

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



SCANNED JUN 1 9 7017

Form 990-PF

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

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.lrs.gov/form990pf.

OMB No 1545-0052

PUIC	aiçii	ual year 2010 of tax year beginning		, and ending		
Nam	e of	foundation			A Employer identification	number
T)	u r	SCHECHTER FAMILY FOUND	λ ΨΤΟΝ		04-3339430	1
		nd street (or P O box number if mail is not delivered to street		Room/suite	B Telephone number	
		ROBIN ROAD	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	781-647-98	19	
		own, state or province, country, and ZIP or foreign po	ostal code		C if exemption application is p	
		TON, MA 02493-2436				
		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		Foreign organizations me check here and attach co	enting the 85% test, emputation
H_C		type of organization: X Section 501(c)(3) ex	empt private foundation		E If private foundation sta	tus was terminated
<u></u>			Other taxable private founda	ition	under section 507(b)(1)	(A), check here
		rket value of all assets at end of year J Accounti	-	Accrual	F If the foundation is in a	
•		Part II, col (c), line 16)	her (specify)		under section 507(b)(1)	(B), check here
<u></u>	_	626,018. (Part I, column Analysis of Revenue and Expenses				(4) p
Pa	πı	(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
	1	Contributions, gifts, grants, etc., received	43,189.		N/A	(cash basis only)
l	2	Check If the foundation is not required to attach Sch. B	43,103.		14/4	
	3	Interest on savings and temporary cash investments	2.		•	STATEMENT 1
	4	Dividends and interest from securities	1,795.	1,795		STATEMENT 2
	5a	Gross rents				
l	b	Net rental income or (loss)				···
_	6a	Net gain or (loss) from sale of assets not on line 10	82,358.			
Revenue	b	Gross sales price for all assets on line 6a 130, 157.				
ě	7	Capital gain net income (from Part IV, line 2)		82,358	•	
۳.	8	Net short-term capital gain				
	9	Income modifications Gross sales less returns				
	10a	and allowances				
		Less Cost of goods sold				
		Gross profit or (loss)				
	11 12	Other income Total. Add lines 1 through 11	127,344.	84,155	<u> </u>	
-	13	Compensation of officers, directors, trustees, etc	0.	04,133		0.
	14	Other employee salaries and wages				
		Pension plans, employee benefits				
Ses		Legal fees				
xpenses	b	Accounting fees STMT 3	3,530.	0	•	0.
EX	C	Other professional fees				
ЭŅ	17	Interest				
trat	18	Taxes STMT 4	405.	0	•	0.
inis	19	Depreciation and depletion			 	<u> </u>
Ē	20	Occupancy		<u> </u>	 	
φÞ	21	Travel, conferences, and meetings				
) au	22	Printing and publications Other expenses STMT 5	35.	0	RECFIN	VI-D 0.
Operating and Administrative Ex	23	Other expenses STMT 5 Total operating and administrative	33.			
era	24	expenses. Add lines 13 through 23	3,970.	0	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	ြွတ္တြဲ 0.
Ö	25	Contributions, gifts, grants paid	126,055.		게임 JUN 0-1 2	17 126,055.
	l .	Total expenses and disbursements.				181
	•	Add lines 24 and 25	130,025.	0	.L OGDEN	<u> </u> 126,055.
	27	Subtract line 26 from line 12:				
	а	Excess of revenue over expenses and disbursements	<2,681.			
		Net investment income (if negative, enter -0-)		84,155		
		Adjusted net income (if negative, enter -0-)		<u> </u>	N/A	
6235	01 11	1-23-16 LHA For Paperwork Reduction Act Notic	e, see instructions.			Form 990-PF (2016)

04-3339430

176,558. Form **990-PF** (2016)

THE SCHECHTER FAMILY FOUNDATION

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

Part IV Capital Gains	and Losses for Tax on Ir	nvestmen	t 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 P - Purchase D - Donation							acquired lay, yr.)	(d) Date sold (mo., day, yr.)
	PPLE INC				P	01/1	3/06	12/09/16
b 1000 SHS PTC I					P		5/09	08/05/16
c 239 SHS PTC IN					P		5/09	10/28/16
d 1500 SHS PTC I	NC COM				P	09/1	5/09	10/28/16
e								
(e) Gross sales price (f) Depreciation allowed (or allowable) (g) Cost or other basis plus expense of sale							aın or (loss s (f) mınus	
a 10,021.		1	1,07	2.				8,949.
b 40,132.		1	17,06	0.1				23,072.
c 10,995.			4,07	7.				6,918.
d 69,009.		 	25,59					43,419.
8		 		-+				
	ng gain in column (h) and owned by	the foundation	on 12/31/69	-+		(I) Gaine (C	col. (h) gaın	minue
						ol. (k). but i	not less tha	n -0-) o r
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col. (i)	į	_	Losses	(from col. ((h))
		3701		-+				
8		↓		_				8,949.
<u>b</u>		ļ		_				23,072.
<u>c</u>		<u></u>						6,918.
d		<u> </u>		Ĺ				43,419.
e				7				
2 Capital gain net income or (net ca	If gain, also ente			}	2			82,358.
3 Net short-term capital gain or (los				ÍΓ				
If gain, also enter in Part I, line 8,	,	iia (0).		11				
If (loss), enter -0- in Part I, line 8	Column (c).			Ŋ	3		N/A	
Part V Qualification U	nder Section 4940(e) for	r Reduced	Tax on Net	Inve	stment In	come		
(For optional use by domestic private	foundations subject to the section	4940(a) tay on	net investment in	come)				
(1 of optional use by bonnestic private	to and attoris subject to the section	4540(a) tax 01	i net mvestment m	.,	,			
If section 4940(d)(2) applies, leave to	his part blank.							
Was the foundation liable for the sec			•	1007				Yes X No
If "Yes," the foundation does not qua								
1 Enter the appropriate amount in	each column for each year, see the i	nstructions be	tore making any ei	ntries.				70
(a) Base period years	(b)			(c)		İ	Distrib	(d) oution ratio
Calendar year (or tax year beginni	ng in) Adjusted qualifying dis	stributions	Net value of no	ncharit	able-use asset	is	(col. (b) div	rided by col. (c))
2015	12	26,880.			529,67	3.		.239544
2014	13	37,019.			540,36	9.		.253566
2013		9,720.			456,11			.218627
2012		$\frac{57,135}{125}$			460,19			.211073
2011		26,674.			454,62			.278637
2011		.0,0,4.	L		131,02			.210031
A T. A L. C. L						_	}	1 201447
2 Total of line 1, column (d)				_		2_	ļ	1.201447
3 Average distribution ratio for the	5-year base period - divide the total	on line 2 by 5,	or by the number	of year	rs	1	1	
the foundation has been in existe	nce if less than 5 years					3	<u> </u>	.240289
4 Enter the net value of noncharitat	ole-use assets for 2016 from Part X,	line 5				4	Ì	569,013.
	,							
5 Multiply line 4 by line 3						5		136,728.
5 Multiply line 4 by line 5						<u> </u>	 	130,720.
							ŀ	0.40
6 Enter 1% of net investment incom	ne (1% of Part I, line 27b)					6_		842.
7 Add lines 5 and 6						7		137,570.
8 Enter qualifying distributions from	-					8		126,055.
If line 8 is equal to or greater thai	n line 7, check the box in Part VI, line	e 1b, and comp	plete that part usin	g a 1%	tax rate.			

	990-PF (2016) THE SCHECHTER FAMILY FOUNDATION				3339			Page 4
Part			40(e), or 4	948 -	see i	nstru	ıctio	ns)
1a E	xempt operating foundations described in section 4940(d)(2), check here 🕨 🗔 and er	nter "N/A" on line 1.)					
	Date of ruling or determination letter; (attach copy of letter if nec		18)))				
b D	Domestic foundations that meet the section 4940(e) requirements in Part V, check here	▶ and enter 1%	}	1_		_	1,6	83.
0	of Part I, line 27b							
c A	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4%	of Part I, line 12, col.	(b).	1 1				
2 T	ax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Ot	hers enter -0-)		2				0.
3 A	Add lines 1 and 2	,		3			1,6	
4 S	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. O	thers enter -0-)		4				0.
	Fax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	,		5			1,6	83.
	Credits/Payments:			Ĭ				
	2016 estimated tax payments and 2015 overpayment credited to 2016	6a						
	Exempt foreign organizations - tax withheld at source	6b		1 1				
	Fax paid with application for extension of time to file (Form 8868)	6c		1				
	Backup withholding erroneously withheld	6d						
		00] ,]				0.
	Total credits and payments. Add lines 6a through 6d	-1		7				$\frac{0.}{12.}$
	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attained to the table of the property of	cnea	_	8			1 6	
	Fax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			9			1,6	95.
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	ı		10				
	Enter the amount of line 10 to be: Credited to 2017 estimated tax		Refunded	11				
	t VII-A Statements Regarding Activities	 						
	During the tax year, did the foundation attempt to influence any national, state, or local legis	lation or did it participa	te or intervene	ın			Yes	No
	any political campaign?)	1a		X
	Did it spend more than \$100 during the year (either directly or indirectly) for political purpos					1b		X
	if the answer is "Yes" to 1a or 1b , attach a detailed description of the activities a	nd copies of any ma	terials publish	ned or				
C	distributed by the foundation in connection with the activities				-			
c [Old the foundation file Form 1120-POL for this year?					1c		X
d E	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the	•						
	(1) On the foundation. ▶ \$0. (2) On foundation managers		0.		- 1			
e E	Enter the reimbursement (if any) paid by the foundation during the year for political expendi	ture tax imposed on fo	undation					
r	managers. ► \$ 0 •							
2 F	las the foundation engaged in any activities that have not previously been reported to the IF	3 S?				2	_	X
1	f "Yes," attach a detailed description of the activities				J			
3 F	Has the foundation made any changes, not previously reported to the IRS, in its governing i	nstrument, articles of i	ncorporation, o	r	l l			
b	oylaws, or other similar instruments? If "Yes," attach a conformed copy of the change	es				3		X
4a [Did the foundation have unrelated business gross income of \$1,000 or more during the yea	r۶			1	4a		X
bi	f "Yes," has it filed a tax return on Form 990-T for this year?			N	/A	4b		
5 V	5 Was there a liquidation, termination, dissolution, or substantial contraction during the year?				- 1	5		X
1	f "Yes," attach the statement required by General Instruction T				j			
	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied ei	ther;			J			
	By language in the governing instrument, or				1			
	By state legislation that effectively amends the governing instrument so that no mandator	v directions that conflic	t with the state	law	}			
	remain in the governing instrument?	,				6	х	
	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," con	nolete Part II. col. (c)	and Part XV	,	1	7	$\overline{\mathbf{x}}$	
, .	na are recorded that at react popolo in account at any time coming the year. In 700, 001.	.,p. 0.0 / a. t , 00 / (0)	, 4/10 / 4/1 / 1/1		1		 +	
Ro F	Enter the states to which the foundation reports or with which it is registered (see instructio	ne) 🕨						
	MA						ſ	
-	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the A	ttorney General (or doc	ignate)				1	
	of each state as required by General Instruction G? If "No," attach explanation	morney delicial (or des	igilate)]	٥.	ł	X
		otion 4042(1)(2) or 404	2/11/E) for only	ndar	-	8b		
	Is the foundation claiming status as a private operating foundation within the meaning of se		z(J)(b) for cale	nuar		ا ہا	- 1	v
	year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If "Yes," o	· · · · · · · · · · · · · · · · · · ·		TMT	7	9	X	<u>X</u>
10 [Did any persons become substantial contributors during the tax year? If "Yes," attach a schedu	ile listing their names and a	adresses 2	¥ 4,Y Y		10 000	-PF	(2010)
					LOU	3 3€	,-F((ZU ID)

Pa	rt VII-A Statements Regarding Activities (continued)			
		\top	Yes	No
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?	40		₩.
40	If "Yes," attach statement (see instructions)	12	х	X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address N/A	13		L
14	The books are in care of ► ROBERT & SUSAN SCHECHTER Telephone no. ► 781 – 6	<u> </u>	819	
•	Located at ► 55 ROBIN ROAD, WESTON, MA ZIP+4 ►0			
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	N	/A	
16	At any time during calendar year 2016, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
	securities, or other financial account in a foreign country?	16	_	X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the			
	foreign country			
P	rt VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
4.	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
18	During the year did the foundation (either directly or indirectly): (1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?	1		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(5) Transfer any income or assets to a disqualified person (or make any of either available			
	for the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No"	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	ľ	
	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.)	1 '		
	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)? N/A Organizations relying on a current notice regarding disaster assistance check here	1b		
	Organizations relying on a current notice regarding disaster assistance check here Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected	- [, ,	
•	before the first day of the tax year beginning in 2016?	1c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation	- <u>'</u> -	$\neg \neg$	
_	defined in section 4942(j)(3) or 4942(j)(5)):	1 !	ļ	
	At the end of tax year 2016, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning] '	1	
	before 2016?	[
	If "Yes," list the years		ł	
ı	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect	1		
	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		
	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
3:	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time]]]	
0.	during the year?			
ı	If "Yes," did it have excess business holdings in 2016 as a result of (1) any purchase by the foundation or disqualified persons after	1 /		
	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 2016.) N/A	3b		
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
- 1	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 2016?	4b		X
		orm 990)-PF (2016)

Form 990-PF (2016) THE SCHECHTER FAMILY FOU		Poguired (see	04-33394	30	Page 6
Part VII-B Statements Regarding Activities for Which	rorin 4/20 May Be	nequired (contin	uea)		
5a During the year did the foundation pay or incur any amount to:	40.457.330				1
(1) Carry on propaganda, or otherwise attempt to influence legislation (section			es 🛣 No	Į	- 1
(2) Influence the outcome of any specific public election (see section 4955); o	or to carry on, directly or indi		□		
any voter registration drive?	_		es X No	1	1
(3) Provide a grant to an individual for travel, study, or other similar purposes		Y	es 🗶 No	1	
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section			1	İ
4945(d)(4)(A)? (see instructions)			es X No	ļ	ı
(5) Provide for any purpose other than religious, charitable, scientific, literary, the prevention of cruelty to children or animals?	, or educational purposes, or		es X No		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify un	der the exceptions described	ın Regulations			j
section 53.4945 or in a current notice regarding disaster assistance (see instru	ictions)?		N/A	5b	_
Organizations relying on a current notice regarding disaster assistance check t	nere			T	
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption f	rom the tax because it mainta	ained		- }	
expenditure responsibility for the grant?	1	N/A 🔲 Y	es 🔲 No	1	
If "Yes," attach the statement required by Regulations section 53 494	5-5(d)		1		j
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	• •		ן		
a personal benefit contract?			es X No	- }	į.
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	personal benefit contract?			6b	X
If "Yes" to 6b, file Form 8870			<u> </u>	-	╅ᆖ
7a At any time during the tax year, was the foundation a party to a prohibited tax	shelter transaction?		es X No	- {	- [
b If "Yes," did the foundation receive any proceeds or have any net income attrib				7b	
Part VIII Information About Officers, Directors, Trust		anagers, Highly		·	
Paid Employees, and Contractors	ooo, roundation in	anagere, mgm,	,		
1 List all officers, directors, trustees, foundation managers and their	compensation.				
	(b) Title, and average hours per week devoted	(c) Compensation	(d) Contributions to	(e)	Expense unt, other
(a) Name and address	hòurs per week devoted to position	(If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred	acco	unt, other owances
ROBERT P. SCHECHTER	TRUSTEE	United 6 /	compensation	- 4.11	717411003
55 ROBIN ROAD					
WESTON, MA 02493	1.00	0.	l o.		0.
SUSAN P. SCHECHTER	TRUSTEE	 			
55 ROBIN ROAD	1				
WESTON, MA 02493	1.00	0.	٥.		0.
WESTON, FIR 02433	1	 			- 0.
	1				
	4		i		
		 			
	4		'		
	1		ĺ		
2 Compensation of five highest-paid employees (other than those inc	luded on the 4) It sees	L CONTRACTOR III	L	L	
2 Compensation of five highest-paid employees (other than those in	(b) Title, and average	, enter "NONE."	(d) Contributions to	(2)	Expense
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	employee benefit plans and deferred compensation	acco	unt, other wances
NONE					
	<u> </u>	1		_	
	1				
	}				
	1	1			
Total number of other employees paid over \$50,000			>		0

Form 990-PF (2016) THE SCHECHTER FAMILY FOUNDATION	04-3	339430 Page 7
Part VIII Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)	on Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter "N		
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
		
		1
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 statistica number of organizations and other beneficiaries served, conferences convened, research papers produce	Information such as the	Expenses
1 N/A	50, 60.	
		
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 line	s 1 and 2.	Amount
1N/A		
2		
		
All other program-related investments. See instructions.		
<u> </u>		
		
Total, Add lines 1 through 3		0.

For	m 990-PF (2016) THE SCHECHTER FAMILY FOUNDATION	04-3339430	Page 8
P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	indations, see instructions	i.)
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 543	3,896. 3,782.
b	Average of monthly cash balances	1b 33	3,782.
C	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d 577	7,678.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)	<u>.</u>	
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3 577	7,678.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)		3,665.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4		013.
6	Minimum investment return. Enter 5% of line 5	6 28	3,451.
P	Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations a	nd certain	
_	foreign organizations check here 🕨 🔛 and do not complete this part.)		
1	Minimum investment return from Part X, line 6		3,451.
2a	Tax on investment income for 2016 from Part VI, line 5		
b	Income tax for 2016. (This does not include the tax from Part VI.)]	
C	Add lines 2a and 2b	2c 1	L,683.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3 26	768.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5 26	768.
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 26	768.
	Part XII Qualifying Distributions (see instructions)		
Ŀ	art Ari Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a 126	055.
b	Program-related investments - total from Part IX-B	16	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Surtability 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	4 126	,055.
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	6 126	,055.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation 4940(e) reduction of tax in those years.	qualifies for the section	

Page 9

Part XIII Undistributed Income (see instructions)

THE SCHECHTER FAMILY FOUNDATION

	(a) Corpus	(b) Years prior to 2015	(c) 2015	(d) 2016
1 Distributable amount for 2016 from Part XI,				
line 7				_26,768.
2 Undistributed income, if any, as of the end of 2016				
a Enter amount for 2015 only			0.	
b Total for prior years:				
,,		0.	L	
3 Excess distributions carryover, if any, to 2016:				
a From 2011 127,270.				
bFrom 2012 97,135.				
c From 2013 99,720.	,		l	
dFrom 2014 110,803.		İ		
eFrom 2015 101, 206.				
f Total of lines 3a through e	536,134.			
4 Qualifying distributions for 2016 from		į	•	
Part XII, line 4: ▶\$ 126,055.			•	
a Applied to 2015, 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)	0.			0.5 - 5.0
d Applied to 2016 distributable amount	00 207			26,768.
e Remaining amount distributed out of corpus	99,287.			L
5 Excess distributions carryover applied to 2016 (If an amount appears in column (d), the same amount must be shown in column (a))	0.		<u> </u>	0.
6 Enter the net total of each column as indicated below:				
& Corpus Add lines 3f, 4c, and 4e Subtract line 5	635,421.			
b Prior years' undistributed income. Subtract				
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 2015. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	<u> </u>
f Undistributed income for 2016. Subtract				
lines 4d and 5 from line 1. This amount must				_
be distributed in 2017				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election	0.			
may be required - see instructions)				
8 Excess distributions carryover from 2011	127,270.			1
not applied on line 5 or line 7	141,410.			
9 Excess distributions carryover to 2017.	508,151.			
Subtract lines 7 and 8 from line 6a 10 Analysis of line 9:	300,131.			<u> </u>
a Excess from 2012 97,135.				
b Excess from 2013 99,720.				
c Excess from 2014 110,803.				
dExcess from 2015 101, 206.				
e Excess from 2016 99, 287.		ĺ		

rm 990-PF (2016) THE SCH Part XIV Private Operating F		ILY FOUNDAT		N/A	39430 P
a If the foundation has received a ruling of				N/A	
foundation, and the ruling is effective for		•	' [
b Check box to indicate whether the found		•	d in section	4942(j)(3) or 49	942(J)(5)
2 a Enter the lesser of the adjusted net	Tax year	T T T T T T T T T T T T T T T T T T T	Prior 3 years	1 4542())(3) 01 4:	T
income from Part I or the minimum	(a) 2016	(b) 2015	(c) 2014	(d) 2013	(e) Total
investment return from Part X for	(5) 55 15	(2)20.0	(0/2511	(-)	(-/:
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			 	 	
		1			ł
used directly for active conduct of					[
exempt activities			 	+	
e Qualifying distributions made directly	 	}			1
for active conduct of exempt activities.					l
Subtract line 2d from line 2c 3 Complete 3a, b, or c for the				+	
alternative test relied upon:		1			ļ.
a "Assets" alternative test - enter:		ĺ		l	!
(1) Value of all assets					
(2) Value of assets qualifying	1	1			1
under section 4942(j)(3)(B)(i)	ļ				<u></u>
b "Endowment" alternative test - enter 2/3 of minimum investment return					1
shown in Part X, line 6 for each year	1		1		}
listed	<u></u>			- 	<u></u>
c "Support" alternative test - enter:		1			
(1) Total support other than gross	}		}		1
investment income (interest, dividends, rents, payments on					[
securities loans (section					
512(a)(5)), or royalties)	l			<u> </u>	
(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	L				
(4) Gross investment income					
Part XV Supplementary Info			y if the foundation	n had \$5,000 or m	ore in assets
at any time during t	he year-see in:	structions.)			
Information Regarding Foundation	n Managers:				
a List any managers of the foundation wh	o have contributed mo	re than 2% of the total co	ntributions received by the	e foundation before the clo	se of any tax
year (but only if they have contributed n	nore than \$5,000). (Se	e section 507(d)(2).)	•		•
EE STATEMENT 8					
b List any managers of the foundation wh	o own 10% or more of	f the stock of a corporatio	n (or an equally large port	ion of the ownership of a p	artnership or
other entity) of which the foundation has			(
IONE					
2 Information Regarding Contributi	ion, Grant, Gift, Loa	an. Scholarship, etc	Programs:		
Check here ► X if the foundation of				not accept unsolicited requ	ests for funds. If
the foundation makes gifts, grants, etc.					
a The name, address, and telephone num	ber or e-mail address	of the person to whom ap	plications should be addre	essed;	
b The form in which applications should b	e submitted and infor	mation and materials they	should include:		
2 and approacions official			THE STATE STATE OF THE STATE OF		
c Any submission deadlines:					
c Any submission deadlines:					

▶ 3b

Total

Part XVI-A Analysis of Income-Producing Activity
--

Enter gross amounts unless otherwise indicated.	Unrelated	business income		d by section 512, 513, or 514	(e)
•	(a) Business	(b) Amount	Exclu- sion	(d) Amount	Related or exempt
1 Program service revenue;	code		code		
b	- 		1-1		
c	-		1 1		
d					
е					
1	_				
g Fees and contracts from government agencies			+		
2 Membership dues and assessments	 				
3 Interest on savings and temporary cash investments			14	2.	
4 Dividends and interest from securities			14	1,795.	
5 Net rental income or (loss) from real estate:	ļ				
a Debt-financed property					
b Not debt-financed property	\ 				
6 Net rental income or (loss) from personal property					
7 Other investment income					
8 Gain or (loss) from sales of assets other than inventory			14	82,358.	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory	ļ				
11 Other revenue:	-				
<u> </u>	-		+-+		
b	-		+-+		
d	-				
e	-				
12 Subtotal. Add columns (b), (d), and (e)		0		84,155.	0
13 Total. Add line 12, columns (b), (d), and (e)				13	84,155
(See worksheet in line 13 instructions to verify calculations.))				
Part XVI-B Relationship of Activities	to the Acco	mplishment of	Exempt	Purposes	

 the foundation's exempt purposes (other than by providing funds for such purposes).

Part XVII	Information Regarding	Transfers '	To and	Transactions	and Relation	onships Wi	th Noncharitable
	Exempt Organizations						

1 Did the	organization directly or indir	rectly engage in any c	of the followin	g with any other organization	on described in secti	on 501(c) of		Yes	No
the Co	de (other than section 501(c))(3) organizations) or	ın section 52	7, relating to political organ	iizations?				
a Transf	ers from the reporting founda	ation to a noncharitab	ole exempt org	ganization of:					
(1) Ca	ash						1a(1)		X
(2) 01	her assets					İ	1a(2)		X
b Other t	ransactions:								
(1) Sa	iles of assets to a noncharital	ble exempt organizati	ion		-		1b(1)		X
• •	urchases of assets from a noi	•	rganization				16(2)		X
(3) R	ental of facilities, equipment,	or other assets					1b(3)		X
(4) R	eimbursement arrangements						1b(4)		X
(5) Lo	oans or loan guarantees						1b(5)		X
(6) P	erformance of services or me	mbership or fundrais	ing solicitatio	ns			1b(6)		X
	g of facilities, equipment, ma						10		X
	inswer to any of the above is					-		ets,	
	rices given by the reporting fo			ed less than fair market vali	ie in any transaction	or sharing arrangement, she	ow in		
	n (d) the value of the goods,								
a)Line no	(b) Amount involved	(c) Name of		exempt organization	(d) Description	of transfers, transactions, and sh	arıng arı	angeme	nts
			N/A						
		ļ							
		ļ							
				- 					
						 			
									
		 							
		 			 				
		 							
						_ 			
									
		 			 				
					 				
On lothor	foundation directly or indirect	the officeted with or r	oloted to one	or more toy evenet ergen	zations described				
	foundation directly or indirect ion 501(c) of the Code (othei				zauons described		Yes	X	l Na
	," complete the following sch	• •	(3)) 01 111 5661	11011 327 r		<u></u>	J Tes	LAAL	סאו ר
D 11 162	(a) Name of org			(b) Type of organization	1	(c) Description of relationship			
	N/A			(27 Type of organization		(0) 000011111111111111111111111111111111			
	14/11					 _			
				<u> </u>	 				
					 				
					 				
U	nder penalties of perjury, I declare						no IDE o	inoune t	
Sign ar	d belief, it is true, correct and correct	nplete Declaration of pre	eparer (other that	n taxpayer) is based on all inform	nation of which preparer	return	with the	iscuss to prepare (see inst	er .
Here	1 feet XIV	NV		1/3/1/12	TRUSTE			(See IIISI	no l
] ;	Signature of officer or trustee			Date 1	Title				
	Print/Type preparer's na	ame	Preparer's s	ignature,	Date	Check if PTIN			
	WILLIAM F.			11/1_]	self- employed			
Paid	CPA, MST		-	HIT	05/16/17	P00	634	443	
Prepare		CI, BARDA	RO & F	ALZONE, PC		Firm's EIN ▶ 04-31			
Use On		-		•					
	Firm's address ▶ 50	0 UNICORN	PARK,	SUITE 101					
	WO	BURN, MA	01801			Phone no. (781)	321	-60	65
						For	n 990	-PF (2016)

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.lrs.gov/form990.

OMB No 1545-0047

2016

Name of the organization

Employer identification number

	T	HE SCHECHTER FAMILY FOUNDATION	04-3339430
Organiz	zation type (check	one):	
Filers o	f:	Section:	
Form 99	90 or 990-EZ	501(c)() (enter number) organization	
		4947(a)(1) nonexempt charitable trust not treated as a private foundation	
		527 political organization	
Form 99	90-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	
		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 Ru	ıle. See instructions
Genera	l Rule		
X		on filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling by one contributor. Complete Parts I and II. See instructions for determining a contributor	•
Special	Rules		
	sections 509(a)(1) any one contribut	on described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, tor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount Z, line 1. Complete Parts I and II.	or 16b, and that received from
	year, total contrib	on described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from putions of more than \$1,000 <i>exclusively</i> for religious, charitable, scientific, literary, or educing the cruelty to children or animals. Complete Parts I, II, and III.	, ,
	year, contribution is checked, enter purpose Don't co	on described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from as exclusively for religious, charitable, etc., purposes, but no such contributions totaled may here the total contributions that were received during the year for an exclusively religious complete any of the parts unless the General Rule applies to this organization because it total, etc., contributions totaling \$5,000 or more during the year	ore than \$1,000 If this box s, charitable, etc.,
but it m	ust answer "No" o	that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (For Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its For 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) (2016)

Name of organization

Employer identification number

THE SCHECHTER FAMILY FOUNDATION

04-3339430

Contributors (See instructions). Use duplicate copies of Part I if	additional space is needed	
(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
ROBERT AND SUSAN P. SCHECHTER 55 ROBIN ROAD WESTON, MA 02493	\$\$.	Person Payroll Noncash X (Complete Part II for noncash contributions)
(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
ROBERT AND SUSAN P. SCHECHTER 55 ROBIN ROAD WESTON, MA 02493	\$6,454.	Person Payroll Noncash X (Complete Part II for noncash contributions.)
(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	\ \$	Person Payroll Noncash (Complete Part II for noncash contributions)
(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	\$\$	Person Payroll Noncash (Complete Part II for noncash contributions) 990, 990-EZ, or 990-PF) (2016)
	(b) Name, address, and ZIP + 4 ROBERT AND SUSAN P. SCHECHTER 55 ROBIN ROAD WESTON, MA 02493 (b) Name, address, and ZIP + 4 ROBERT AND SUSAN P. SCHECHTER 55 ROBIN ROAD WESTON, MA 02493 (b) Name, address, and ZIP + 4 (b) Name, address, and ZIP + 4	Name, address, and ZIP+4

Employer identification number

THE SCHECHTER FAMILY FOUNDATION

04-3339430

Part II	Noncash Property (See instructions). Use duplicate copies of Par	t 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	2,000 SHARES OF PTC INC COM, FMV \$93,240		
		\$\$	12/23/16
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
	243 SHARES OF REGENERON	_	
2	PHARMACEUTICALS, FMV \$90,157.86	s6,454.	12/20/16
(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
			· · · · · · · · · · · · · · · · · · ·
		_	
623453 10-1	8-16	\$Schedule B (Form 9	90, 990-EZ, oı

Schedule B (Form 990, 990-EZ, or 990-PF) (2016) Employer identification number Name of organization THE SCHECHTER FAMILY FOUNDATION 04-3339430 Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations Part III completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year (Enter this info once) Use duplicate copies of Part III if additional space is needed. (a) No. from (c) Use of gift (b) Purpose of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from 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, and ZIP + 4 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

Relationship of transferor to transferee

Transferee's name, address, and ZIP + 4

THE SCHECHTER FAMILY FOUNDATION Information

Part XV Supplementary Information 3 Grants and Contributions Paid During the Ye	ear (Continuation)			T
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
NUNTINGTON THEATER COMPANY	(PUBLIC	NON-RESTRICTED	ĺ
264 HUNTINGTON AVENUE				l
BOSTON, MA 02115	 	 		250
ASSACHUSETTS COLLEGE OF ART & DESIGN	,	PUBLIC	NON-RESTRICTED	
21 HUNTINGTON AVENUE		1 - 2 - 2 - 3	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
BOSTON, MA 02115				27,00
ASSACHUSETTS GENERAL HOSPITAL (GROSS		PUBLIC	NON-RESTRICTED	
CHAIR AND HOCHBERG RESEARCH)		ļ		
LOO CAMBRIDGE STREET		İ		20.00
BOSTON, MA 02114			 	20,00
MSPCA ANGELL MEMORIAL		PUBLIC	NON-RESTRICTED	
350 SOUTH HUNTINGTON AVENUE	}	100010	NON RESTRICTED	
BOSTON, MA 02130	<u></u>	<u> </u>	<u> </u>	22,50
PANMASS CHALLENGE		PUBLIC	NON-RESTRICTED	
77 FOURTH AVENUE	1			ļ
NEEDHAM, MA 02494				1,75
		D	Now Bugmaraman	
TEMPLE BETH ELOHIM 10 BETHEL ROAD		PUBLIC	NON-RESTRICTED	ļ
WELLESLEY, MA 02481			<u> </u>	1,000
JILNA SHUL		PUBLIC	NON-RESTRICTED	}
18 PHILLIPS STREET				
BOSTON, MA 02114	 	 	 	5,000
WBUR, BOSTON UNIVERSITY		PUBLIC	NON-RESTRICTED	
890 COMMONWEALTH AVE., 3RD FL		100010	NON KEDIKICIED	
BOSTON, MA 02215			 	2,50
	}			
WGBH PUBLIC TELEVISION		PUBLIC	NON-RESTRICTED	
ONE GUEST STREET		1		
BOSTON, MA 02135	 	 	+	2,500
WOMEN'S LUNCH PLACE		PUBLIC	NON-RESTRICTED	
67 NEWBURY STREET			NON-MEDIATOTED	
BOSTON, MA 02116		1		500
Total from continuation sheets				91,555

### ASSAMASHINGTON ST UBURNDALE, MA 02466 ARKIM CENTER 50 BROOKLINE AVE OSTON, MA 02115 #### PUBLIC NON-RESTRICTED #### PUBLIC NON-RESTRICTED #### PUBLIC NON-RESTRICTED #### PUBLIC NON-RESTRICTED #### PUBLIC NON-RESTRICTED #### ASSAMTS #### PUBLIC NON-RESTRICTED #### ASSAMTS #### PUBLIC NON-RESTRICTED #### ASSAMTS #### PUBLIC NON-RESTRICTED #### PUBLIC NON-RESTRICTED ##### PUBLIC NON-RESTRICTED ##### PUBLIC NON-RESTRICTED ##### PUBLIC NON-RESTRICTED ###################################	Part XV Supplementary Information				
Name and address (Nome or business) Showany restorming to or substantial contributor or substantial contributor or substantial contributor receivent AXYYIM MAYYIM BAYYIM ABYYIM BAYYIM PUBLIC NON-RESTRICTED AXING HISTORY AND OURSELVES BAYYIM ABYYIM BAYYIM ABYYIM BAYYIM				 	
ANYIM HANYIM 939 WASHINGTON ST OBURNIDADE, AM 02466 1,00 AKIH CENTER 50 BROCKLINE AVE GETON, MA 02115 MC JIMMY FUND 7 FOURTH AVENUE REDIMAN, MA 02494 25 AX ULTIMATE FOOD MASS ARTS 21 HUNTINGTON AVENUE 6 HURD RD, ROCKLINE, MA 02445 WE STAND OURSELVES 6 HURD RD, ROCKLINE, MA 02445 WE N FUND - THE MIRIAM FUND 26 HIGH STREET OSTON, MA 02110 2,001 EWISH COMMUNITY CENTER 31 MANANTON ST EWHON, MA 02459 1,001	<u></u>	I show any relationship to	status of	Purpose of grant or contribution	Amount
ARIM CENTER DUBLIC ARIM CENTER 50 BROKALINE AVE GOSTON, MA 02115 TUBLIC NON-RESTRICTED 50 MC JIMMY FUND 7 FOURTH AVERUE EREDMAN, MA 02494 ARI LITHRATE FOOD - MASS ARTS 21 HUNTINGTON AVENUE OSTON, MA 02115 ACING RISTORY AND OURSELVES 5 HURD RD, HEOKELINE, MA 02445 FUBLIC NON-RESTRICTED 2,001 WEVELLE NON-RESTRICTED 2,001 EWISH COMMUNITY CENTER 33 NAMANTON ST EWISH COMMUNITY CENTER 33 NAMANTON ST EWISH COMMUNITY CENTER 33 NAMANTON ST EWISH COMMUNITY CENTER 31,001	Name and address (nome of business)	or substantial contributor	recipient	 	ļ
ARIM CENTER DUBLIC ARIM CENTER 50 BROKALINE AVE GOSTON, MA 02115 TUBLIC NON-RESTRICTED 50 MC JIMMY FUND 7 FOURTH AVERUE EREDMAN, MA 02494 ARI LITHRATE FOOD - MASS ARTS 21 HUNTINGTON AVENUE OSTON, MA 02115 ACING RISTORY AND OURSELVES 5 HURD RD, HEOKELINE, MA 02445 FUBLIC NON-RESTRICTED 2,001 WEVELLE NON-RESTRICTED 2,001 EWISH COMMUNITY CENTER 33 NAMANTON ST EWISH COMMUNITY CENTER 33 NAMANTON ST EWISH COMMUNITY CENTER 33 NAMANTON ST EWISH COMMUNITY CENTER 31,001		}	1		
UBURNDALE, MA 02466 ARIH CÉNTER 50 BROOKLINE AVE 0STON, MA 02115 MC JIMMY FUND 7 FOURTH AVENUE EEDDHAM, MA 02494 ARI ULTIMATE FOOD - MASS ARTS 21 HUNTINGTON AVENUE 0STON, MA 02115 ARI ULTIMATE FOOD - MASS ARTS 21 HUNTINGTON AVENUE 0STON, MA 02115 ACING HISTORY AND OURSELVES 6 HURD RD, ROCKLINE, MA 02445 FUBLIC NON-RESTRICTED 7.00 PUBLIC NON-RESTRICTED 1.00 PUBLIC NON-RESTRICTED 2.00 TENISH COMMUNITY CENTER 33 NAHANTON ST FEWTON, MA 02459 1.001	MAYYIM HAYYIM		PUBLIC	NON-RESTRICTED	
AKIM CENTER 50 BROKLINE AVE GOTON, MA 02115 MC JIMMY FUND 7 FOURTH AVENUE EEDHAM, MA 02494 AK ULTIMATE FOOD - MASS ARTS 21 HUNTINOTON AVENUE OSTON, MA 02115 ACING HISTORY AND OURSELVES 6 HURD RD, ROOKLINE, MA 02445 HE N PUND - THE HIRIAM FUND 24 HIGH STREET OSTON, MA 02110 EWISH COMMUNITY CENTER 33 NAKANTON ST EWITH, MA 02459 PUBLIC NON-RESTRICTED NON-RESTRICTED ACING HISTORY AND OURSELVES 6 HURD RD, ROOKLINE, MA 02445 TON-RESTRICTED 1,000					1 000
SO BROOKLINE AVE OSTON, NA 02115 MC JIMNY FUND 7 FOURTH AVENUE EEDHAM, MA 02494 AX ULTIMATE FOOD - MASS ARTS 21 HUNTINOTON AVENUE OSTON, NA 02115 ACING HISTORY AND OURSELVES 6 HURD RD, BEOKRINE, MA 02445 WE N FUND - THE MIRIAM FUND 26 HIGH STREET OSTON, MA 02110 PUBLIC NON-RESTRICTED NON-RESTRICTED NON-RESTRICTED 2,004 PUBLIC NON-RESTRICTED NON-RESTRICTED 1,004 1,004 1,004	AUBURNDALE, MA UZ466	 	 	 	1,000
SO BROOKLINE AVE OSTON, NA 02115 MC JIMNY FUND 7 FOURTH AVENUE EEDHAM, MA 02494 AX ULTIMATE FOOD - MASS ARTS 21 HUNTINOTON AVENUE OSTON, NA 02115 ACING HISTORY AND OURSELVES 6 HURD RD, BEOKRINE, MA 02445 WE N FUND - THE MIRIAM FUND 26 HIGH STREET OSTON, MA 02110 PUBLIC NON-RESTRICTED NON-RESTRICTED NON-RESTRICTED 2,004 PUBLIC NON-RESTRICTED NON-RESTRICTED 1,004 1,004 1,004					
MC JIMNY FUND 7 FOURTH AVENUE EEDHAM, MA 02494 25 AR ULTIMATE FOOD - MASS ARTS 21 MUNTINOTON AVENUE OSTON, MA 02115 ACKING HISTORY AND OURSELVES 6 HURD RD, RROOKLINE, MA 02445 THE N FUND - THE MIRIAM FUND 26 HIGH STREET OSTON, MA 02110 PUBLIC NON-RESTRICTED **ON-RESTRICTED	l.	PORTIC	NON-RESTRICTED	1	
MC JIMNY FUND 7 FOURTH AVENUE EEDHAM, MA 02494 25 AX ULTIMATE FOOD - MASS ARTS 21 HUNTINOTON AVENUE OSTON, NA 02115 ACING HISTORY AND OURSELVES 6 HURD RD, ROCKLINE, NA 02445 THE N FUND - THE MIRIAM FUND 26 HIGH STREET OSTON, NA 02110 EWISH COMMUNITY CENTER 33 NAHAMION ST EWION, MA 02459 PUBLIC NON-RESTRICTED NON-RESTRICTED 1,006					500
T FOURTH AVENUE REDHAM, MA 02494 AX ULTIMATE FOOD - MASS ARTS 21 HUNTINGTON AVENUE OSTON, MA 02115 ACKING HISTORY AND OURSELVES 6 HURD RD, RROOKLINE, MA 02445 WHE N FUND - THE MIRIAM FUND 26 HIGH STREET OSTON, MA 02110 EWISH COMMUNITY CENTER 33 MAHANTON ST EWTON, MA 02459 1,000		 	 	 	1
T FOURTH AVENUE REDHAM, MA 02494 AX ULTIMATE FOOD - MASS ARTS 21 HUNTINGTON AVENUE OSTON, MA 02115 ACKING HISTORY AND OURSELVES 6 HURD RD, RROOKLINE, MA 02445 WHE N FUND - THE MIRIAM FUND 26 HIGH STREET OSTON, MA 02110 EWISH COMMUNITY CENTER 33 MAHANTON ST EWTON, MA 02459 1,000	PMC JIMMY FIND		PUBLIC	NON-RESTRICTED	{
AX ULTIMATE FOOD - MASS ARTS 21 HUNTINGTON AVENUE 0STON, MA 02115 ACING HISTORY AND OURSELVES 6 HURD RD, ROOKLINE, MA 02445 THE N FUND - THE MIRIAM FUND 26 HIGH STREET 0STON, MA 02110 EWISH COMMUNITY CENTER 33 NAHANTON ST EWITON, MA 02459 PUBLIC NON-RESTRICTED PUBLIC NON-RESTRICTED 1,000	77 FOURTH AVENUE	J		1011 1120122	}
21 HUNTINGTON AVENUE OSTON, MA 02115 ACKING HISTORY AND OURSELVES 6 HURD RD, ROOKLINE, MA 02445 THE N FUND - THE MIRIAM FUND 26 HIGH STREET OSTON, MA 02110 TEWISH COMMUNITY CENTER 33 NAHANTON ST TEWTON, MA 02459 1,000	NEEDHAM, MA 02494		<u> </u>		250
21 HUNTINGTON AVENUE OSTON, MA 02115 ACKING HISTORY AND OURSELVES 6 HURD RD, ROOKLINE, MA 02445 THE N FUND - THE MIRIAM FUND 26 HIGH STREET OSTON, MA 02110 TEWISH COMMUNITY CENTER 33 NAHANTON ST TEWTON, MA 02459 1,000					
ACING HISTORY AND OURSELVES 6 HURD RD, REOKLINE, MA 02445 THE N FUND - THE MIRIAM FUND 26 HIGH STREET ROSTON, MA 02110 TEWISH COMMUNITY CENTER 33 NAHANTON ST EEWTON, MA 02459 1,000	MAX ULTIMATE FOOD - MASS ARTS		PUBLIC	NON-RESTRICTED	
FUBLIC NON-RESTRICTED 6 HURD RD, ROOKLINE, MA 02445 THE N FUND - THE MIRIAM FUND 26 HIGH STREET OSTON, MA 02110 TEWISH COMMUNITY CENTER 33 NAHANTON ST TEWTON, MA 02459 1,000	621 HUNTINGTON AVENUE	ì	1		İ
6 HURD RD, ROOKLINE, MA 02445 THE N FUND - THE MIRIAM FUND 26 HIGH STREET 10STON, MA 02110 TEWISH COMMUNITY CENTER 133 NAHANTON ST 1EWTON, MA 02459 1,000	BOSTON, MA 02115	 	<u> </u>	 	3,305
6 HURD RD, ROOKLINE, MA 02445 THE N FUND - THE MIRIAM FUND 26 HIGH STREET 10STON, MA 02110 TEWISH COMMUNITY CENTER 133 NAHANTON ST 1EWTON, MA 02459 1,000		Ì			}
HE N FUND - THE MIRIAM FUND 26 HIGH STREET HOSTON, MA 02110 PUBLIC NON-RESTRICTED 2,000 PUBLIC NON-RESTRICTED 1,000	FACING HISTORY AND OURSELVES	}	PUBLIC	NON-RESTRICTED	
HE N FUND - THE MIRIAM FUND 26 HIGH STREET OSTON, MA 02110 2,000 EWISH COMMUNITY CENTER 33 NAHANTON ST EWTON, MA 02459 1,000)	}		500
26 HIGH STREET OSTON, MA 02110 2,006 EWISH COMMUNITY CENTER 33 NAHANTON ST EWTON, MA 02459 1,006	BROOKLINE, MA 02445		 	 	500
26 HIGH STREET OSTON, MA 02110 2,006 EWISH COMMUNITY CENTER 33 NAHANTON ST EWTON, MA 02459 1,006	THE M PINE - THE MIDIAM PINE		DIIBI.TC	NON_PPCMPICMPD	
DOSTON, MA 02110 2,000 TEWISH COMMUNITY CENTER PUBLIC NON-RESTRICTED TEWTON, MA 02459 1,000		,	F OBBIC	NON-RESTRICTED	ĺ
TEWISH COMMUNITY CENTER 133 NAHANTON ST TEWTON, MA 02459 1,000	BOSTON, MA 02110	ì	1		2,000
1,000 MA 02459 1,000 MA 02459 1,000 MA 02459 1,000 MA 02459 1,000 MA 02459 1,000 MA 02459 1,000 MA 02459 MA 0259 MA					
TEWTON, MA 02459	JEWISH COMMUNITY CENTER		PUBLIC	NON-RESTRICTED	-
	333 NAHANTON ST)	}	1	
Total from continuation sheets	NEWTON, MA 02459	 	 	 	1,000
Total from continuation sheets			}		
Total from continuation sheets			}		1
Total from continuation sheets			ļ	-	
Total from continuation sheets		ļ			
Total from continuation sheets		}			
Total from continuation sheets			<u> </u>		
Total from continuation sheets					
Total from continuation sheets					
Total from continuation sheets					
	Total from continuation sheets	····		_	<u>t</u>

FORM 990-PF INTEREST	ON SAVIN	GS AND TEM	PORARY	CASH IN	VESTMENTS	STATEMENT 1
SOURCE		(A REVEI PER BO	NUE		(B) VESTMENT COME	(C) ADJUSTED NET INCOME
NATIONAL FINANCIAL SER	VICES		2.		2.	
TOTAL TO PART I, LINE	3		2.		2.	
FORM 990-PF D	OIVIDENDS	AND INTER	EST FR	OM SECUR	ITIES	STATEMENT 2
	GROSS AMOUNT	CAPITAL GAINS DIVIDEND	R	(A) EVENUE R BOOKS	(B) NET INVES MENT INCO	
NATIONAL FINANCIAL SERVICES LLC	1,795.		0.	1,795.	1,79	5.
TO PART I, LINE 4	1,795.		0.	1,795.	1,79	5.
FORM 990-PF		ACCOUNTI	NG FEE:	S		STATEMENT 3
DESCRIPTION		(A) EXPENSES PER BOOKS	NET I		(C) ADJUSTED NET INCOM	CHARITABLE
TAX PREPARATION FEES		3,530.		0.		0.
TO FORM 990-PF, PG 1,	LN 16B	3,530.		0.		0.
FORM 990-PF		TAX	ES			STATEMENT 4
DESCRIPTION		(A) EXPENSES PER BOOKS	NET I	B) NVEST- INCOME	(C) ADJUSTED NET INCOM	
FEDERAL TAXES		405.		0.		0.
TO FORM 990-PF, PG 1,	LN 18	405.		0.		0.

FORM 990-PF	OTHER E	XPENSES		STATEMENT	5
DESCRIPTION	(A) (B) EXPENSES NET INVEST- AD PTION PER BOOKS MENT INCOME NET				
COMMONWEALTH OF MA - FILING FEES	35.	0.			0.
TO FORM 990-PF, PG 1, LN 23	35.	0.			0.
FORM 990-PF	CORPORAT	E STOCK		STATEMENT	6
DESCRIPTION		во	OK VALUE	FAIR MARKE	T
NATIONAL FINANCIAL SERVICES	LLC		167,069.	616,5	29.
TOTAL TO FORM 990-PF, PART I	I, LINE 10B		167,069.	616,5	29.
	F SUBSTANTIA PART VII-A,	L CONTRIBUTOR LINE 10	S	STATEMENT	7
NAME OF CONTRIBUTOR	ADDR	ESS			
ROBERT AND SUSAN SCHECHTER		OBIN ROAD			

NAME OF MANAGER

ROBERT P. SCHECHTER SUSAN P. SCHECHTER