

Form **990-PF**

Department of the Treasury
Internal Revenue Service

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 instructions is at www.irs.gov/form990pf.

OMB No 1545-0052

2015

Open to Public Inspection

For calendar year 2015, or tax year beginning 05-01-2015, and ending 04-30-2016

Name of foundation THE SUSAN PECHTER CHARITABLE FOUNDATION		A Employer identification number 22-3053745
Number and street (or P O box number if mail is not delivered to street address) C/O B LICHTMAN 14 GROVE HILL ROAD	Room/suite	B Telephone number (see instructions) (203) 397-9061
City or town, state or province, country, and ZIP or foreign postal code WOODBRIDGE, CT 06525		C If exemption application is pending, check here <input type="checkbox"/>
G Check all that apply: <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Address change <input type="checkbox"/> Name change		D 1. Foreign organizations, check here <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>
H Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) \$ 382,883	J Accounting method: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ (Part I, column (d) must be on cash basis.)	F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>

Part I Analysis of Revenue and Expenses <i>(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))</i>		Revenue and expenses per books (a)	Net investment income (b)	Adjusted net income (c)	Disbursements for charitable purposes (d) (cash basis only)
Revenue	1 Contributions, gifts, grants, etc., received (attach schedule)	11,375			
	2 Check <input type="checkbox"/> if the foundation is not required to attach Sch B				
	3 Interest on savings and temporary cash investments				
	4 Dividends and interest from securities	12,405	12,405		
	5a Gross rents				
	b Net rental income or (loss) _____				
	6a Net gain or (loss) from sale of assets not on line 10 _____	-4,300			
	b Gross sales price for all assets on line 6a _____ 55,750				
	7 Capital gain net income (from Part IV, line 2)		0		
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances _____				
b Less Cost of goods sold					
c Gross profit or (loss) (attach schedule)					
11 Other income (attach schedule)					
12 Total. Add lines 1 through 11	19,480	12,405			
Operating and Administrative Expenses	13 Compensation of officers, directors, trustees, etc	8,000	8,000		0
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees (attach schedule).				
	b Accounting fees (attach schedule).	1,075	1,075		0
	c Other professional fees (attach schedule)	5,468	5,468		0
	17 Interest				
	18 Taxes (attach schedule) (see instructions)	2,065	2,065		0
	19 Depreciation (attach schedule) and depletion				
	20 Occupancy				
	21 Travel, conferences, and meetings.				
	22 Printing and publications				
	23 Other expenses (attach schedule).				
	24 Total operating and administrative expenses. Add lines 13 through 23	16,608	16,608		0
	25 Contributions, gifts, grants paid	18,035			18,035
26 Total expenses and disbursements. Add lines 24 and 25	34,643	16,608		18,035	
27 Subtract line 26 from line 12					
a Excess of revenue over expenses and disbursements	-15,163				
b Net investment income (if negative, enter -0-)		0			
c Adjusted net income (if negative, enter -0-)					

Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1 Cash—non-interest-bearing	23,073	13,034	13,034
	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 (attach schedule) (see instructions).			
	7 Other notes and loans receivable (attach schedule) ▶ _____ Less allowance for doubtful accounts ▶ _____			
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges			
	10a Investments—U S and state government obligations (attach schedule)			
	b Investments—corporate stock (attach schedule)			
	c Investments—corporate bonds (attach schedule)			
	11 Investments—land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
	12 Investments—mortgage loans.			
	13 Investments—other (attach schedule)	316,546	311,422	355,349
	14 Land, buildings, and equipment basis ▶ _____ 14,500 Less accumulated depreciation (attach schedule) ▶ _____	14,500	14,500	14,500
15 Other assets (describe ▶ _____)				
16 Total assets (to be completed by all filers—see the instructions Also, see page 1, item I)	354,119	338,956	382,883	
Liabilities	17 Accounts payable and accrued expenses			
	18 Grants payable			
	19 Deferred revenue			
	20 Loans from officers, directors, trustees, and other disqualified persons			
	21 Mortgages and other notes payable (attach schedule).			
	22 Other liabilities (describe ▶ _____)			
	23 Total liabilities (add lines 17 through 22)	0	0	
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here <input type="checkbox"/> and complete lines 24 through 26 and lines 30 and 31.			
	24 Unrestricted			
	25 Temporarily restricted			
	26 Permanently restricted			
	Foundations that do not follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 31.			
	27 Capital stock, trust principal, or current funds	0	0	
	28 Paid-in or capital surplus, or land, bldg, and equipment fund	0	0	
	29 Retained earnings, accumulated income, endowment, or other funds	354,119	338,956	
30 Total net assets or fund balances (see instructions)	354,119	338,956		
31 Total liabilities and net assets/fund balances (see instructions)	354,119	338,956		

Part III Analysis of Changes in Net Assets or Fund Balances			
1	Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	354,119
2	Enter amount from Part I, line 27a	2	-15,163
3	Other increases not included in line 2 (itemize) ▶ _____	3	0
4	Add lines 1, 2, and 3	4	338,956
5	Decreases not included in line 2 (itemize) ▶ _____	5	0
6	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30	6	338,956

Part IV Capital Gains and Losses for Tax on Investment Income

	List and describe the kind(s) of property sold (e.g., real estate, (a) 2-story brick warehouse, or common stock, 200 shs MLC Co)	How acquired	Date acquired	Date sold
		(b) P—Purchase D—Donation	(c) (mo, day, yr)	(d) (mo, day, yr)
1a	See Additional Data Table			
b				
c				
d				
e				

	(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	See Additional Data Table			
b				
c				
d				
e				

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
a	See Additional Data Table		
b			
c			
d			
e			

2	Capital gain net income or (net capital loss)	{ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }	2	-4,300
3	Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8		}	3

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

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income)
 If section 4940(d)(2) applies, leave this part blank

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? Yes No
 If "Yes," the foundation does not qualify under section 4940(e) Do not complete this part

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

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2014			
2013			
2012			
2011			
2010			
2	Total of line 1, column (d).		2
3	Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years		3
4	Enter the net value of noncharitable-use assets for 2015 from Part X, line 5.		4
5	Multiply line 4 by line 3.		5
6	Enter 1% of net investment income (1% of Part I, line 27b).		6
7	Add lines 5 and 6.		7
8	Enter qualifying distributions from Part XII, line 4.		8

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate See the Part VI instructions

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the instructions)

Table with 11 rows for excise tax calculations. Includes fields for exempt foundations, domestic foundations, tax under section 511, and credits/payments. Total tax due is 0, with 440 overpaid and 440 refunded.

Part VII-A Statements Regarding Activities

Table with 10 rows for activity statements. Includes questions about political influence, political expenditures, and state reporting. Most 'Yes'/'No' boxes are blank.

Part VII-A Statements Regarding Activities (continued)

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions).	11		No
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions)	12		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address N/A	13	Yes	
14	The books are in care of BARBARA LICHTMAN Telephone no (203) 397-9061 Located at 14 GROVE HILL ROAD WOODBRIDGE CT ZIP+4 06525			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —Check here <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the year 15			
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) If "Yes", enter the name of the foreign country	16	Yes	No

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

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

1a	During the year did the foundation (either directly or indirectly)	Yes	No
(1)	Engage in the sale or exchange, or leasing of property with a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(2)	Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(3)	Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(4)	Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(5)	Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(6)	Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? <input type="checkbox"/> Organizations relying on a current notice regarding disaster assistance check here <input type="checkbox"/>	1b	
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2015?	1c	No
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))		
a	At the end of tax year 2015, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2015? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," list the years 20 , 20 , 20 , 20		
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement—see instructions)	2b	
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here 20 , 20 , 20 , 20		
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b	If "Yes," did it have excess business holdings in 2015 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (<i>Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2015.</i>)	3b	
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	No
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2015?	4b	No

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (Continued)

5a During the year did the foundation pay or incur any amount to

(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? Yes No

(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive? Yes No

(3) Provide a grant to an individual for travel, study, or other similar purposes? Yes No

(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? (see instructions). Yes No

(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? Yes No

b If any answer is "Yes" to 5a(1)–(5), did **any** of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)? Yes No
Organizations relying on a current notice regarding disaster assistance check here.

c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? Yes No
If "Yes," attach the statement required by Regulations section 53.4945–5(d).

6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Yes No

b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? Yes No
If "Yes" to 6b, file Form 8870.

7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? Yes No

b If yes, did the foundation receive any proceeds or have any net income attributable to the transaction? Yes No

5b		
6b		No
7b		

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

1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).

(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
BARBARA LICHTMAN 14 GROVE HILL ROAD WOODBRIIDGE, CT 06525	PRESIDENT/SECRETARY 5 00	8,000	0	0
STEVEN PECHTER 14 GROVE HILL ROAD WOODBRIIDGE, CT 06525	VICE PRESIDENT/ TREASURER 0 00	0	0	0

2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."

(a) Name and address of each employee paid more than \$50,000	Title, and average hours per week (b) devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				

Total number of other employees paid over \$50,000. 0

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

3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE".

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		

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

Part IX-A Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1 NONE	0
2	
3	
4	

Part IX-B Summary of Program-Related Investments (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 N/A	0
2	
All other program-related investments. See instructions.	
3	

Total. Add lines 1 through 3. 0

Part X Minimum Investment Return

(All domestic foundations must complete this part. Foreign foundations, see 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	368,384
b	Average of monthly cash balances.	1b	0
c	Fair market value of all other assets (see instructions).	1c	14,500
d	Total (add lines 1a, b, and c).	1d	382,884
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation).	1e	0
2	Acquisition indebtedness applicable to line 1 assets.	2	0
3	Subtract line 2 from line 1d.	3	382,884
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	5,743
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	377,141
6	Minimum investment return. Enter 5% of line 5.	6	18,857

Part XI Distributable Amount

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

1	Minimum investment return from Part X, line 6.	1	18,857
2a	Tax on investment income for 2015 from Part VI, line 5.	2a	
b	Income tax for 2015 (This does not include the tax from Part VI).	2b	
c	Add lines 2a and 2b.	2c	0
3	Distributable amount before adjustments Subtract line 2c from line 1.	3	18,857
4	Recoveries of amounts treated as qualifying distributions.	4	0
5	Add lines 3 and 4.	5	18,857
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	18,857

Part XII 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	18,035
b	Program-related investments—total from Part IX-B.	1b	0
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc , purposes.	2	
3	Amounts set aside for specific charitable projects that satisfy the		
a	Suitability test (prior IRS approval required).	3a	
b	Cash distribution test (attach the required schedule).	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	18,035
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 (see instructions).	5	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4.	6	18,035

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

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
1 Distributable amount for 2015 from Part XI, line 7				18,857
2 Undistributed income, if any, as of the end of 2015				
a Enter amount for 2014 only.			0	
b Total for prior years 20___, 20___, 20___		0		
3 Excess distributions carryover, if any, to 2015				
a From 2010.	12,263			
b From 2011.	8,925			
c From 2012.	4,971			
d From 2013.	1,714			
e From 2014.	17,697			
f Total of lines 3a through e.	45,570			
4 Qualifying distributions for 2015 from Part XII, line 4 ▶ \$ _____ 18,035				
a Applied to 2014, 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			
d Applied to 2015 distributable amount.				18,035
e Remaining amount distributed out of corpus	0			
5 Excess distributions carryover applied to 2015 (If an amount appears in column (d), the same amount must be shown in column (a).)	822			822
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	44,748			
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 2014 Subtract line 4a from line 2a Taxable amount—see instructions			0	
f Undistributed income for 2016 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2015				0
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions).	0			
8 Excess distributions carryover from 2010 not applied on line 5 or line 7 (see instructions).	11,441			
9 Excess distributions carryover to 2016. Subtract lines 7 and 8 from line 6a	33,307			
10 Analysis of line 9				
a Excess from 2011.	8,925			
b Excess from 2012.	4,971			
c Excess from 2013.	1,714			
d Excess from 2014.	17,697			
e Excess from 2015.				

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

1a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2015, enter the date of the ruling. . . . ▶

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

	Tax year	Prior 3 years			(e) Total
	(a) 2015	(b) 2014	(c) 2013	(d) 2012	
2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for 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 Information (Complete this part only if the organization had \$5,000 or more in assets at any time during the year—see instructions.)

1 Information Regarding Foundation Managers:

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

BARBARA LICHTMAN

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

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

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

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

BARBARA LICHTMAN
14 GROVE HILL ROAD
WOODBIDGE, CT 06525
(203) 397-9061

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

NONE

c Any submission deadlines

NONE

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

NONE

Part XV Supplementary Information(continued)

3 Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i> See Additional Data Table				
Total				3a 18,035
b <i>Approved for future payment</i>				
Total				3b 0

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d

(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	(c) Date acquired (mo, day, yr)	(d) Date sold (mo, day, yr)
614 SHS PROSHARES TRUST SHORT S&P 500	P	2015-08-24	2015-08-25
544 59 SHS ROYCE TOTAL RETURN FUND	P	2010-03-04	2015-07-07
947 82 SHS TEMPLETON BLOBAL BOND ADV	P	2010-03-04	2015-10-29
6 11 SHS TEMPLETON BLOBAL BOND ADV	P	2011-12-15	2015-10-29
3 91 SHS TEMPLETON BLOBAL BOND ADV	P	2012-07-16	2015-10-29
3 84 SHS TEMPLETON GLOBAL BOND ADV	P	2012-08-15	2015-10-29
3 08 SHS TEMPLETON GLOBAL BOND ADV	P	2012-09-17	2015-10-29
3 09 SHS TEMPLETON GLOBAL BOND ADV	P	2012-10-15	2015-10-29
3 09 SHS TEMPLETON GLOBAL BOND ADV	P	2012-11-15	2015-10-29
12 5 SHS TEMPLETON GLOBAL BOND ADV	P	2012-12-17	2015-10-29

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

(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)
13,815		14,573	-758
8,000		6,129	1,871
11,128		12,374	-1,246
72		80	-8
46		50	-4
45		51	-6
36		41	-5
36		41	-5
36		41	-5
147		165	-18

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
			-758
			1,871
			-1,246
			-8
			-4
			-6
			-5
			-5
			-5
			-18

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d

List and describe the kind(s) of property sold (e.g., real estate, (a) 2-story brick warehouse, or common stock, 200 shs MLC Co)	(b) How acquired P—Purchase D—Donation	Date acquired (c) (mo, day, yr)	(d) Date sold (mo, day, yr)
0 12 SHS TEMPLETON GOBAL BOND ADV	P	2012-12-17	2015-10-29
18 91SHS TEMPLETON GOBAL BOND ADV	P	2012-12-17	2015-10-29
3 2 SHS TEMPLETON GOBAL BOND ADV	P	2013-01-15	2015-10-29
3 19 SHS TEMPLETON GOBAL BOND ADV	P	2013-02-15	2015-10-29
3 22 SHS TEMPLETON GOBAL BOND ADV	P	2013-03-15	2015-10-29
3 2 SHS TEMPLETON GOBAL BOND ADV	P	2015-04-15	2015-10-29
3 19 SHS TEMPLETON GOBAL BOND ADV	P	2015-05-15	2015-10-29
3 34 SHS TEMPLETON GOBAL BOND ADV	P	2015-06-17	2015-10-29
3 36 SHS TEMPLETON GOBAL BOND ADV	P	2015-07-15	2015-10-29
3 42 SHS TEMPLETON GOBAL BOND ADV	P	2015-08-15	2015-10-29

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

(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)
1		2	-1
222		250	-28
38		43	-5
38		43	-5
38		43	-5
38		43	-5
37		44	-7
39		44	-5
39		44	-5
40		44	-4

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
			-1
			-28
			-5
			-5
			-5
			-5
			-7
			-5
			-5
			-4

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d

List and describe the kind(s) of property sold (e.g., real estate, (a) 2-story brick warehouse, or common stock, 200 shs MLC Co)	(b) How acquired P—Purchase D—Donation	Date acquired (c) (mo, day, yr)	(d) Date sold (mo, day, yr)
3 39 SHS TEMPLETON GOBAL BOND ADV	P	2013-09-16	2015-10-29
3 37 SHS TEMPLETON GOBAL BOND ADV	P	2013-10-15	2015-10-29
3 40 SHS TEMPLETON GOBAL BOND ADV	P	2013-11-15	2015-10-29
0 25 SHS TEMPLETON GOBAL BOND ADV	P	2013-12-16	2015-10-29
7 22 SHS TEMPLETON GOBAL BOND ADV	P	2013-12-16	2015-10-29
3 44 SHS TEMPLETON GOBAL BOND ADV	P	2014-01-15	2015-10-29
3 47 SHS TEMPLETON GOBAL BOND ADV	P	2014-02-18	2015-10-29
3 51 SHS TEMPLETON GOBAL BOND ADV	P	2014-03-17	2015-10-29
2 65 SHS TEMPLETON GOBAL BOND ADV	P	2014-04-15	2015-10-29
2 64 SHS TEMPLETON GOBAL BOND ADV	P	2014-05-15	2015-10-29

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

(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)
40		44	-4
40		44	-4
40		44	-4
3		3	0
85		94	-9
40		45	-5
41		45	-4
41		45	-4
31		35	-4
31		35	-4

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
			-4
			-4
			-4
			0
			-9
			-5
			-4
			-4
			-4
			-4

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d

List and describe the kind(s) of property sold (e.g., real estate, (a) 2-story brick warehouse, or common stock, 200 shs MLC Co)	(b) How acquired P—Purchase D—Donation	Date acquired (c) (mo, day, yr)	(d) Date sold (mo, day, yr)
2 62 SHS TEMPLETON GOBAL BOND ADV	P	2014-06-16	2015-10-29
2 64 SHS TEMPLETON GOBAL BOND ADV	P	2014-07-15	2015-10-29
2 62 SHS TEMPLETON GOBAL BOND ADV	P	2014-08-15	2015-10-29
2 66 SHS TEMPLETON GOBAL BOND ADV	P	2014-09-15	2015-10-29
2 69 SHS TEMPLETON GOBAL BOND ADV	P	2014-10-15	2015-10-29
2 67 SHS TEMPLETON GOBAL BOND ADV	P	2014-11-17	2015-10-29
2 46 SHS TEMPLETON GOBAL BOND ADV	P	2014-12-15	2015-10-29
43 51 SHS TEMPLETON GOBAL BOND ADV	P	2014-12-15	2015-10-29
2 97 SHS TEMPLETON GOBAL BOND ADV	P	2015-01-15	2015-10-29
2 94 SHS TEMPLETON GOBAL BOND ADV	P	2015-02-17	2015-10-29

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

(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)
31		35	-4
31		35	-4
31		35	-4
31		35	-4
32		35	-3
31		35	-4
29		30	-1
511		535	-24
35		37	-2
35		37	-2

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
			-4
			-4
			-4
			-4
			-3
			-4
			-1
			-24
			-2
			-2

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d

List and describe the kind(s) of property sold (e.g., real estate, (a) 2-story brick warehouse, or common stock, 200 shs MLC Co)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo, day, yr)	(d) Date sold (mo, day, yr)
2 99 SHS TEMPLETON GOBAL BOND ADV	P	2015-03-16	2015-10-29
2 97 SHS TEMPLETON GOBAL BOND ADV	P	2015-04-15	2015-10-29
2 98 SHS TEMPLETON GOBAL BOND ADV	P	2015-05-15	2015-10-29
3 03 SHS TEMPLETON GOBAL BOND ADV	P	2015-06-15	2015-10-29
3 04 SHS TEMPLETON GOBAL BOND ADV	P	2015-07-15	2015-10-29
3 18 SHS TEMPLETON GOBAL BOND ADV	P	2015-08-17	2015-10-29
3 22 SHS TEMPLETON GOBAL BOND ADV	P	2015-09-15	2015-10-29
3 20 SHS TEMPLETON GOBAL BOND ADV	P	2015-10-15	2015-10-29
1534 51 SHS TRANSPARENT VALUE DIRECTIONAL ALLOCATION FUND CLASS I	P	2013-11-04	2015-09-29
49 07 SHS TRANSPARENT VALUE DIRECTIONAL ALLOCATION FUND CLASS I	P	2013-12-27	2015-09-29

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

(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)
35		37	-2
35		37	-2
35		37	-2
36		37	-1
36		37	-1
37		37	0
38		37	1
38		37	1
17,678		21,383	-3,705
565		689	-124

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
			-2
			-2
			-2
			-1
			-1
			0
			1
			1
			-3,705
			-124

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d

List and describe the kind(s) of property sold (e.g., real estate, (a) 2-story brick warehouse, or common stock, 200 shs MLC Co.)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo, day, yr)	(d) Date sold (mo, day, yr)
0.09 SHS TRANSPARENT VALUE DIRECTIONAL ALLOCATION FUND CLASS I	P	2013-12-27	2015-09-29
183.33 SHS TRANSPARENT VALUE DIRECTIONAL ALLOCATION FUND CLASS I	P	2014-12-16	2015-09-29
2.09 SHS TRANSPARENT VALUE DIRECTIONAL ALLOCATION FUND CLASS I	P	2014-12-16	2015-09-29

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

(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)
1		1	0
2,112		2,228	-116
24		25	-1

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
			0
			-116
			-1

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
ANTI DEFAMATION LEAGUE 605 THIRD AVENUE NEW YORK, NY 10158	NO INDIVIDUAL	PUBLIC	OPERATIONS	1,525
ASPCA PO BOX 92240 WASHINGTON, DC 20090	NO INDIVIDUAL	PUBLIC	OPERATIONS	50
BEST FRIENDS ANIMAL SOCIETY 5001 ANGEL CANYON ROAD KANAB, UT 84741	NO INDIVIDUAL	PUBLIC	OPERATIONS	25
CANCER ACTION NETWORK 555 11TH STREET NW WASHINGTON, DC 20004	NO INDIVIDUAL	PUBLIC	OPERATIONS	50
COLUMBUS HOUSE 586 ELLA T GRASSO BLVD NEW HAVEN, CT 06519	NO INDIVIDUAL	PUBLIC	OPERATIONS	100
COMMUNITY SOUP KITCHEN 84 BROADWAY ROAD NEW HAVEN, CT 06511	NO INDIVIDUAL	PUBLIC	OPERATIONS	100
CONGREGATION B'NAI JACOB 25900 GREENFIELD ROAD 301 OAK PARK, MI 48237	NO INDIV	PUBLIC	OPERATIONS OPERATIONS	36
CONGREGATION MISHKAN ISRAEL 785 RIDGE ROAD HAMDEN, CT 06517	NO INDIV	PUBLIC	OPERATIONS	2,262
CONNECTICUT HUMANE SOCIETY 701 RUSSELL ROAD NEWINGTON, CT 06111	NO INDIV	PUBLIC	OPERATIONS	50
CONSUMER REPORTS FOUNDATION PO BOX 96552 WASHINGTON, DC 20090	NO INDIV	PUBLIC	OPERATIONS	33
CT HOSPITALS ASSOCIATION 110 BARNES ROAD WALLINGFORD, CT 06492	NO INDIVIDUAL	PUBLIC	OPERATIONS	15
DISCOVERY TO CURE 310 CEDAR STREET NEW HAVEN, CT 06520	NO INDIV	PUBLIC	OPERATIONS	200
DOCTORS WITHOUT BORDERS 333 7TH AVENUE NEW YORK, NY 10001	NO INDIV	PUBLIC	OPERATIONS	50
FIDELCO GUIDE DOG FDN INC 103 VISION WAY BLOOMFIELD, CT 06002	NO INDIVIDUAL	PUBLIC	OPERATIONS	100
FOOTE SCHOOL 50 LOOMIS PLACE NEW HAVEN, CT 06511	NO INDIVIDUAL	PUBLIC	OPERATIONS	100
Total				3a 18,035

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
FRIENDS OF WOODBRIDGE LIBRARY 10 NEWTON ROAD WOODBIDGE,CT 06525	NO INDIVIDUAL	PUBLIC	OPERATIONS	100
HAMDEN HALL COUNTRY DAY 1108 WHITNEY AVE HAMDEN,CT 06517	NO INDIV	PUBLIC	OPERATIONS	500
HUMANE SOCIETY - CONNECTICUT 701 RUSSELL ROAD NEWINGTON,CT 06111	NO INDIVIDUAL	PUBLIC	OPERATIONS	50
JEWISH COMM CTR OF GREATER NEW HAVEN 360 AMITY RD WOODBIDGE,CT 06525	NO INDIV	PUBLIC	OPERATIONS	4,036
JEWISH FEDERATION OF GREATER NEW HAVEN 360 AMITY RD WOODBIDGE,CT 06525	NO INDIVIDUAL	PUBLIC	OPERATIONS	5,172
JEWISH FOUNDATION OF GREATER NEW HAVEN 360 AMITY RD WOODBIDGE,CT 06525	NO INDIVIDUAL	PUBLIC	OPERATIONS	1,780
KEEPERS OF THE WILD 13441 E HWY 66 VALENTINE,AZ 86437	NO INDIV	PUBLIC	OPERATIONS	10
LEAP 31 JEFFERSON STREET NEW HAVEN,CT 06511	NO INDIVIDUAL	PUBLIC	OPERATIONS	50
LEUKEMIA AND LYMPHOMA SOCIETY 1311 MAMARONECK AVENUE WHITE PLAINS,NY 10605	NO INDIVIDUAL	PUBLIC	SCHOLARSHIP	450
LYMPHOMA RESEARCH FOUNDATION OF AMERICA 115 BROADWAY SUITE 1301 NEW YORK,NY 10006	NO INDIVIDUAL	PUBLIC	OPERATIONS	18
MORRIS ANIMAL FOUNDATION 10200 EAST GIRARD AVENUE DENVER,CO 80231	NO INDIV	PUBLIC	OPERATIONS	80
PETA 501 FRONT STREET NORFOLK,VA 23510	NO INDIV	PUBLIC	OPERATIONS	25
PULMONARY HYPERTENSION ASSOCIATION 801 ROEDER ROAD SUITE 1000 SILVER SPRING,MD 20910	NO INDIVIDUAL	PUBLIC	OPERATIONS	10
SHUBERT THEATER 247 COLLEGE STREET NEW HAVEN,CT 06510	NO INDIV	PUBLIC	OPERATIONS	500
SOUTHERN CT HEBREW ACADEMY 261 DERBY AVE ORANGE,CT 06477	NO INDIVIDUAL	PUBLIC	OPERATIONS	180
Total			3a	18,035

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
SPCA INTERNATIONAL PO BOX 92240 WASHINGTON,DC 20090	NO INDIVIDUAL	PUBLIC	OPERATIONS	63
ST JUDE CHILDRENS RESEARCH 262 DANNY THOMAS PLACE MEMPHIS,TN 38105	NO INDIVIDUAL	PUBLIC	OPERATIONS	25
THE ANIMAL CENTER 69 AUNT PARK LANE NEWTOWN,CT 06470	NO INDIV	PUBLIC	OPERATIONS	75
THE NATURE CONSERVANCY 575 STONE CUTTERS WAY MONTPELIER,VT 05602	NO INDIVIDUAL	PUBLIC	OPERATIONS	15
THIRTEEN PO BOX 1313 NEW YORK,NY 10101	NO INDIV	PUBLIC	OPERATIONS	100
YALE NEW HAVEN HOSPITAL PO BOX 1849 NEW HAVEN,CT 06519	NO INDIVIDUAL	PUBLIC	OPERATIONS	100
Total			3a	18,035

TY 2015 Accounting Fees Schedule

Name: THE SUSAN PECHTER CHARITABLE FOUNDATION

EIN: 22-3053745

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNTING FEES	1,075	1,075		0

TY 2015 Investments - Other Schedule

Name: THE SUSAN PECHTER CHARITABLE FOUNDATION

EIN: 22-3053745

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
DOMESTIC EQUITY MUTUAL FUNDS	AT COST	113,280	110,137
TAXABLE FIXED INCOME FUNDS	AT COST	91,527	93,613
EXCHANGE TRADED ETF FUNDS	AT COST	106,615	151,599

TY 2015 Other Professional Fees Schedule

Name: THE SUSAN PECHTER CHARITABLE FOUNDATION

EIN: 22-3053745

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
UBS FIDUCIARY FEES	5,228	5,228		0
BLUMBERG FEES	139	139		0
GREATLAND CORP FEES	101	101		0

TY 2015 Taxes Schedule

Name: THE SUSAN PECHTER CHARITABLE FOUNDATION

EIN: 22-3053745

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
TOWN OF ENFIELD, NH	1,445	1,445		0
IRS	620	620		0

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

Schedule of Contributors

OMB No 1545-0047

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

2015

Department of the Treasury
Internal Revenue Service

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

Name of the organization

THE SUSAN PECHTER CHARITABLE FOUNDATION

Employer identification number

22-3053745

Organization type (check one)

Filers of:

Section:

Form 990 or 990-EZ

501(c)() (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or other property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33¹/₃% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** \$5,000 or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year. . . . ▶ \$ _____

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization
THE SUSAN PECHTER CHARITABLE FOUNDATION

Employer identification number
22-3053745

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	MORTON PECHTER ESTATE 14 GROVE HILL ROAD WOODBRIIDGE, CT 06525	\$ 11,375	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)

Name of organization
THE SUSAN PECHTER CHARITABLE FOUNDATION

Employer identification number
22-3053745

Part 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
	_____ _____ _____	_____ \$	_____
	_____ _____ _____	_____ \$	_____
	_____ _____ _____	_____ \$	_____
	_____ _____ _____	_____ \$	_____
	_____ _____ _____	_____ \$	_____
	_____ _____ _____	_____ \$	_____

Name of organization
THE SUSAN PECHTER CHARITABLE FOUNDATION

Employer identification number
22-3053745

Part III 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 completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) ▶ \$ _____
Use duplicate copies of Part III if additional space is needed

(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	
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	
Transferee's name, address, and ZIP 4	Relationship of transferor to transferee
_____	_____
_____	_____
--	_____