                                                                                                                                         |                                                                     | 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)):                                                                                                                                                                                                                                                                                                                  |                                                                     |        |
| a At the end of tax year 2012, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2012?<br>If "Yes," list the years ►                                                                                                                                                                                                                                                                                                                 | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |        |
| b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement - see instructions.)                                                                                                                                                                                       | 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.<br>►                                                                                                                                                                                                                                                                                                                                                                           |                                                                     |        |
| 3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?                                                                                                                                                                                                                                                                                                                                                                     | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |        |
| b If "Yes," did it have excess business holdings in 2012 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2012.) | N/A                                                                 | 3b     |
| 4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?                                                                                                                                                                                                                                                                                                                                                                                |                                                                     | 4a X   |
| b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2012?                                                                                                                                                                                                                                                               |                                                                     | 4b X   |

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**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 ☒ No
- (2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive? ☐ Yes ☒ No
- (3) Provide a grant to an individual for travel, study, or other similar purposes? ☐ Yes ☒ No
- (4) Provide a grant to an organization other than a charitable, etc., organization described in section 509(a)(1), (2), or (3), or section 4940(d)(2)? ☐ Yes ☒ No
- (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? ☐ Yes ☒ No

**b** If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)?

N/A

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?

N/A ☐ Yes ☐ No

If "Yes," attach the statement required by Regulations section 53.4945-5(d)

**6a** Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?

☐ Yes ☒ No

**b** Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?

If "Yes" to 6b, file Form 8870.

☐ Yes ☒ No

**7a** At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?

N/A

**b** If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction?

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

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

| (a) Name and address                                         | (b) Title, and average hours per week devoted to position | (c) Compensation (If not paid, enter -0-) | (d) Contributions to employee benefit plans and deferred compensation | (e) Expense account, other allowances |
|--------------------------------------------------------------|-----------------------------------------------------------|-------------------------------------------|-----------------------------------------------------------------------|---------------------------------------|
| ROBERT SCHER<br>2557 LOWER LANDO LANE<br>PARK CITY, UT 84098 | TRUSTEE<br>20.00                                          | 40,000.                                   | 0.                                                                    | 0.                                    |
| DAVID SCHER<br>2 ECKERT ROAD<br>HEINESPORT, NJ 08036         | TRUSTEE<br>20.00                                          | 40,000.                                   | 0.                                                                    | 0.                                    |
|                                                              |                                                           |                                           |                                                                       |                                       |
|                                                              |                                                           |                                           |                                                                       |                                       |
|                                                              |                                                           |                                           |                                                                       |                                       |
|                                                              |                                                           |                                           |                                                                       |                                       |
|                                                              |                                                           |                                           |                                                                       |                                       |

**2** Compensation of five highest-paid employees (other than those included 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

0

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

**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                                                        |                     |                  |
|                                                             |                     |                  |
|                                                             |                     |                  |
|                                                             |                     |                  |
|                                                             |                     |                  |
|                                                             |                     |                  |
|                                                             |                     |                  |
|                                                             |                     |                  |

Total number of others receiving over \$50,000 for professional services **0**

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

| List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc. | Expenses |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|
| 1 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 lines 1 and 2. | Amount    |
|-------------------------------------------------------------------------------------------------------------------|-----------|
| 1 N/A                                                                                                             |           |
|                                                                                                                   |           |
| 2                                                                                                                 |           |
|                                                                                                                   |           |
| All other program-related investments. See instructions.                                                          |           |
| 3                                                                                                                 |           |
|                                                                                                                   |           |
| <b>Total. Add lines 1 through 3</b>                                                                               | <b>0.</b> |

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

|                                                                                                                      |           |            |
|----------------------------------------------------------------------------------------------------------------------|-----------|------------|
| <b>1</b> Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes: |           |            |
| <b>a</b> Average monthly fair market value of securities                                                             | <b>1a</b> | 1,472,610. |
| <b>b</b> Average of monthly cash balances                                                                            | <b>1b</b> | 13,258.    |
| <b>c</b> Fair market value of all other assets                                                                       | <b>1c</b> |            |
| <b>d</b> <b>Total</b> (add lines 1a, b, and c)                                                                       | <b>1d</b> | 1,485,868. |
| <b>e</b> Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)   | <b>1e</b> | 0.         |
| <b>2</b> Acquisition indebtedness applicable to line 1 assets                                                        | <b>2</b>  | 0.         |
| <b>3</b> Subtract line 2 from line 1d                                                                                | <b>3</b>  | 1,485,868. |
| <b>4</b> Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)   | <b>4</b>  | 22,288.    |
| <b>5</b> <b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3. Enter here and on Part V, line 4 | <b>5</b>  | 1,463,580. |
| <b>6</b> <b>Minimum investment return.</b> Enter 5% of line 5                                                        | <b>6</b>  | 73,179.    |

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

|                                                                                                                    |           |          |         |
|--------------------------------------------------------------------------------------------------------------------|-----------|----------|---------|
| <b>1</b> Minimum investment return from Part X, line 6                                                             |           | <b>1</b> | 73,179. |
| <b>2a</b> Tax on investment income for 2012 from Part VI, line 5                                                   | <b>2a</b> | 611.     |         |
| <b>b</b> Income tax for 2012. (This does not include the tax from Part VI.)                                        | <b>2b</b> |          |         |
| <b>c</b> Add lines 2a and 2b                                                                                       | <b>2c</b> | 611.     |         |
| <b>3</b> Distributable amount before adjustments. Subtract line 2c from line 1                                     | <b>3</b>  | 72,568.  |         |
| <b>4</b> Recoveries of amounts treated as qualifying distributions                                                 | <b>4</b>  | 0.       |         |
| <b>5</b> Add lines 3 and 4                                                                                         | <b>5</b>  | 72,568.  |         |
| <b>6</b> Deduction from distributable amount (see instructions)                                                    | <b>6</b>  | 0.       |         |
| <b>7</b> <b>Distributable amount as adjusted.</b> Subtract line 6 from line 5. Enter here and on Part XIII, line 1 | <b>7</b>  | 72,568.  |         |

**Part XII Qualifying Distributions** (see instructions)

|                                                                                                                                            |           |         |
|--------------------------------------------------------------------------------------------------------------------------------------------|-----------|---------|
| <b>1</b> Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:                                        |           |         |
| <b>a</b> Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26                                                     | <b>1a</b> | 87,713. |
| <b>b</b> Program-related investments - total from Part IX-B                                                                                | <b>1b</b> | 0.      |
| <b>2</b> Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes                         | <b>2</b>  |         |
| <b>3</b> Amounts set aside for specific charitable projects that satisfy the:                                                              |           |         |
| <b>a</b> Suitability test (prior IRS approval required)                                                                                    | <b>3a</b> |         |
| <b>b</b> Cash distribution test (attach the required schedule)                                                                             | <b>3b</b> |         |
| <b>4</b> <b>Qualifying distributions.</b> Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4                 | <b>4</b>  | 87,713. |
| <b>5</b> Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b | <b>5</b>  | 0.      |
| <b>6</b> <b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4                                                             | <b>6</b>  | 87,713. |

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

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**Part XIII** Undistributed Income (see instructions)

|                                                                                                                                                                                   | (a)<br>Corpus | (b)<br>Years prior to 2011 | (c)<br>2011 | (d)<br>2012 |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|----------------------------|-------------|-------------|
| <b>1</b> Distributable amount for 2012 from Part XI, line 7                                                                                                                       |               |                            |             | 72,568.     |
| <b>2</b> Undistributed income, if any, as of the end of 2012:                                                                                                                     |               |                            |             |             |
| <b>a</b> Enter amount for 2011 only                                                                                                                                               |               |                            | 0.          |             |
| <b>b</b> Total for prior years:                                                                                                                                                   |               | 0.                         |             |             |
| <b>3</b> Excess distributions carryover, if any, to 2012:                                                                                                                         |               |                            |             |             |
| <b>a</b> From 2007                                                                                                                                                                |               |                            |             |             |
| <b>b</b> From 2008                                                                                                                                                                |               |                            |             |             |
| <b>c</b> From 2009                                                                                                                                                                | 43,920.       |                            |             |             |
| <b>d</b> From 2010                                                                                                                                                                | 26,218.       |                            |             |             |
| <b>e</b> From 2011                                                                                                                                                                |               |                            |             |             |
| <b>f</b> Total of lines 3a through e                                                                                                                                              | 70,138.       |                            |             |             |
| <b>4</b> Qualifying distributions for 2012 from Part XII, line 4. <b>► \$</b> 87,713.                                                                                             |               |                            |             |             |
| <b>a</b> Applied to 2011, but not more than line 2a                                                                                                                               |               |                            | 0.          |             |
| <b>b</b> Applied to undistributed income of prior years (Election required - see instructions)                                                                                    |               | 0.                         |             |             |
| <b>c</b> Treated as distributions out of corpus (Election required - see instructions)                                                                                            | 0.            |                            |             |             |
| <b>d</b> Applied to 2012 distributable amount                                                                                                                                     |               |                            |             | 72,568.     |
| <b>e</b> Remaining amount distributed out of corpus                                                                                                                               | 15,145.       |                            |             |             |
| <b>5</b> Excess distributions carryover applied to 2012 (If an amount appears in column (d), the same amount must be shown in column (a).)                                        | 0.            |                            |             | 0.          |
| <b>6</b> Enter the net total of each column as indicated below:                                                                                                                   |               |                            |             |             |
| <b>a</b> Corpus. Add lines 3f, 4c, and 4e. Subtract line 5                                                                                                                        | 85,283.       |                            |             |             |
| <b>b</b> Prior years' undistributed income. Subtract line 4b from line 2b                                                                                                         |               | 0.                         |             |             |
| <b>c</b> 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.                         |             |             |
| <b>d</b> Subtract line 6c from line 6b. Taxable amount - see instructions                                                                                                         |               | 0.                         |             |             |
| <b>e</b> Undistributed income for 2011. Subtract line 4a from line 2a. Taxable amount - see instr.                                                                                |               |                            | 0.          |             |
| <b>f</b> Undistributed income for 2012. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2013                                                              |               |                            |             | 0.          |
| <b>7</b> Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3)                                                     | 0.            |                            |             |             |
| <b>8</b> Excess distributions carryover from 2007 not applied on line 5 or line 7                                                                                                 | 0.            |                            |             |             |
| <b>9</b> Excess distributions carryover to 2013. Subtract lines 7 and 8 from line 6a                                                                                              | 85,283.       |                            |             |             |
| <b>10</b> Analysis of line 9:                                                                                                                                                     |               |                            |             |             |
| <b>a</b> Excess from 2008                                                                                                                                                         |               |                            |             |             |
| <b>b</b> Excess from 2009                                                                                                                                                         | 43,920.       |                            |             |             |
| <b>c</b> Excess from 2010                                                                                                                                                         | 26,218.       |                            |             |             |
| <b>d</b> Excess from 2011                                                                                                                                                         |               |                            |             |             |
| <b>e</b> Excess from 2012                                                                                                                                                         | 15,145.       |                            |             |             |

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

**1** a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2012, enter the date of the ruling ▶

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

|                                                                                                                                                          | Tax year | Prior 3 years |          |          |           |
|----------------------------------------------------------------------------------------------------------------------------------------------------------|----------|---------------|----------|----------|-----------|
|                                                                                                                                                          | (a) 2012 | (b) 2011      | (c) 2010 | (d) 2009 | (e) Total |
| <b>2</b> a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed                     |          |               |          |          |           |
| <b>b</b> 85% of line 2a                                                                                                                                  |          |               |          |          |           |
| <b>c</b> Qualifying distributions from Part XII, line 4 for each year listed                                                                             |          |               |          |          |           |
| <b>d</b> Amounts included in line 2c not used directly for active conduct of exempt activities                                                           |          |               |          |          |           |
| <b>e</b> Qualifying distributions made directly for active conduct of exempt activities                                                                  |          |               |          |          |           |
| Subtract line 2d from line 2c                                                                                                                            |          |               |          |          |           |
| <b>3</b> Complete 3a, b, or c for the alternative test relied upon:                                                                                      |          |               |          |          |           |
| <b>a</b> "Assets" alternative test - enter:                                                                                                              |          |               |          |          |           |
| <b>(1)</b> Value of all assets                                                                                                                           |          |               |          |          |           |
| <b>(2)</b> Value of assets qualifying under section 4942(j)(3)(B)(i)                                                                                     |          |               |          |          |           |
| <b>b</b> "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed                              |          |               |          |          |           |
| <b>c</b> "Support" alternative test - enter:                                                                                                             |          |               |          |          |           |
| <b>(1)</b> Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) |          |               |          |          |           |
| <b>(2)</b> Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)                                      |          |               |          |          |           |
| <b>(3)</b> Largest amount of support from an exempt organization                                                                                         |          |               |          |          |           |
| <b>(4)</b> Gross investment income                                                                                                                       |          |               |          |          |           |

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

**1 Information Regarding Foundation Managers:**

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

**NONE**

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

**NONE**

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

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

**a** The name, address, and telephone number or e-mail of the person to whom applications should be addressed:

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

**c** Any submission deadlines:

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

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**Part XV** **Supplementary Information** (continued)

| <b>3 Grants and Contributions Paid During the Year or Approved for Future Payment</b>              |                                                                                                                    |                                      |                                     |                |
|----------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------|--------------------------------------|-------------------------------------|----------------|
| Recipient<br>Name and address (home or business)                                                   | If recipient is an individual,<br>show any relationship to<br>any foundation manager<br>or substantial contributor | Foundation<br>status of<br>recipient | Purpose of grant or<br>contribution | Amount         |
| <b>a Paid during the year</b>                                                                      |                                                                                                                    |                                      |                                     |                |
| WYCLIFFE CHARITIES FOUNDATION INC.<br>4650 WYCLIFFE COUNTRY CLUB BLVD<br>LAKE WORTH, FL 33449-8151 | N/A                                                                                                                | PUBLIC CHARITY                       | GENERAL OPERATIONS                  | 5,000.         |
| AMNESTY INTERNATIONAL USA<br>5 PENN PLAZA, 16TH FLOOR<br>NEW YORK, NY 10001-1810                   | N/A                                                                                                                | PUBLIC CHARITY                       | GENERAL OPERATIONS                  | 8,000.         |
| CHEVRA HATZALAH<br>1340 EAST 9TH STREET<br>BROOKLYN, NY 11230                                      | N/A                                                                                                                | PUBLIC CHARITY                       | GENERAL OPERATIONS                  | 1,000.         |
| DOCTORS WITHOUT BORDERS<br>333 7TH AVE 2ND FLOOR<br>NEW YORK, NY 10001                             | N/A                                                                                                                | PUBLIC CHARITY                       | GENERAL OPERATIONS                  | 8,000.         |
| ENGENDER HEALTH<br>440 NINTH AVENUE<br>NEW YORK, NY 10001                                          | N/A                                                                                                                | PUBLIC CHARITY                       | GENERAL OPERATIONS                  | 8,000.         |
| <b>Total</b>                                                                                       | <b>SEE CONTINUATION SHEET(S)</b>                                                                                   |                                      |                                     | <b>55,000.</b> |
| <b>b Approved for future payment</b>                                                               |                                                                                                                    |                                      |                                     |                |
| <b>NONE</b>                                                                                        |                                                                                                                    |                                      |                                     |                |
|                                                                                                    |                                                                                                                    |                                      |                                     |                |
|                                                                                                    |                                                                                                                    |                                      |                                     |                |
| <b>Total</b>                                                                                       |                                                                                                                    |                                      |                                     | <b>0.</b>      |

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

Enter gross amounts unless otherwise indicated.

| Enter gross amounts unless otherwise indicated.               |                         | Unrelated business income |                               | Excluded by section 512, 513, or 514 |  | (e)<br>Related or exempt<br>function income |
|---------------------------------------------------------------|-------------------------|---------------------------|-------------------------------|--------------------------------------|--|---------------------------------------------|
|                                                               | (a)<br>Business<br>code | (b)<br>Amount             | (c)<br>Exclu-<br>sion<br>code | (d)<br>Amount                        |  |                                             |
| 1 Program service revenue:                                    |                         |                           |                               |                                      |  |                                             |
| a _____                                                       |                         |                           |                               |                                      |  |                                             |
| b _____                                                       |                         |                           |                               |                                      |  |                                             |
| c _____                                                       |                         |                           |                               |                                      |  |                                             |
| d _____                                                       |                         |                           |                               |                                      |  |                                             |
| e _____                                                       |                         |                           |                               |                                      |  |                                             |
| f _____                                                       |                         |                           |                               |                                      |  |                                             |
| g Fees and contracts from government agencies                 |                         |                           |                               |                                      |  |                                             |
| 2 Membership dues and assessments                             |                         |                           |                               |                                      |  |                                             |
| 3 Interest on savings and temporary cash<br>investments       |                         |                           | 14                            | 22.                                  |  |                                             |
| 4 Dividends and interest from securities                      |                         |                           | 14                            | 36,023.                              |  |                                             |
| 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<br>property       |                         |                           |                               |                                      |  |                                             |
| 7 Other investment income                                     |                         |                           |                               |                                      |  |                                             |
| 8 Gain or (loss) from sales of assets other<br>than inventory |                         |                           |                               |                                      |  | 59,867.                                     |
| 9 Net income or (loss) from special events                    |                         |                           |                               |                                      |  |                                             |
| 10 Gross profit or (loss) from sales of inventory             |                         |                           |                               |                                      |  |                                             |
| 11 Other revenue:                                             |                         |                           |                               |                                      |  |                                             |
| a _____                                                       |                         |                           |                               |                                      |  |                                             |
| b _____                                                       |                         |                           |                               |                                      |  |                                             |
| c _____                                                       |                         |                           |                               |                                      |  |                                             |
| d _____                                                       |                         |                           |                               |                                      |  |                                             |
| e _____                                                       |                         |                           |                               |                                      |  |                                             |
| 12 Subtotal Add columns (b), (d), and (e)                     |                         | 0.                        |                               | 36,045.                              |  | 59,867.                                     |
| 13 Total Add line 12, columns (b), (d), and (e)               |                         |                           |                               |                                      |  | 95,912.                                     |

(See worksheet in line 13 instructions to verify calculations.)

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

[illegible]

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

- |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  |     |    |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|-----|----|
| <p><b>1</b> Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?</p> <p><b>a</b> Transfers from the reporting foundation to a noncharitable exempt organization of:</p> <p><b>(1)</b> Cash</p> <p><b>(2)</b> Other assets</p> <p><b>b</b> Other transactions:</p> <p><b>(1)</b> Sales of assets to a noncharitable exempt organization</p> <p><b>(2)</b> Purchases of assets from a noncharitable exempt organization</p> <p><b>(3)</b> Rental of facilities, equipment, or other assets</p> <p><b>(4)</b> Reimbursement arrangements</p> <p><b>(5)</b> Loans or loan guarantees</p> <p><b>(6)</b> Performance of services or membership or fundraising solicitations</p> <p><b>c</b> Sharing of facilities, equipment, mailing lists, other assets, or paid employees</p> <p><b>d</b> If the answer to any of the above is "Yes," complete the following schedule. Column <b>(b)</b> should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column <b>(d)</b> the value of the goods, other assets, or services received.</p> |  | Yes | No |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  |     |    |
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|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  |     |    |

[illegible]

- 2a** Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? ☐ Yes ☒ No
- b** If "Yes," complete the following schedule.

| (a) Name of organization | (b) Type of organization | (c) Description of relationship |
|--------------------------|--------------------------|---------------------------------|
| <b>N/A</b>               |                          |                                 |
|                          |                          |                                 |
|                          |                          |                                 |
|                          |                          |                                 |

|                        |                                                                                                                                                                                                                                                                                                                        |                      |                  |                                                 |                                                                                                                                                    |
|------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------|------------------|-------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------|
| Sign Here              | Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge. |                      |                  |                                                 | May the IRS discuss this return with the preparer shown below (see instr.)?<br><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |
|                        | <br>Signature of officer or trustee                                                                                                                                                                                                 | 1/13/14<br>Date      | Trustee<br>Title |                                                 |                                                                                                                                                    |
| Paid Preparer Use Only | Print/Type preparer's name                                                                                                                                                                                                                                                                                             | Preparer's signature | Date             | Check <input type="checkbox"/> if self-employed | PTIN                                                                                                                                               |
|                        | MARK SCOTT, JD, LL                                                                                                                                                                                                                                                                                                     | MARK SCOTT, JD, L    | 01/09/14         |                                                 | P01359724                                                                                                                                          |
|                        | Firm's name ▶ MARK SCOTT & ASSOCIATES, PA                                                                                                                                                                                                                                                                              |                      |                  | Firm's EIN ▶ 58-2677234                         |                                                                                                                                                    |
|                        | Firm's address ▶ 2265 SECOFFEE TERRACE<br>COCONUT GROVE, FL 33133                                                                                                                                                                                                                                                      |                      |                  | Phone no. 305.860.9432                          |                                                                                                                                                    |

**BENJAMIN & SOPHIE SCHER  
CHARITABLE FOUNDATION**

13-3965996

Form **990-W**

**Estimated Tax on Unrelated Business Taxable  
Income for Tax-Exempt Organizations**

OMB No. 1545-0976

(Worksheet)  
Department of the Treasury  
Internal Revenue Service

(and on Investment Income for Private Foundations) **FORM 990-PF**  
(Keep for your records. Do not send to the Internal Revenue Service.)

**2013**

|     |                                                                                                                                                                                               |     |      |
|-----|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|------|
| 1   | Unrelated business taxable income expected in the tax year                                                                                                                                    | 1   |      |
| 2   | Tax on the amount on line 1. See instructions for tax computation                                                                                                                             | 2   |      |
| 3   | Alternative minimum tax (see instructions)                                                                                                                                                    | 3   |      |
| 4   | Total. Add lines 2 and 3                                                                                                                                                                      | 4   |      |
| 5   | Estimated tax credits (see instructions)                                                                                                                                                      | 5   |      |
| 6   | Subtract line 5 from line 4                                                                                                                                                                   | 6   |      |
| 7   | Other taxes (see instructions)                                                                                                                                                                | 7   |      |
| 8   | Total. Add lines 6 and 7                                                                                                                                                                      | 8   |      |
| 9   | Credit for federal tax paid on fuels (see instructions)                                                                                                                                       | 9   |      |
| 10a | Subtract line 9 from line 8. <b>Note.</b> If less than \$500, the organization is not required to make estimated tax payments. Private foundations, see instructions                          | 10a |      |
| 10b | Enter the tax shown on the 2012 return (see instructions). <b>Caution.</b> If zero or the tax year was for less than 12 months, skip this line and enter the amount from line 10a on line 10c | 10b | 611. |
| 10c | <b>2013 Estimated Tax.</b> Enter the smaller of line 10a or line 10b. If the organization is required to skip line 10b, enter the amount from line 10a on line 10c                            | 10c | 640. |

**ADJUSTED TO**

|    |                                                                                                                                                                                                                                          | (a) | (b)      | (c)      | (d)      |          |
|----|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|----------|----------|----------|----------|
| 11 | Installment due dates (see instructions)                                                                                                                                                                                                 | 11  | 01/15/14 | 02/18/14 | 05/15/14 | 08/15/14 |
| 12 | Required installments. Enter 25% of line 10c in columns (a) through (d) unless the organization uses the annualized income installment method, the adjusted seasonal installment method, or is a "large organization" (see instructions) | 12  | 160.     | 160.     | 160.     | 160.     |
| 13 | 2012 Overpayment (see instructions)                                                                                                                                                                                                      | 13  |          |          |          |          |
| 14 | Payment due. (Subtract line 13 from line 12.)                                                                                                                                                                                            | 14  | 160.     | 160.     | 160.     | 160.     |

LHA For Paperwork Reduction Act Notice, see instructions.

Form **990-W** (2013)

**BENJAMIN & SOPHIE SCHER  
CHARITABLE FOUNDATION**

13-3965996

**Part XV. Supplementary Information**

| <b>3 Grants and Contributions Paid During the Year (Continuation)</b>                                       |                                                                                                                    |                                      |                                     |                |
|-------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------|--------------------------------------|-------------------------------------|----------------|
| Recipient<br>Name and address (home or business)                                                            | If recipient is an individual,<br>show any relationship to<br>any foundation manager<br>or substantial contributor | Foundation<br>status of<br>recipient | Purpose of grant or<br>contribution | Amount         |
| HABITAT FOR HUMANITY<br>121 HABITAT STREET<br>AMERICUS, GA 31709                                            | N/A                                                                                                                | PUBLIC CHARITY                       | GENERAL OPERATIONS                  |                |
| HORSEABILITY<br>238 ROUND SWAMP RD<br>MELVILLE, NY 11747                                                    | N/A                                                                                                                | PUBLIC CHARITY                       | GENERAL OPERATIONS                  | 4,000.         |
| INTERNATIONAL COMMITTEE OF THE RED<br>CROSS<br>19 AVENUE DE LA PAIX CH 1202<br>GENEVA, SWITZERLAND          | N/A                                                                                                                | PUBLIC CHARITY                       | GENERAL OPERATIONS                  | 8,000.         |
| JR. GOLF FOUNDATION OF AMERICA                                                                              | N/A                                                                                                                | PUBLIC CHARITY                       | GENERAL OPERATIONS                  |                |
| JUVENILE DIABETES RESEARCH FOUNDATION<br>120 WALL STREET, 19TH FLOOR<br>NEW YORK, NY 10005                  | N/A                                                                                                                | PUBLIC CHARITY                       | GENERAL OPERATIONS                  |                |
| MAKE A WISH FOUNDATION OF AMERICA<br>3550 NORTH CENTRAL AVENUE, SUITE 300<br>PHOENIX, AZ 850152127          | N/A                                                                                                                | PUBLIC CHARITY                       | GENERAL OPERATIONS                  | 1,000.         |
| NATIONAL FOUNDATION FOR CANCER<br>RESEARCH<br>4600 EAST WEST HIGHWAY, SUITE 525<br>BETHESDA, MD 20814       | N/A                                                                                                                | PUBLIC CHARITY                       | GENERAL OPERATIONS                  |                |
| OXFAM AMERICA<br>26 WEST STREET<br>BOSTON, MA 02111                                                         | N/A                                                                                                                | PUBLIC CHARITY                       | GENERAL OPERATIONS                  | 8,000.         |
| PEACE HOUSE ASSOCIATION<br>2912 N ROBINSON AVENUE<br>OKLAHOMA CITY, OK 73103-4123                           | N/A                                                                                                                | PUBLIC CHARITY                       | GENERAL OPERATIONS                  |                |
| PLAY FOR PINK-THE BREAST CANCER<br>RESEARCH FOUNDATION<br>60 EAST 56TH STREET, 8TH FL<br>NEW YORK, NY 10022 | N/A                                                                                                                | PUBLIC CHARITY                       | GENERAL OPERATIONS                  |                |
| <b>Total from continuation sheets</b>                                                                       |                                                                                                                    |                                      |                                     | <b>25,000.</b> |

223631  
05-01-12

**BENJAMIN & SOPHIE SCHER  
CHARITABLE FOUNDATION**

13-3965996

**Part XV: Supplementary Information**

**3 Grants and Contributions Paid During the Year (Continuation)**

| Recipient<br>Name and address (home or business)                                                                | If recipient is an individual,<br>show any relationship to<br>any foundation manager<br>or substantial contributor | Foundation<br>status of<br>recipient | Purpose of grant or<br>contribution | Amount |
|-----------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------|--------------------------------------|-------------------------------------|--------|
| SPECIAL OLYMPICS<br>1133 19TH STREET, N.W.<br>WASHINGTON, DC 20036                                              | N/A                                                                                                                | PUBLIC CHARITY                       | GENERAL OPERATIONS                  | 2,000. |
| THE LEUKEMIA AND LYMPHOMA SOCIETY<br>1311 MAMARONECK AVENUE, SUITE 310<br>WHITE PLAINS, NY 10605                | N/A                                                                                                                | PUBLIC CHARITY                       | GENERAL OPERATIONS                  |        |
| THE MIAMI PROJECT TO CURE PARALYSIS<br>PO BOX 016960 (R48)<br>MIAMI, FL 331016960                               | N/A                                                                                                                | PUBLIC CHARITY                       | GENERAL OPERATIONS                  | 2,000. |
| UJA FEDERATION OF NEW YORK<br>130 EAST 59TH ST., SUITE 556<br>NEW YORK, NY 10002                                | N/A                                                                                                                | PUBLIC CHARITY                       | GENERAL OPERATIONS                  |        |
| UTAH OPEN LANDS CONSERVATION<br>ASSOCIATION INC<br>2188 HIGHLAND DR, SUITE 203<br>SALT LAKE CITY, UT 84106-2804 | N/A                                                                                                                | PUBLIC CHARITY                       | GENERAL OPERATIONS                  |        |
|                                                                                                                 |                                                                                                                    |                                      |                                     |        |
|                                                                                                                 |                                                                                                                    |                                      |                                     |        |
|                                                                                                                 |                                                                                                                    |                                      |                                     |        |
|                                                                                                                 |                                                                                                                    |                                      |                                     |        |
|                                                                                                                 |                                                                                                                    |                                      |                                     |        |
|                                                                                                                 |                                                                                                                    |                                      |                                     |        |
|                                                                                                                 |                                                                                                                    |                                      |                                     |        |
|                                                                                                                 |                                                                                                                    |                                      |                                     |        |
| <b>Total from continuation sheets</b>                                                                           |                                                                                                                    |                                      |                                     |        |

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**FORM 990-PF INTEREST ON SAVINGS AND TEMPORARY CASH INVESTMENTS STATEMENT 1**


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| SOURCE                                         | AMOUNT |
|------------------------------------------------|--------|
| WELLS FARGO                                    | 22.    |
| TOTAL TO FORM 990-PF, PART I, LINE 3, COLUMN A | 22.    |

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**FORM 990-PF DIVIDENDS AND INTEREST FROM SECURITIES STATEMENT 2**


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| SOURCE                           | GROSS AMOUNT | CAPITAL GAINS<br>DIVIDENDS | COLUMN (A)<br>AMOUNT |
|----------------------------------|--------------|----------------------------|----------------------|
| TD AMERITRADE                    | 36,023.      | 0.                         | 36,023.              |
| TOTAL TO FM 990-PF, PART I, LN 4 | 36,023.      | 0.                         | 36,023.              |

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**FORM 990-PF ACCOUNTING FEES STATEMENT 3**


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| DESCRIPTION                  | (A)<br>EXPENSES<br>PER BOOKS | (B)<br>NET INVEST-<br>MENT INCOME | (C)<br>ADJUSTED<br>NET INCOME | (D)<br>CHARITABLE<br>PURPOSES |
|------------------------------|------------------------------|-----------------------------------|-------------------------------|-------------------------------|
| ACCOUNTING FEES              | 4,255.                       | 2,128.                            |                               | 0.                            |
| TO FORM 990-PF, PG 1, LN 16B | 4,255.                       | 2,128.                            |                               | 0.                            |

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**FORM 990-PF TAXES STATEMENT 4**


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| DESCRIPTION                 | (A)<br>EXPENSES<br>PER BOOKS | (B)<br>NET INVEST-<br>MENT INCOME | (C)<br>ADJUSTED<br>NET INCOME | (D)<br>CHARITABLE<br>PURPOSES |
|-----------------------------|------------------------------|-----------------------------------|-------------------------------|-------------------------------|
| NYS DEPARTMENT OF LAW       | 250.                         | 0.                                |                               | 0.                            |
| TO FORM 990-PF, PG 1, LN 18 | 250.                         | 0.                                |                               | 0.                            |

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|             |                |           |   |
|-------------|----------------|-----------|---|
| FORM 990-PF | OTHER EXPENSES | STATEMENT | 5 |
|-------------|----------------|-----------|---|

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| DESCRIPTION                 | (A)<br>EXPENSES<br>PER BOOKS | (B)<br>NET INVEST-<br>MENT INCOME | (C)<br>ADJUSTED<br>NET INCOME | (D)<br>CHARITABLE<br>PURPOSES |
|-----------------------------|------------------------------|-----------------------------------|-------------------------------|-------------------------------|
| OFFICE SUPPLIES             | 2,431.                       | 0.                                |                               | 0.                            |
| TO FORM 990-PF, PG 1, LN 23 | 2,431.                       | 0.                                |                               | 0.                            |

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|             |                 |           |   |
|-------------|-----------------|-----------|---|
| FORM 990-PF | CORPORATE STOCK | STATEMENT | 6 |
|-------------|-----------------|-----------|---|

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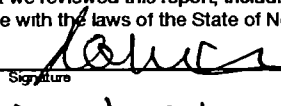
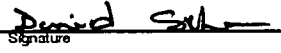
| DESCRIPTION                             | BOOK VALUE | FAIR MARKET<br>VALUE |
|-----------------------------------------|------------|----------------------|
| TD AMERITRADE                           | 767,517.   | 1,084,517.           |
| TOTAL TO FORM 990-PF, PART II, LINE 10B | 767,517.   | 1,084,517.           |

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|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Form CHAR500</b><br><br><small>This form used for Article 7-A, EPTL and dual filers (replaces forms CHAR 497, CHAR 010 and CHAR 006)</small>                                                                                                                                                                  | <b>Annual Filing for Charitable Organizations</b><br>New York State Department of Law (Office of the Attorney General)<br>Charities Bureau - Registration Section<br>120 Broadway<br>New York, NY 10271<br><a href="http://www.charitiesnys.com">http://www.charitiesnys.com</a>                 | <b>2012</b><br><br><b>Open to Public Inspection</b>                                                                                                                           |
| <b>1. General Information</b>                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                               |
| a. For the fiscal year beginning (mm/dd/yyyy) <b>09/01/2012</b> and ending (mm/dd/yyyy) <b>08/31/2013</b>                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                               |
| b. Check if applicable for NYS:<br><input type="checkbox"/> Address change<br><input type="checkbox"/> Name change<br><input type="checkbox"/> Initial filing<br><input checked="" type="checkbox"/> Final filing<br><input type="checkbox"/> Amended filing<br><input type="checkbox"/> NY registration pending | c. Name of organization<br><b>BENJAMIN &amp; SOPHIE SCHER CHARITABLE FOUNDATION</b><br><br>Number and street (or P.O. box if mail not delivered to street address) Room/suite<br><b>4380 JAMES ESTATE COURT</b><br><br>City or town, state or country and ZIP + 4<br><b>WELLINGTON, FL 33449</b> | d. Fed employer ID no (EIN)<br><b>13-3965996</b><br><br>e. NY State registration no<br><b>EPTL 07-00-04</b><br><br>f. Telephone number<br><b>561 969-3674</b><br><br>g. Email |

|                                                                                                                                                                                                                                                                |                                                                                                               |                                             |                                 |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------|---------------------------------------------|---------------------------------|
| <b>2. Certification - Two Signatures Required</b>                                                                                                                                                                                                              |                                                                                                               |                                             |                                 |
| We certify under penalties of perjury that we reviewed this report, including all attachments, and to the best of our knowledge and belief, they are true, correct and complete in accordance with the laws of the State of New York applicable to this report |                                                                                                               |                                             |                                 |
| a. President or Authorized Officer                                                                                                                                                                                                                             | <br><small>Signature</small> | Robert Scher<br><small>Printed Name</small> | Trustee<br><small>Title</small> |
|                                                                                                                                                                                                                                                                |                                                                                                               |                                             | 1/13/14<br><small>Date</small>  |
| b. Chief Financial Officer or Treas.                                                                                                                                                                                                                           | <br><small>Signature</small> | David Scher<br><small>Printed Name</small>  | Trustee<br><small>Title</small> |
|                                                                                                                                                                                                                                                                |                                                                                                               |                                             | 1/13/14<br><small>Date</small>  |

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |  |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| <b>3. Annual Report Exemption Information</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |  |
| a. <b>Article 7-A annual report exemption</b> (Article 7-A registrants and dual registrants)<br>Check <input type="checkbox"/> if total contributions from NY State (including residents, foundations, corporations, government agencies, etc.) did not exceed \$25,000 <u>and</u> the organization did not engage a professional fund raiser (PFR) or fund raising counsel (FRC) to solicit contributions during this fiscal year.<br><br><b>NOTE:</b> An organization may claim this exemption if no PFR or FRC was used <u>and</u> either: 1) it received an allocation from a federated fund, United Way or incorporated community appeal <u>and</u> contributions from other sources did not exceed \$25,000 <u>or</u> 2) it received all or substantially all of its contributions from one government agency to which it submitted an annual report similar to that required by Article 7-A. |  |
| b. <b>EPTL annual report exemption</b> (EPTL registrants and dual registrants)<br>Check <input type="checkbox"/> if gross receipts did not exceed \$25,000 <u>and</u> assets (market value) did not exceed \$25,000 at any time during this fiscal year                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |  |
| For EPTL or Article 7-A registrants claiming the annual report exemption under the one law under which they are registered and for dual registrants claiming the annual report exemptions under both laws, simply complete part 1 (General Information), part 2 (Certification) and part 3 (Annual Report Exemption Information) above.<br><b>Do not submit a fee, do not complete the following schedules and do not submit any attachments to this form</b>                                                                                                                                                                                                                                                                                                                                                                                                                                       |  |

|                                                                                                                                                                                    |                                                                      |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------|
| <b>4. Article 7-A Schedules</b>                                                                                                                                                    |                                                                      |
| If you did not check the Article 7-A annual report exemption above, complete the following for this fiscal year:                                                                   |                                                                      |
| a. Did the organization use a professional fund raiser, fund raising counsel or commercial co-venturer for fund raising activity in NY State?<br>* If "Yes", complete Schedule 4a. | <input type="checkbox"/> Yes* <input checked="" type="checkbox"/> No |
| b. Did the organization receive government contributions (grants)?<br>* If "Yes", complete Schedule 4b.                                                                            | <input type="checkbox"/> Yes* <input checked="" type="checkbox"/> No |

|                                                                                            |                |
|--------------------------------------------------------------------------------------------|----------------|
| <b>5. Fee Submitted: See last page for summary of fee requirements</b>                     |                |
| Indicate the filing fee(s) you are submitting along with this form:                        |                |
| a. Article 7-A filing fee                                                                  | \$             |
| b. EPTL filing fee                                                                         | \$ <u>250.</u> |
| c. Total fee                                                                               | \$ <u>250.</u> |
| Submit only one check or money order for the total fee, payable to "NYS Department of Law" |                |

|                                                                                                                                                  |
|--------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>6. Attachments - For organizations that are not claiming annual report exemptions under both laws, see last page for required attachments</b> |
|--------------------------------------------------------------------------------------------------------------------------------------------------|

# BENJAMIN & SOPHIE SCHER CHARITABLE FOUNDATION

## 5. Fee Instructions

The filing fee depends on the organization's Registration Type. For details on Registration Type and filing fees, see the Instructions for Form CHAR500

### Organization's Registration Type Fee Instructions

- Article 7-A Calculate the Article 7-A filing fee using the table in part a below. The EPTL filing fee is \$0
- EPTL Calculate the EPTL filing fee using the table in part b below. The Article 7-A filing fee is \$0
- Dual Calculate both the Article 7-A and EPTL filing fees using the tables in parts a and b below. Add the Article 7-A and EPTL filing fees together to calculate the total fee. Submit a single check or money order for the total fee

#### a) Article 7-A filing fee

| Total Support & Revenue | Article 7-A Fee |
|-------------------------|-----------------|
| more than \$250,000     | \$25            |
| up to \$250,000 *       | \$10            |

\* Any organization that contracted with or used the services of a professional fund raiser (PFR) or fund raising counsel (FRC) during the reporting period must pay an Article 7-A filing fee of \$25, regardless of total support and revenue.

#### b) EPTL filing fee

| Net Worth at End of Year                         | EPTL Fee |
|--------------------------------------------------|----------|
| Less than \$50,000                               | \$25     |
| \$50,000 or more, but less than \$250,000        | \$50     |
| \$250,000 or more, but less than \$1,000,000     | \$100    |
| \$1,000,000 or more, but less than \$10,000,000  | \$250    |
| \$10,000,000 or more, but less than \$50,000,000 | \$750    |
| \$50,000,000 or more                             | \$1500   |

## 6. Attachments - Document Attachment Check-List

Check the boxes for the documents you are attaching.

### For All Filers

#### Filing Fee

- ☒ Single check or money order payable to "NYS Department of Law"

#### Copies of Internal Revenue Service Forms

- |                                                                        |                                                                        |                                                                        |
|------------------------------------------------------------------------|------------------------------------------------------------------------|------------------------------------------------------------------------|
| <input type="checkbox"/> IRS Form 990                                  | <input type="checkbox"/> IRS Form 990-EZ                               | <input checked="" type="checkbox"/> IRS Form 990-PF                    |
| <input type="checkbox"/> All required schedules (including Schedule B) | <input type="checkbox"/> All required schedules (including Schedule B) | <input type="checkbox"/> All required schedules (including Schedule B) |
| <input type="checkbox"/> IRS Form 990-T                                | <input type="checkbox"/> IRS Form 990-T                                | <input type="checkbox"/> IRS Form 990-T                                |

### Additional Article 7-A Document Attachment Requirement

#### Independent Accountant's Report

- ☐ Audit Report (total support & revenue more than \$250,000)
- ☐ Review Report (total support & revenue \$100,001 to \$250,000)
- ☐ No Accountant's Report Required (total support & revenue not more than \$100,000)