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Form **990-PF**

Return of Private Foundation

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

OMB No. 1545-0052 2013

Department of the Treasury
Internal Revenue Service

For calendar year 2013 or tax year beginning

SCANNED NOV 2 6 2014

► Do not enter Social Security numbers on this form as it may be made public Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf.

and ending

Nar	ne of	foundation				A Employer identification	number
т	u c	SCHECHTER FAMILY FOUND	∆ T ∩ NI			04-3339430	
		nd street (or P O box number if mail is not delivered to street			Room/suite	B Telephone number	
		ROBIN ROAD	u		, , , , , , , , , , , , , , , , , , , ,	781-647-98	19
City	or to	own, state or province, country, and ZIP or foreign p	ostal code		·	C If exemption application is p	
_W	ES	TON, MA 02493-2436					
G (heck	all that apply Initial return	Initial return of a fo	rmer public (charity	D 1 Foreign organizations	s, check here
		Final return	Amended return				
		Address change	Name change			2 Foreign organizations me check here and attach co	enting the 85% test, emputation
H C	heck	type of organization: X Section 501(c)(3) ex	empt private foundation			E If private foundation sta	tus was terminated
] Se	ction 4947(a)(1) nonexempt charitable trust	Other taxable private founda	tion		under section 507(b)(1)	(A), check here
I Fa	ır ma	arket value of all assets at end of year J Accounti	ng method X Cash	Accr	ual	F If the foundation is in a	60-month termination
(fr	om I		her (specify)			under section 507(b)(1)	
	\$	549,557. (Part I, colu	mn (d) must be on cash b	oasis)			
Pa	rt I	Analysis of Revenue and Expenses (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		vestment ome	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
-	1	Contributions, gifts, grants, etc., received	96,090.			N/A	
	2	Check If the foundation is not required to attach Sch B					
	3	Interest on savings and temporary	1.		1.		STATEMENT 1
3 cash investments 4 Dividends and interest from securities			7,831.		7,831.		STATEMENT 2
	•	Gross rents	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
		Net rental income or (loss)			• • • • • • • • • • • • • • • • • • • •		
	_	Net gain or (loss) from sale of assets not on line 10	-1,878.				
Jue	b	Gross sales price for all assets on line 6a 78,621.					
Revenue	7	Capital gain net income (from Part IV, line 2)			0.		EIVEU ,
	8	Net short-term capital gain					le i
	9	Income modifications				Q NOV 1	7 2014 19
	10a	Gross sales less returns and allowances				90	(0)
		Less Cost of goods sold				000	
		Gross profit or (loss)					EN, UT
	11	Other income					
	12	Total Add lines 1 through 11	102,044.		7,832.		
	13	Compensation of officers, directors, trustees, etc	0.		0.		0.
	14	Other employee salaries and wages					
	15	Pension plans, employee benefits					
nses	16a	Legal fees					
	b	Accounting fees STMT 3	2,369.		0.		0.
Ä	C	Other professional fees					
Š	17	Interest	_				
and Administrative Expe	18	Taxes STMT 4	338.		171.		0.
ist	19	Depreciation and depletion					
Ē	20	Occupancy					
¥	21	Travel, conferences, and meetings					
and	22	Printing and publications					ļ -
ğ	23	Other expenses STMT 5	125.		<u>55.</u>		70.
aţį	24	Total operating and administrative					
Operating		expenses Add lines 13 through 23	2,832.		226.		70.
0	25	Contributions, gifts, grants paid	99,650.				99,650.
	26	Total expenses and disbursements					
		Add lines 24 and 25	102,482.	.,	226.	_	99,720.
	27	Subtract line 26 from line 12.					
	a	Excess of revenue over expenses and disbursements	-438.				
	Ь	Net investment income (if negative, enter -0-)			7,606.		
	c	Adjusted net income (if negative, enter -0-)				N/A	

323501 10-10-13 LHA For Paperwork Reduction Act Notice, see instructions

For	m 99	0-PF (2013) THE SCHECHTER FAMILY FO	UNDATION	04	3339430 Page 2
a	art	Balance Sheets Attached schedules and amounts in the description	Beginning of year	End of	
	arı	column should be for end-of-year amounts only	(a) Book Value		(c) Fair Market Value
	1	*Cash - non-interest-bearing	22,661.	2,970.	2,970.
	2	Savings and temporary cash investments			
	3	Accounts receivable ►			
		Less: allowance for doubtful accounts ▶			
	4	Pledges receivable ▶			
		Less: allowance for doubtful accounts ▶			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons			
	7	Other notes and loans receivable			
		Less: allowance for doubtful accounts ▶		•	
ts	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
Ÿ	10a	Investments - U.S. and state government obligations			
	Ь	Investments - corporate stock STMT 6	371,715.	390,968.	<u>546,587.</u>
	С	Investments - corporate bonds			
	11	Investments land, buildings, and equipment basis			
		Less accumulated depreciation		_	
	12	Investments - mortgage loans			
	13	Investments - other			
	14	Land, buildings, and equipment: basis ▶			
		Less accumulated depreciation			
	15	Other assets (describe ►)			
	16	Total assets (to be completed by all filers - see the			
		instructions. Also, see page 1, item 1)	394,376.	393,938.	<u>549,557.</u>
	17	Accounts payable and accrued expenses			
	18	Grants payable			
S	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
iabi	21	Mortgages and other notes payable			
	22	Other liabilities (describe 🕨)			
_	23	Total liabilities (add lines 17 through 22)	0.	0.	
		Foundations that follow SFAS 117, check here			
"		and complete lines 24 through 26 and lines 30 and 31.			
Net Assets or Fund Balances	24	Unrestricted	394,376.	393,938.	
lan	25	Temporarily restricted			
Ba	26	Permanently restricted			
Pun		Foundations that do not follow SFAS 117, check here			
Ē		and complete lines 27 through 31			
tso	27	Capital stock, trust principal, or current funds			
sset	28	Paid-in or capital surplus, or land, bldg., and equipment fund			
ξ	29	Retained earnings, accumulated income, endowment, or other funds			
Š	30	Total net assets or fund balances	394,376.	393,938.	
	31	Total liabilities and net assets/fund balances	394,376.	393,938.	
P	art	Analysis of Changes in Net Assets or Fund B	alances		
1	Tota	net assets or fund balances at beginning of year - Part II, column (a), line	30		
		st agree with end-of-year figure reported on prior year's return)		1	394,376.
2		r amount from Part I, line 27a		2	-438.
		r increases not included in line 2 (itemize)		3	0.
		lines 1, 2, and 3		4	393,938.
		eases not included in line 2 (itemize)		5	0.
		net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	olumn (b), line 30	6	393,938.
_					Form 990-PF (2013)

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	2009	122,248.	417,163.		.293046
_	2008	110,375.	576,072.		.191599
2	Total of line 1, column (d)			2	1.187130
3	Average distribution ratio for the 5-year base pe the foundation has been in existence if less than		,	3	.237426
4	Enter the net value of noncharitable-use assets	for 2013 from Part X, line 5	_	4	456,119.
5	Multiply line 4 by line 3			5	108,295.
6	Enter 1% of net investment income (1% of Part	l, line 27b)	_	6	76.
7	Add lines 5 and 6			7	108,371.
8	Enter qualifying distributions from Part XII, line	4		8	99,720.

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

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1a

b C ď

b C d

b C d

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See the Part VI instructions.

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Pa	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or	1948	- see i	nstru	ctio	าร)
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1					
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)					
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1%	1			1	52.
	of Part I, line 27b					
C	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col. (b).	1				
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2				0.
	Add lines 1 and 2	3			1	52.
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			1	52.
6	Credits/Payments:					
а	2013 estimated tax payments and 2012 overpayment credited to 2013 6a 70	.]				
	Exempt foreign organizations - tax withheld at source 6b	7				
	Tax paid with application for extension of time to file (Form 8868) 6c]				
	Backup withholding erroneously withheld 6d 6d	7				
	Total credits and payments Add lines 6a through 6d	7				70.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8				
	Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed	9				82.
10	Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10			•	
	Enter the amount of line 10 to be: Credited to 2014 estimated tax	11				
	rt VII-A Statements Regarding Activities	•				
L	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or interven	e in			Yes	No
	any political campaign?			1a		Х
h	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition	1)?		1b		Х
_	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials publish					
	distributed by the foundation in connection with the activities					
C	Did the foundation file Form 1120-POL for this year?			1c		Х
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:					
_	(1) On the foundation ▶ \$ 0 . (2) On foundation managers. ▶ \$ 0					1
۵	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation	_				1
·	managers. ►\$ 0.					1
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?			2		x
-	If "Yes," attach a detailed description of the activities					
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation,	or		;		1
Ŭ	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	-		3		x
42	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			4a		X
	If "Yes," has it filed a tax return on Form 990-T for this year?	N	I/A	4b		
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?			5		X
•	If "Yes," attach the statement required by General Instruction T					
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:					
•	By language in the governing instrument, or					
	 By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the sta 	e law				
	remain in the governing instrument?			6	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part X	V		7	X	
•	The the foundation hard at least \$6,000 in account at any time during the year. The first term, early term (27), and the account at the first term (27), and the account at the first term (27).	•				<u> </u>
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)					ĺ
Vā	MA					1
h	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)		 -			1
,	of each state as required by General Instruction G? If "No," attach explanation			8ь	Х	1
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for call	endar		<u> </u>		
•	year 2013 or the taxable year beginning in 2013 (see instructions for Part XIV)? If "Yes," complete Part XIV			9		x
10		TMT	. 7	10	Х	
	too, uttering a surrounding the tax year in too, uttering a surround mainly treat mainly addresses			m 990		2013)

orm 990-PF (2013) THE SCHECHTER FAMILY FOU			04-33394	30 Page 6
Part VII-B Statements Regarding Activities for Which 5a During the year did the foundation pay or incur any amount to: (1) Carry on propaganda, or otherwise attempt to influence legislation (section (2) Influence the outcome of any specific public election (see section 4955); or any voter registration drive? (3) Provide a grant to an individual for travel, study, or other similar purposes (4) Provide a grant to an organization other than a charitable, etc., organization 509(a)(1), (2), or (3), or section 4940(d)(2)? (5) Provide for any purpose other than religious, charitable, scientific, literary the prevention of cruelty to children or animals? b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify un section 53 4945 or in a current notice regarding disaster assistance (see instruorganizations relying on a current notice regarding disaster assistance check if the answer is "Yes" to question 5a(4), does the foundation claim exemption the expenditure responsibility for the grant? If "Yes," attach the statement required by Regulations section 53 4946 6a Did the foundation, during the year, receive any funds, directly or indirectly, to a personal benefit contract?	on 4945(e))? or to carry on, directly or indirectly or described in section of the exceptions described fuctions)? there from the tax because it maintates.	ectly, ectly, Ye Ye for Ye in Regulations	S X NO	5b
 b Did the foundation, during the year, pay premiums, directly or indirectly, on a part of the form 8870 7a At any time during the tax year, was the foundation a party to a prohibited tax in the foundation of th	shelter transaction?		s X No	6b X
Part VIII Information About Officers, Directors, Trust Paid Employees, and Contractors List all officers, directors, trustees, foundation managers and their	tees, Foundation Ma	ınagers, Highly	75/ 25	7b
(a) Name and address ROBERT P. SCHECHTER 55 ROBIN ROAD	(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
WESTON, MA 02493 SUSAN P. SCHECHTER 55 ROBIN ROAD	1.00 TRUSTEE 1.00	0.	0.	0.
VESTON, MA 02493	1.00	0.		
Compensation of five highest-paid employees (other than those inc. (a) Name and address of each employee paid more than \$50,000 NONE	(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
Fotal number of other employees paid over \$50,000			•	<u>0</u>

Total. Add lines 1 through 3

	m sour (2013) THE SCHECKTER PARTIES POUNDATION	04 5	7337430 , ago 0
	Minimum Investment Return (All domestic foundations must complete this part. Foreign fou	ndations, se	e instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
a	Average monthly fair market value of securities	1a	447,638.
b	Average of monthly cash balances	1b	15,427.
C	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	463,065.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0 .		
2	Acquisition indebtedness applicable to line 1 assets	2	<u> </u>
3	Subtract line 2 from line 1d	3	463,065.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	6,946.
5	Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and on Part V, line 4	5	456,119.
6	Minimum investment return. Enter 5% of line 5	6	22,806.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are	nd certain	
	foreign organizations check here 🕨 🔲 and do not complete this part)		
1	Minimum investment return from Part X, line 6	1	22,806.
2a	Tax on investment income for 2013 from Part VI, line 5		
b	Income tax for 2013. (This does not include the tax from Part VI)		
C	Add lines 2a and 2b	2c	<u>152.</u>
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	22,654.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	22,654.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	22,654.
P	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	99,720.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the	!	
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	·· ·····
4	Qualifying distributions Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	99,720.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	income. Enter 1% of Part I, line 27b	5	0.
6	Adjusted qualifying distributions Subtract line 5 from line 4	6	99,720.
	Note. The amount on line 6 will be used in Part V. column (h) in subsequent years when calculating whether the foundation	nualifies for th	ne section

4940(e) reduction of tax in those years

Part XIII 'Undistributed Income (see instructions)

•	(a) Corpus	(b) Years prior to 2012	(c) 2012	(d) 2013
1 Distributable amount for 2013 from Part XI,				22 654
line 7				22,654.
2 Undistributed income, if any, as of the end of 2013			0.	
a Enter amount for 2012 only b Total for prior years:				
b rotation prior years.		0.		
3 Excess distributions carryover, if any, to 2013:		- 0.		
a From 2008 110,375.				
b From 2009 122, 248.				
c From 2010 90,800.				
d From 2011 127, 270.				
e From 2012 97,135.				
f Total of lines 3a through e	547,828.			
4 Qualifying distributions for 2013 from				
Part XII, line 4: ► \$ 99,720.				
a Applied to 2012, but not more than line 2a			0.	
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions) **	99,720.			
d Applied to 2013 distributable amount				0.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2013 (If an amount appears in column (d), the same amount must be shown in column (a))	22,654.			22,654.
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	624,894.			
b Prior years' undistributed income. Subtract	024/034:			
line 4b from line 2b		0.		
c Enter the amount of prior years'				
undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b Taxable				
amount - see instructions		0.		
e Undistributed income for 2012. Subtract line		0.		
4a from line 2a. Taxable amount - see instr			0.	
f Undistributed income for 2013. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2014				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2008				
not applied on line 5 or line 7	87,721.			
9 Excess distributions carryover to 2014				
Subtract lines 7 and 8 from line 6a	537,173.			
10 Analysis of line 9:				
a Excess from 2009 122, 248.				
b Excess from 2010 90,800.				
c Excess from 2011 127, 270.				
d Excess from 2012 97, 135.				
e Excess from 2013 99,720.				- 000 55
	** < \$\text{CPF} < \text{CPAPPING}\$	ILINITI Q		Form 990-PF (2013)

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Part XIV Private Operating Fo		LY FOUNDATI structions and Part VII		N/A	-3339430 Paye 10
1 a If the foundation has received a ruling or			7., quodion 0)	N/A	
foundation, and the ruling is effective for					
b Check box to indicate whether the foundation			n contion] 4942(j)(3) or [4942(j)(5)
	Tax year		Prior 3 years	1 4342())(3) UI _ L	<u> </u>
2 a Enter the lesser of the adjusted net	(a) 2013	(b) 2012	(c) 2011	(d) 2010	(e) Total
income from Part I or the minimum	(4) 2010	(0) 2012	(0) 2011	(4) 2010	(0) 10(2)
investment return from Part X for				1	
each year listed					
b 85% of line 2a					
c Qualifying distributions from Part XII,					
line 4 for each year listed					
d Amounts included in line 2c not					
used directly for active conduct of					
exempt activities				-	
e Qualifying distributions made directly					
for active conduct of exempt activities					
Subtract line 2d from line 2c 3 Complete 3a, b, or c for the				-	
alternative test relied upon:					
a "Assets" alternative test - enter					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter					
2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter					
(1) Total support other than gross					
investment income (interest,					
dividends, rents, payments on					
securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public					
and 5 or more exempt					
organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from			· · · · · · · · · · · · · · · · · · ·		· -
an exempt organization					
(4) Gross investment income					
Part XV Supplementary Infor	mation (Comple	te this part only	f the foundation	n had \$5,000 d	or more in assets
at any time during th	ne year-see insti	ructions.)		-	
1 Information Regarding Foundation	n Managers:				
a List any managers of the foundation who	=	than 2% of the total cont	ributions received by th	e foundation before	the close of any tax
year (but only if they have contributed m			Ť		•
SEE STATEMENT 9					
b List any managers of the foundation who other entity) of which the foundation has			or an equally large port	ion of the ownership	of a partnership or
-,	a 10 % or greater interes	J.			
NONE					
2 Information Regarding Contribution Check here ► X if the foundation or	nly makes contributions	to preselected charitable	organizations and does		
the foundation makes gifts, grants, etc. (, c, allu u.
a The name, address, and telephone numb	er or e-mail address of t	he person to whom appli	cations should be addre	essed.	
b The form in which applications should be	e submitted and informa	tion and materials they sh	ould include.		
c Any submission deadlines					
d Any restrictions or limitations on awards	, such as by geographic	al areas, charitable fields,	kınds of institutions, or	other factors:	
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Total

<u>0</u>

▶ 3b

(a) Business code	usiness income (b) Amount	(c) Exclusion code	(d) Amount	(e) Related or exempt function income
Code				
				
		+ + -	1	
		1 1		
		1		
		+		
<u>{</u>		+ + -		
		+		
		+ + -		· · · · · · · · · · · · · · · · · · ·
		1 1		
			7 021	
		14	/,831.	
		+		
		18	1,878.	
		\bot		
	0.	<u>. </u>		
			13	5,954
			···	
o the Accom	plishment of E	xempt Pı	ırposes	
		A contributed	importantly to the accomp	lishment of
by providing funds	ioi sucii purposes).			
				
				
				
				
	me is reported in co	o the Accomplishment of E	me is reported in column (e) of Part XVI-A contributed	18 -1,878. 18 -1,878. 18 -1,878. 18 -1 to the Accomplishment of Exempt Purposes The is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the accomplishment of Exempt Purposes

Part XVII . Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations 1 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? a Transfers from the reporting foundation to a noncharitable exempt organization of: (1) Cash Yes No 1a(1) X

	the code (other man section 50 f(c)(5) organizations) of in section 527, relating to political organizations?		
a	Transfers from the reporting foundation to a noncharitable exempt organization of:		
	(1) Cash	1a(1)	X
	(2) Other assets	1a(2)	X
b	Other transactions:		
	(1) Sales of assets to a noncharitable exempt organization	1b(1)	X
	(2) Purchases of assets from a noncharitable exempt organization	1b(2)	X
	(3) Rental of facilities, equipment, or other assets	1b(3)	X
	(4) Reimbursement arrangements	1b(4)	X
	(5) Loans or loan guarantees	1b(5)	X
	(6) Performance of services or membership or fundraising solicitations	1b(6)	X

c Sharing of facilities, equipment, mailing lists, other assets, or paid employees
d If the answer to any of the above is "Yes," complete the following schedule. Column (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

colu	mn (d)) the value of the goods, o	ther assets, or serv	ices received.						
(a) Line no		(b) Amount involved	(c) Name of	noncharitable	e exempt organiz	ation	(d) Description	on of transfers, transaction	ns, and sharing arrangements	
				N/A						
						· ·				
	<u> </u>									
	<u> </u>	_								
2a Is the	e foun	dation directly or indirectl	y affiliated with, or r	elated to, one	or more tax-exe	mpt organiz	rations described			
ın se	ction	501(c) of the Code (other	than section 501(c)	(3)) or in sect	ion 527?				Yes X	No
b_!f "Ye	es," co	mplete the following sche			···					
		(a) Name of orga	inization		(b) Type of or	ganization		(c) Description of re	lationship	
		N/A								
		· · _ · · · · · · · · · · · · · · · · ·								
									···	
					_					
		penalties of perjury, I declare the first tage of perjury, I declare the first tage of the first tage.							May the IRS discuss this return with the preparer	
Sign Here		//A	MM		1.1.	/			shown below (see instr)?	,
11010	Ĉ:				100 00	PIY	TRUST	RE.	_ X Yes I	No
	Sign	ature of officer or trustee		Dragararia	Date		Title	Check If	PTIN	
		Print/Type preparer's nai	ne	Preparer's s	igilature			self- employed	PIIN	
Paid				K-)	Ŋ	OV - 7 2014	Sell- elliployed	D01060600	
Prepa	ror	RICHARD KL		,					P01268622	
Use O		Firm's name ► FRII	EDWAN LLF					Firm's EIN > 1.	3-1610809	
USE U	· · · · y	Firm's address > 1 0) BACIE D	0077 777	TONILLE CO	T 200				
		Firm's address ► 10				E ∠00			72\ 020 250	^
		EA:	ST_HANOVE	K, NJ	<u>U/936</u>			Phone no. (9	<u>73) 929-350</u>	<u>U_</u>

Part IV Capital Gains and Los	ses for Tax on Investment Income			
	describe the kind(s) of property so ck warehouse; or common stock, 2		(c) Date acquired P - Purchase D - Donation (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a 907.441 ABSOLUT	TE STRATEGIES CL	ASS R	12/26/12	11/20/13
b 868.08 COHEN &	STEERS EMERGMKT	S REAL ESTATE	01/08/08	09/20/13
c 1371.115 DOUBLE	ELINE TOTAL RETU	RN BOND	12/28/11	11/20/13
d 464.29 FMI LARC	SE CAP FUND		12/10/10	09/20/13
e 48.7 FRANKLIN	SOLD AND PREC ME	TALS	11/11/08	07/08/13
1 193.09 FRANKLIN	N GOLD AND PREC	METALS	12/24/07	07/05/13
g 794.13 LOOMIS S	SAYLES STRATEGIC	INC	12/24/07	05/24/13
h 1438.15 RIDGEWO		N		11/20/13
SPDR GOLD TR GO				12/17/13
	ON GLOBAL BOND	CLASS	12/24/07	07/05/13
k CAPITAL GAINS I	DIVIDENDS			
m				
<u>n</u>				
_0				<u> </u>
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)	
a 10,000.		10,036.		-36.
b 7,822.		10,441.		-2,619.
c 14,970.		15,260.		-290.
d 9,680.		7,138.		2,542.
e 751.		1,196.		-445.
f 2,972.		6,647.		<u>-3,675.</u>
g 12,970.		11,724.		1,246.
h 14,970.		15,306.		-336.
1 71.		57.		14.
2,984.		2,694.		290.
k 1,431.				1,431.
1				
m				
n				
Complete only for accets chaying	g gain in column (h) and owned by	the foundation on 12/31/60	(I) I seese (from sol (h)	<u> </u>
Complete only for assets showing		(k) Excess of col (i)	(I) Losses (from col. (h) Gains (excess of col. (h) gain ove) er col. (k).
(i) F.M.V as of 12/31/69	(j) Adjusted basis as of 12/31/69	over col. (j), if any	but not less than "-0-")	
a				-36.
b				-2,619.
C				-290.
d				2,542.
e -				-445.
f				-3,675.
a	-		-	1,246.
h				-336.
1				14.
				290.
k				1,431.
1				
m				
n				
0				
Capital gain net income or (net cap	oital loss) { If gain, also ente	r in Part I, line 7 D-" in Part I, line 7	2	-1,878.
3 Net short-term capital gain or (loss if gain, also enter in Part I, line 8, or	s) as defined in sections 1222(5) ai	, I		
If (loss), enter "-0-" in Part I, line 8			N/A	

3 Grants and Contributions Paid During the Yo		1		
Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	Contribution	7,00000
RENSSELAER POLYTECHNIC INSTITUTE 110 8TH ST. TROY, NY 12180	NONE	PUBLIC	NON-RESTRICTED	1,00
1001, 111 12100				
TEMPLE BETH ELOHIM 10 BETHEL ROAD WELLSLEY, MA 02481	NONE	PUBLIC	NON-RESTRICTED	4,00
JS HOLOCAUST MUSEUM 100 RAOUL WALLENBERG PLACE	NONE	PUBLIC	NON-RESTRICTED	
WASHINGTON, DC 20024				5,00
VILNA SHUL 18 PHILLIPS STREET BOSTON, MA 02114	NONE	PUBLIC	NON-RESTRICTED	6,50
50510N, MA V2114				3,33
WBUR, BOSTON UNIVERSITY 890 COMMONWEALTH AVE.,3RD FL BOSTON, MA 02215	NONE	PUBLIC	NON-RESTRICTED	1,50
COALITION FOR HISPANIC FAMILY SERVICES 315 WYCKOOF AVE	NONE	PUBLIC	NON-RESTRICTED	
BROOKLYN, NY 11237				25
WGBH PUBLIC TELEVISION ONE GUEST ST BOSTON, MA 02135	NONE	PUBLIC	NON-RESTRICTED	2,25
55550N, MN V2155				
HEBREW COLLEGE 160 HERRICK RD NEWTON, MA 02459	NONE	PUBLIC	NON-RESTRICTED	2,30
JEWISH FAMILY AND CHILDREN'S SERVICES 1430 MAIN ST	NONE	PUBLIC	NON-RESTRICTED	
WALTHAM, MA 02451				6,00
FRIENDS OF RINGE & LATIN 459 BROADWAY	NONE	PUBLIC	NON-RESTRICTED	
CAMBRIDGE MA 02318 Total from continuation sheets	.l			49 15

3 Grants and Contributions Paid During the	e Year (Continuation)	·		
Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or	A 4
Name and address (home or business).	any foundation manager or substantial contributor	status of recipient	contribution	Amount
FINE ARTS WORK CENTER	NONE	PUBLIC	NON-RESTRICTED	
24 PEARL ST				
PROVINCETOWN, MA 02657				1,0
PANMASS CHALLENGE	NONE	PUBLIC	NON-RESTRICTED	
77 FOURTH AVENUE				
NEEDHAM, MA 02494				1,0
WE CAN/UNITED WAY	NONE	PUBLIC	NON-RESTRICTED	
51 SLEEPER ST				2
BOSTON, MA 02110			-	
CHAI-COMMUNITY HOUSING FOR ADULT	NONE	PUBLIC '	NON-RESTRICTED	
1430 MAIN ST				
WALTHAM, MA 02451				1,8
JEWISH COMMUNITY CENTERS	NONE	PUBLIC	NON-RESTRICTED	
333 NAHANTON ST				
NEWTON, MA 02459				1,8
BRIDGE BOSTON	NONE	PUBLIC	NON-RESTRICTED	
2 MCLELLAN ST				2.5
DORCHESTER, MA 02121				
BOSTON CHILDREN'S MUSEUM 308 CONGRESS ST	NONE	PUBLIC	NON-RESTRICTED	
BOSTON MA 02110				2,5
WALTHAM BOYS & GIRLS CLUB	NONE	PUBLIC	NON-RESTRICTED	
20 EXCHANGE ST	HONE		KEDIKICIED	
WALTHAM, MA 02115				7.5
HUNTINGTON THEATER	NONE	PUBLIC	NON-RESTRICTED	
264 HUNTINGTON AVE				
BOSTON, MA 02115				5
CHILDREN'S HOSPITAL	NONE	PUBLIC	NON-RESTRICTED	
300 LONGWOOD AVE				1 .
BOSTON, MA 02115 Total from continuation sheets		<u> </u>		1.0

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

Name of the organization

Employer identification number

Т	THE SCHECHTER FAMILY FOUNDATION	04-3339430
Organization type (check		
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a private foundation	
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundation	
	501(c)(3) taxable private foundation	
Note. Only a section 501(General Rule X For an organizati	n is covered by the General Rule or a Special Rule . (c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule of the General Rule and a Special Rule.	
Special Rules	ipiete nants i and ii	
509(a)(1) and 17	1(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the reg 0(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the n (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II	
total contribution	1(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contr ns of more than \$1,000 for use <i>exclusively</i> for religious, charitable, scientific, literary, or ed of cruelty to children or animals Complete Parts I, II, and III	
contributions for If this box is che purpose Do not	1(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributions did not to exclusively for religious, charitable, etc., purposes, but these contributions did not to excked, enter here the total contributions that were received during the year for an exclusive complete any of the parts unless the General Rule applies to this organization because able, etc., contributions of \$5,000 or more during the year	otal to more than \$1,000 <i>ely</i> religious, charitable, etc ,
but it must answer "No" o	n that is not covered by the General Rule and/or the Special Rules does not file Schedule on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Feet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)	

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2013)

Employer identification number

THE SCHECHTER FAMILY FOUNDATION

04-3339430

Part I	Contributors (see instructions) Use duplicate copies of Part I if	additional space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	ROBERT AND SUSAN P. SCHECHTER 55 ROBIN ROAD WESTON, MA 02493	\$96,090.	Person Payroll Noncash X (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		 \$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)

Employer identification number

THE SCHECHTER FAMILY FOUNDATION

04-3339430

art II	Noncash Property (see instructions) Use duplicate copies of Part II if	additional space is needed	
(a) No. from Part i	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	3000 SHARES OF PARAMETRIC TECHNOLOGY CORP. STOCK		
		\$ 96,090.	12/13/13
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	90, 990-EZ, or 990-PF) (

Schodulo B	B (Form 990, 990·EZ, or 990·PF) (2013)		, . Page (
Name of org			Employer identification number				
_							
THE SC Part III	EXClusively religious, charitable, etc., indivivear Complete columns (a) through (e) and the total of exclusively religious, charitable, etc. Use duplicate copies of Part III if additional	dual contributions to section 501(c)(7), e following line entry. For organizations co ., contributions of \$1,000 or less for the y	(8), or (10) organizations that total more than \$1,000 for the ompleting Part III, enter year. (Enter this information once)				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
		(e) Transfer of gift					
	Transferee's name, address, an		Relationship of transferor to transferee				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
	(e) Transfer of gift						
	Transferee's name, address, an		Relationship of transferor to transferee				
(a) No.							
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
		(e) Transfer of gift					
	Transferee's name, address, an	d ZIP + 4	Relationship of transferor to transferee				
(a) No.	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
Part I	(b) rui pose oi giit	(c) Ose of gift	(a) Description of now gire is field				
		(e) Transfer of gift					
İ	Transferee's name address an	d 7ID ± 4	Relationship of transferor to transferee				

FORM 990-PF INTERE	ST ON SAVI	NGS AND TEM	PORARY CASH	INVESTMENTS	STATEMENT
SOURCE		(A REVE PER B	NUE NET	(B) INVESTMENT INCOME	(C) ADJUSTED NET INCOME
FIDELITY			1.	1.	
TOTAL TO PART I, LI	INE 3		1.	1.	,
FORM 990-PF	DIVIDEND	S AND INTER	EST FROM SEC	CURITIES	STATEMENT
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDEND	REVENUI		
FIDELITY	9,262	1,43	1. 7,83	7,83	1.
TO PART I, LINE 4	9,262	1,43	7,83	7,83	1.
FORM 990-PF		ACCOUNTI	NG FEES		STATEMENT
DESCRIPTION		(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		
ACCOUNTING FEES	_	2,369.).	
TO FORM 990-PF, PG	1, LN 16B	2,369.	().	0
FORM 990-PF		TAX	ES		STATEMENT
DESCRIPTION		(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		
			-		
FOREIGN TAXES FEDERAL TAXES		171. 167.	171).	0

FORM 990-PF	OTHER EXPENSES			STATEMENT	5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME			
COMMONWEALTH OF MA - FILING FEE	70.	0.			70.
FIDELITY - INVESTMENT EXPENSES	55.	55.			0.
TO FORM 990-PF, PG 1, LN 23	125.	55.		7	70.
FORM 990-PF	CORPORAT	E STOCK		STATEMENT	6
DESCRIPTION		во	OK VALUE	FAIR MARKET VALUE	?
INVESTMENTS			390,968.	546,58	37.
TOTAL TO FORM 990-PF, PART II	, LINE 10B		390,968.	546,58	7.
	SUBSTANTIA PART VII-A,	L CONTRIBUTOR LINE 10	S	STATEMENT	7
NAME OF CONTRIBUTOR	A DDR	ESS			
ROBERT AND SUSAN SCHECHTER		 OBIN RD ON, MA 02493			

ELECTION UNDER REGULATIONS SECTION STATEMENT FORM 990-PF 53.4942(A)-3(D)(2) TO TREAT EXCESS QUALIFYING DISTRIBUTIONS AS DISTRIBUTIONS OUT OF CORPUS

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

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

FORM 990-PF

PART XV - LINE 1A LIST OF FOUNDATION MANAGERS STATEMENT

NAME OF MANAGER

ROBERT P. SCHECHTER SUSAN P. SCHECHTER

Form **8868**

(Rev January 2014)

Department of the Treasury

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No 1545-1709

internal Heve	enue Service	► Information about Form 886	o and its	instructions is at www irs gov/forn	18868 -	Ĭ	
If you a	are filing for an Aut	omatic 3-Month Extension, comple	te only Pa	art I and check this box		>	X
• If you a	are filing for an Ado	litional (Not Automatic) 3-Month Ex	tension, d	complete only Part II (on page 2 of	this form)		
		SS you have already been granted a				rm 8868.	
Electroni	ic filing (e-file) . Yo	u can electronically file Form 8868 if y	ou need a	a 3-month automatic extension of tir	ne to file (6	6 months for a corp	oration
		or an additional (not automatic) 3-moi					
		ns listed in Part I or Part II with the exc					
	-	which must be sent to the IRS in pap					
		lick on e-file for Charities & Nonprofits		,		•	
Part I		3-Month Extension of Time		submit original (no copies nee	eded).		
A corpora		Form 990-T and requesting an autor					
Part I only	· ·	. •		_	•	>	- 🗆
All other o	corporations (includ	ding 1120-C filers), partnerships, REM	ICs, and t	rusts must use Form 7004 to reques	t an exten	ision of time	
	ome tax returns					er's identifying nu	mber
Type or	Name of exemp	t organization or other filer, see instru-	ctions.		Employer	dentification num	ber (EIN) or
print							, ,
	THE SCHE	CHTER FAMILY FOUNDA	MOITA			04-333943	30
File by the due date for	Number, street,	and room or suite no. If a P.O. box, se	ee instruc	tions.	Social se	curity number (SSI	۷)
filing your	55 ROBIN	•				, ,	,
return See Instructions	City, town or po	st office, state, and ZIP code For a fo	reign add	lress, see instructions.			
	WESTON,		J	,			
	•						
Enter the	Return code for th	e return that this application is for (file	a separa	te application for each return)			0 4
		• • • • • • • • • • • • • • • • • • • •	-				
Application	on		Return	Application			Return
ls For			Code	Is For			Code
Form 990	or Form 990-EZ		01	Form 990-T (corporation)			07
Form 990	-BL		02	Form 1041-A			08
Form 472	0 (ındıvıdual)		03	Form 4720 (other than individual)			09
Form 990	-PF		04	Form 5227			10
Form 990	-T (sec 401(a) or 4	08(a) trust)	05	Form 6069			11
Form 990	·T (trust other than		06	Form 8870			12
		ROBERT & SUSAN					
• The bo	oks are in the care	of ▶ 55 ROBIN ROAD -	- WES	ron, <u>ma</u> 02493			
Teleph	one No > 781	-647-9819		Fax No. 🕨			
		ot have an office or place of business	in the Ur	nited States, check this box			. 🔲
If this is	s for a Group Retu	rn, enter the organization's four digit (Group Exe	emption Number (GEN) I	f this is foi	r the whole group,	check this
ox ▶ [If it is for part	of the group, check this box	and atta	ch a list with the names and EINs of	all memb	ers the extension is	s for
		3-month (6 months for a corporation	required t	to file Form 990-T) extension of time	until		
	AUGUST 15	, 2014 , to file the exempt	organiza	tion return for the organization name	ed above	The extension	
is fo	or the organization'						
▶[X calendar year	2013 or					
▶Ĺ	tax year begin	ning	, an	d ending		_	
							
2 If th	e tax year entered	in line 1 is for less than 12 months, cl	heck reas	on. Initial return III	Final returi	n	
	Change in accou	unting period					
3a If th	is application is for	Forms 990-BL, 990-PF, 990-T, 4720,	or 6069,	enter the tentative tax, less any			
non	refundable credits	See instructions			3a		74.
b If th	is application is for	Forms 990-PF, 990-T, 4720, or 6069	enter any	y refundable credits and			· —
		ts made Include any prior year overp			3b	\$	0.
		t line 3b from line 3a Include your pa					
by_u	ising EFTPS (Electi	ronic Federal Tax Payment System)	See instru	ctions	3c	\$	74.
		make an electronic funds withdrawal			453-EO ar	nd Form 8879-EO fo	or payment

LHA For Privacy Act and Paperwork Reduction Act Notice, see instructions. 323841 12-31-13

Form 8868 (Rev 1-2014)

Form 886	8 (Rev. 1-2014)					Page 2			
• If you a	re filing for an Additional (Not Automatic) 3-Month Ex	tension, d	complete only Part II and check this	s box	••	. ▶ [X]			
Note. Onl	y complete Part II if you have already been granted an a	sutomatic	3-month extension on a previously f	led Form	8868.				
	re filing for an Automatic 3-Month Extension, complete	te only Pa	irt I (on page 1).						
Part II	Additional (Not Automatic) 3-Month E	xtensio	n of Time. Only file the origin	al (no c	opies nee	eded).			
			Enter filer's	Identifyli	ng number,	seo instructions			
Type or	Name of exempt organization or other filer, see instru-	Employe	r identificati	ion number (EIN) or					
print File by the	where controlled the partial political partial partial political partial part								
due date for	Number, street, and room or suite no. If a P.O. box, so		tions	Social se	curity numl	per (SSN)			
return, See 55 ROBIN ROAD									
instructions	City, town or post office, state, and ZIP code. For a fow WESTON, MA 02493-2436	oreign add	Iress, see instructions.						
		_			-	16.12.1			
Enter the	Return code for the return that this application is for (file	a separa	te application for each return)			014			
Applicati	on	Return	Application			Return			
ls For		Code	Is For			Code			
Form 990	or Form 990-EZ	01	に記述。たれる年代氏は位立し、	, , ,	in the	TIME			
Form 990	·8L	02	Form 1041-A			08			
Form 472	0 (individual)	03	Form 4720 (other than individual)			09			
Form 990	-PF	04	Form 5227			10			
Form 990	-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11			
Form 990	T (trust other than above)	06	Form 8870			12			
STOPI D	not complete Part II if you were not already granted			iously file	d Form 88	68.			
	ROBERT & SUSAN								
	ooks are in the care of 55 ROBIN ROAD	- WES							
	one No. ► 781-647-9819		Fax No		<u></u>				
	organization does not have an office or place of business					▶ └			
If this i	s for a Group Return, enter the organization's four digit (•							
box 🕨 L			ch a list with the names and EINs of	all memb	ers the exte	ension is for.			
		OVEM	BER 15, 2014.						
	calendar year 2013 , or other tax year beginning		, and endin	~		 ·			
e 11 11	te tax year entered in line 5 is for less than 12 months, c	heck reas	on: L Initial return L	Final r	eturn				
L_	Li Change in accounting period								
	te in detail why you need the extension		DILE MUE THEODYAMT	<u> </u>	OHOO A F	NY MO			
	DITIONAL TIME IS REQUIRED TO	COM	PILE THE INFORMATI	ON NE	CESSAL	RY TO			
<u> </u>	MPLETE AN ACCURATE RETURN.								
0- 1645	is an invited in the Court of t	6000		Ţ					
	is application is for Forms 990-BL, 990-PF, 990-T, 4720,	or 6089,	enter the tentative tax, less any	0-		74.			
	refundable credits. See instructions.			8a	\$				
	is application is for Forms 990-PF, 990-T, 4720, or 6069								
	payments made. Include any prior year overpayment all	owed as a	credit and any amount paid	8b	•	74.			
	viously with Form 8868. ance due. Subtract line 8b from line 8a. Include your pa		h this form if required by using	- 00	<u> </u>	73+			
	· · · · · · · · · · · · · · · · · · ·	•	n this form, it required, by using	80	•	0.			
<u> </u>	PS (Electronic Federal Tax Payment System), See instru Signature and Verification		at be completed for Part II o	8c	\$	<u> </u>			
Under pena	illies of perjury, I declare that I have examined this form, includi	ng accomp	•	-	l my knowled	lge and belief,			
	prect and complete and that I am authorized to prepare this for				. 04	1 4 /4 4			
Signature	► 40 H CONC. Title ► T	RUSTI	SE	Date	▶ 8/	14/14			

Form 8868 (Rev. 1-2014)