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Form **990-PF**Department of the Treasury  
Internal Revenue Service**Return of Private Foundation**

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

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Information about Form 990-PF and its separate instructions is at [www.irs.gov/form990pf](http://www.irs.gov/form990pf)

OMB No 1545-0052

**2014**

Open to Public Inspection

For calendar year 2014 or tax year beginning

, 2014, and ending

, 20

Name of foundation

**MARGARET E BURNHAM CHARITABLE TRUST**

Number and street (or P O box number if mail is not delivered to street address)

Room/suite

P O BOX 31

City or town, state or province, country, and ZIP or foreign postal code

**PORTLAND, ME 04112-0031**

G Check all that apply:

Initial return

Final return

Address change

Initial return of a former public charity

Amended return

Name change

H Check type of organization:

☒ Section 501(c)(3) exempt private foundation☐ Section 4947(a)(1) nonexempt charitable trust☐ Other taxable private foundationI Fair market value of all assets at  
end of year (from Part II, col. (c), line  
16) \$ **8,464,614.**J Accounting method: ☒ Cash ☐ Accrual☐ Other (specify) \_\_\_\_\_

(Part I, column (d) must be on cash basis.)

A Employer identification number

**01-0496879**

B Telephone number (see instructions)

**207-772-3761**C If exemption application is  
pending, check here ☐D 1. Foreign organizations, check here ☐2. Foreign organizations meeting the  
85% test, check here and attach  
computation ☐E If private foundation status was terminated  
under section 507(b)(1)(A), check here ☐F If the foundation is in a 60-month termination  
under section 507(b)(1)(B), check here ☐**Part I Analysis of Revenue and Expenses** (The  
total of amounts in columns (b), (c), and (d)  
may not necessarily equal the amounts in  
column (a) (see instructions))(a) Revenue and  
expenses per  
books(b) Net investment  
income(c) Adjusted net  
income(d) Disbursements  
for charitable  
purposes  
(cash basis only)

Revenue

Operating and Administrative Expenses

1 Contributions, gifts, grants, etc., received (attach schedule)

2 Check ☐ if the foundation is not required to  
attach Sch B

3 Interest on savings and temporary cash investments

4 Dividends and interest from securities

5a Gross rents

b Net rental income or (loss)

6a Net gain or (loss) from sale of assets not on line 10

b Gross sales price for all  
assets on line 6a **2,714,440.**

7 Capital gain net income (from Part IV, line 2)

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

13 Compensation of officers, directors, trustees, etc.

14 Other employee salaries and wages

15 Pension plans, employee benefits

16a Legal fees (attach schedule)

b Accounting fees (attach schedule) STMT 3

c Other professional fees (attach schedule)

17 Interest

18 Taxes (attach schedule) (see instructions) STMT 4

19 Depreciation (attach schedule) and depletion

20 Occupancy

21 Travel, conferences, and meetings

22 Printing and publications

23 Other expenses (attach schedule) STMT 5

24 Total operating and administrative expenses.

Add lines 13 through 23.

25 Contributions, gifts, grants paid

26 Total expenses and disbursements. Add lines 24 and 25

27 Subtract line 26 from line 12:

a Excess of revenue over expenses and disbursements

b Net investment income (if negative, enter -0-)

c Adjusted net income (if negative, enter -0-)

**270,180.****270,179.****STMT 1****508,605.****508,605.****RECEIVED****MAY 08 2015****EX-101, 101****STMT 2****760.****779,545.****778,784.****50,812.****23,374.****27,438.****635.****318.****NONE****318.****1,778.****1,778.****2,557.****2,557.****55,782.****28,027.****NONE****27,756.****374,840.****374,840.****430,622.****28,027.****NONE****402,596.****348,923.****750,757.**

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 . . . . .				
	2	Savings and temporary cash investments . . . . .		31,108.	14,227.	14,227.
	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) . <b>STMT 6</b> . . . . .	5,756,992.	5,839,324.	7,498,956.	
	c	Investments - corporate bonds (attach schedule) . <b>STMT 8</b> . . . . .	356.	230,506.	241,058.	
	11	Investments - land, buildings, and equipment: basis . . . . .				
	Less: accumulated depreciation (attach schedule) ▶ . . . . .					
12	Investments - mortgage loans . . . . .					
13	Investments - other (attach schedule) . . . . . <b>STMT 9</b> . . . . .	796,620.	796,620.	710,373.		
14	Land, buildings, and equipment: basis . . . . .					
	Less: accumulated depreciation (attach schedule) ▶ . . . . .					
15	Other assets (describe ▶ . . . . .)					
16	<b>Total assets</b> (to be completed by all filers - see the instructions. Also, see page 1, item I) . . . . .	6,585,076.	6,880,677.	8,464,614.		
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	<b>Total liabilities</b> (add lines 17 through 22) . . . . .		NONE		
Net Assets or Fund Balances	<b>Foundations that follow SFAS 117, check here ▶ <input type="checkbox"/></b> <b>and complete lines 24 through 26 and lines 30 and 31.</b>					
	24	Unrestricted . . . . .				
	25	Temporarily restricted . . . . .				
	26	Permanently restricted . . . . .				
	<b>Foundations that do not follow SFAS 117, . . . ▶ <input checked="" type="checkbox"/></b> <b>check here and complete lines 27 through 31.</b>					
	27	Capital stock, trust principal, or current funds . . . . .	6,585,076.	6,880,677.		
	28	Paid-in or capital surplus, or land, bldg, and equipment fund . . . . .				
	29	Retained earnings, accumulated income, endowment, or other funds . . . . .				
	30	<b>Total net assets or fund balances</b> (see instructions) . . . . .	6,585,076.	6,880,677.		
	31	<b>Total liabilities and net assets/fund balances</b> (see instructions) . . . . .	6,585,076.	6,880,677.		

## 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	6,585,076.
2	Enter amount from Part I, line 27a . . . . .	2	348,923.
3	Other increases not included in line 2 (itemize) ▶ <b>ROUNDING</b> . . . . .	3	1.
4	Add lines 1, 2, and 3 . . . . .	4	6,934,000.
5	Decreases not included in line 2 (itemize) ▶ <b>SEE STATEMENT 10</b> . . . . .	5	53,323.
6	<b>Total net assets or fund balances at end of year</b> (line 4 minus line 5) - Part II, column (b), line 30 . . . . .	6	6,880,677.

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

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co)			(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
<b>1a PUBLICLY TRADED SECURITIES</b>					
<b>b</b>					
<b>c</b>					
<b>d</b>					
<b>e</b>					
(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)		
<b>a</b> 2,714,440.		2,205,835.	508,605.		
<b>b</b>					
<b>c</b>					
<b>d</b>					
<b>e</b>					
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(i) 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			
<b>a</b>			508,605.		
<b>b</b>					
<b>c</b>					
<b>d</b>					
<b>e</b>					
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	508,605.	
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 the 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))
2013	338,508.	7,477,470.	0.045270
2012	321,740.	6,736,512.	0.047761
2011	286,322.	6,398,726.	0.044747
2010	270,488.	5,777,418.	0.046818
2009	287,701.	5,219,133.	0.055124
<b>2</b> Total of line 1, column (d)			0.239720
<b>3</b> 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			0.047944
<b>4</b> Enter the net value of noncharitable-use assets for 2014 from Part X, line 5			8,349,592.
<b>5</b> Multiply line 4 by line 3			400,313.
<b>6</b> Enter 1% of net investment income (1% of Part I, line 27b)			7,508.
<b>7</b> Add lines 5 and 6			407,821.
<b>8</b> Enter qualifying distributions from Part XII, line 4 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.			402,596.

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

1a Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1 . . . . . Date of ruling or determination letter: _____ (attach copy of letter if necessary - see instructions)		1	15,015.
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input type="checkbox"/> and enter 1% of Part I, line 27b . . . . .			
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).			
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		2	
3 Add lines 1 and 2 . . . . .		3	15,015.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		4	NONE
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- . . . . .		5	15,015.
6 Credits/Payments:			
a 2014 estimated tax payments and 2013 overpayment credited to 2014 . . . . .	6a	11,476.	
b Exempt foreign organizations - tax withheld at source . . . . .	6b	NONE	
c Tax paid with application for extension of time to file (Form 8868) . . . . .	6c	NONE	
d Backup withholding erroneously withheld . . . . .	6d		
7 Total credits and payments. Add lines 6a through 6d . . . . .	7	11,476.	
8 Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached . . . . .	8		
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed . . . . .	9	3,539.	
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid . . . . .	10		
11 Enter the amount of line 10 to be: Credited to 2015 estimated tax <input type="checkbox"/> NONE Refunded <input type="checkbox"/>	11		

**Part VII-A Statements Regarding Activities**

	Yes	No
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? . . . . .		X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the definition)? . . . . . If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.		X
c Did the foundation file Form 1120-POL for this year? . . . . .		X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. <input type="checkbox"/> \$ _____ (2) On foundation managers <input type="checkbox"/> \$ _____		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. <input type="checkbox"/> \$ _____		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? . . . . . If "Yes," attach a detailed description of the activities.		X
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes . . . . .		X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year? . . . . .		X
b If "Yes," has it filed a tax return on Form 990-T for this year? . . . . .		
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? . . . . . If "Yes," attach the statement required by General Instruction T.		X
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? . . . . .	X	
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	X	
8a Enter the states to which the foundation reports or with which it is registered (see instructions) <input type="checkbox"/> ME		
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation . . . . .	X	
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "Yes," complete Part XIV . . . . .		X
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses . . . . .		X

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

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions).	11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions).	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address <u>WWW.MEGRANTS.ORG/BURNHAM.HTML</u>	13	X	
14	The books are in care of <u>H M PAYSON &amp; CO</u> Telephone no. <u>(207) 772-3761</u> Located at <u>ONE PORTLAND SQUARE, PORTLAND, ME</u> ZIP+4 <u>04101</u>			
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. <u>15</u>			
16	At any time during calendar year 2014, 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 the instructions for exceptions and filing requirements for FinCEN Form 114, (formerly TD F 90-22.1). If "Yes," enter the name of the foreign country <u></u>	16	Yes	No X

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

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

	Yes	No
1a 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? <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 checked="" type="checkbox"/> Yes <input 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)? Organizations relying on a current notice regarding disaster assistance check here <input type="checkbox"/>	1b	X
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 2014?	1c	X
2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):		
a At the end of tax year 2014, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2014? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," list the years <u></u>		
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	X
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here <u></u>		
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 2014 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2014.)	3b	
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	X
b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2014?	4b	X

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

- 5a** During the year did the foundation pay or incur any amount to:
- (1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? ☐ Yes ☒ No
- (2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive? ☐ Yes ☒ No
- (3) Provide a grant to an individual for travel, study, or other similar purposes? ☐ Yes ☒ No
- (4) Provide a grant to an organization other than a charitable, etc., organization described in section 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

7b

X

**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	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
THOMAS PIERCE ONE PORTLAND SQUARE, PORTLAND, ME 04101	TRUSTEE 1	50,812.	-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	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE		NONE	NONE	NONE

**Total number of other employees paid over \$50,000** ☐ **NONE**

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**Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors** (continued)**3 Five highest-paid independent contractors for professional services** (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		NONE
Total number of others receiving over \$50,000 for professional services . . . . .		NONE

**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	
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 NONE	
2	
All other program-related investments. See instructions.	
3 NONE	
Total. Add lines 1 through 3 . . . . .	

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

<b>1</b>	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
<b>a</b>	Average monthly fair market value of securities . . . . .	<b>1a</b>	8,203,719.
<b>b</b>	Average of monthly cash balances . . . . .	<b>1b</b>	273,024.
<b>c</b>	Fair market value of all other assets (see instructions). . . . .	<b>1c</b>	NONE
<b>d</b>	<b>Total</b> (add lines 1a, b, and c) . . . . .	<b>1d</b>	8,476,743.
<b>e</b>	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation) . . . . .	<b>1e</b>	
<b>2</b>	Acquisition indebtedness applicable to line 1 assets . . . . .	<b>2</b>	NONE
<b>3</b>	Subtract line 2 from line 1d . . . . .	<b>3</b>	8,476,743.
<b>4</b>	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions). . . . .	<b>4</b>	127,151.
<b>5</b>	<b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3. Enter here and on Part V, line 4	<b>5</b>	8,349,592.
<b>6</b>	<b>Minimum investment return.</b> Enter 5% of line 5 . . . . .	<b>6</b>	417,480.

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

<b>1</b>	Minimum investment return from Part X, line 6 . . . . .	<b>1</b>	417,480.
<b>2a</b>	Tax on investment income for 2014 from Part VI, line 5 . . . . .	<b>2a</b>	15,015.
<b>b</b>	Income tax for 2014. (This does not include the tax from Part VI.) . . . . .	<b>2b</b>	
<b>c</b>	Add lines 2a and 2b . . . . .	<b>2c</b>	15,015.
<b>3</b>	Distributable amount before adjustments. Subtract line 2c from line 1 . . . . .	<b>3</b>	402,465.
<b>4</b>	Recoveries of amounts treated as qualifying distributions . . . . .	<b>4</b>	NONE
<b>5</b>	Add lines 3 and 4 . . . . .	<b>5</b>	402,465.
<b>6</b>	Deduction from distributable amount (see instructions). . . . .	<b>6</b>	NONE
<b>7</b>	<b>Distributable amount</b> as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 . . . . .	<b>7</b>	402,465.

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

<b>1</b>	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
<b>a</b>	Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26 . . . . .	<b>1a</b>	402,596.
<b>b</b>	Program-related investments - total from Part IX-B . . . . .	<b>1b</b>	
<b>2</b>	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes . . . . .	<b>2</b>	NONE
<b>3</b>	Amounts set aside for specific charitable projects that satisfy the:		
<b>a</b>	Suitability test (prior IRS approval required) . . . . .	<b>3a</b>	NONE
<b>b</b>	Cash distribution test (attach the required schedule) . . . . .	<b>3b</b>	NONE
<b>4</b>	<b>Qualifying distributions.</b> Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	<b>4</b>	402,596.
<b>5</b>	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b (see instructions) . . . . .	<b>5</b>	N/A
<b>6</b>	<b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4 . . . . .	<b>6</b>	402,596.

**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 2013	(c) 2013	(d) 2014
<b>1</b> Distributable amount for 2014 from Part XI, line 7 . . . . .				402,465.
<b>2</b> Undistributed income, if any, as of the end of 2014			NONE	
<b>a</b> Enter amount for 2013 only . . . . .				
<b>b</b> Total for prior years 20 <u>12</u> , 20 <u>20</u> , 20 <u>20</u>		NONE		
<b>3</b> Excess distributions carryover, if any, to 2014:				
<b>a</b> From 2009 . . . . .	7,334.			
<b>b</b> From 2010 . . . . .	10,343.			
<b>c</b> From 2011 . . . . .	NONE			
<b>d</b> From 2012 . . . . .	8,623.			
<b>e</b> From 2013 . . . . .	NONE			
<b>f</b> Total of lines 3a through e . . . . .	26,300.			
<b>4</b> Qualifying distributions for 2014 from Part XII, line 4: ► \$ <u>402,596.</u>				
<b>a</b> Applied to 2013, but not more than line 2a . . .			NONE	
<b>b</b> Applied to undistributed income of prior years (Election required - see instructions) . . . . .		NONE		
<b>c</b> Treated as distributions out of corpus (Election required - see instructions) . . . . .	NONE			
<b>d</b> Applied to 2014 distributable amount . . . . .				402,465.
<b>e</b> Remaining amount distributed out of corpus . .	131.			
<b>5</b> Excess distributions carryover applied to 2014 . (If an amount appears in column (d), the same amount must be shown in column (a).)	NONE			NONE
<b>6</b> Enter the net total of each column as indicated below:				
<b>a</b> Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	26,431.			
<b>b</b> Prior years' undistributed income. Subtract line 4b from line 2b . . . . .		NONE		
<b>c</b> Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed . . . . .		NONE		
<b>d</b> Subtract line 6c from line 6b. Taxable amount - see instructions . . . . .		NONE		
<b>e</b> Undistributed income for 2013. Subtract line 4a from line 2a. Taxable amount - see instructions . . . . .			NONE	
<b>f</b> Undistributed income for 2014. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2015 . . . . .				NONE
<b>7</b> 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) . . . . .	NONE			
<b>8</b> Excess distributions carryover from 2009 not applied on line 5 or line 7 (see instructions) . . .	7,334.			
<b>9</b> Excess distributions carryover to 2015. Subtract lines 7 and 8 from line 6a . . . . .	19,097.			
<b>10</b> Analysis of line 9:				
<b>a</b> Excess from 2010 . . . . .	10,343.			
<b>b</b> Excess from 2011 . . . . .	NONE			
<b>c</b> Excess from 2012 . . . . .	8,623.			
<b>d</b> Excess from 2013 . . . . .	NONE			
<b>e</b> Excess from 2014 . . . . .	131.			

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

NOT APPLICABLE

**1a** If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2014, enter the date of the ruling ▶

**b** Check box to indicate whether the foundation is a private operating foundation described in section

4942(j)(3) or

4942(j)(5)

**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 . . . . .

⑥ 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** . . . . .

(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 (i)(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 foundation had \$5,000 or more in assets at any time during the year - see instructions.)**

### 1 Information Regarding Foundation Managers:

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

N/A

**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.

N/A

**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:

SEE STATEMENT 11

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

SEE ATTACHED STATEMENT FOR LINE 2

**c Any submission deadlines:**

SEE ATTACHED STATEMENT FOR LINE 2

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

SEE ATTACHED STATEMENT FOR LINE 2

**Part XV Supplementary Information (continued)****3 Grants and Contributions Paid During the Year or Approved for Future Payment**

<div>Recipient</div> <div>Name and address (home or business)</div>	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
<b>a Paid during the year</b>  <b>SEE ATTACHED</b>				<b>374,840.</b>
<b>Total</b>			<b>3a</b>	<b>374,840.</b>
<b>b Approved for future payment</b>				
<b>Total</b>			<b>3b</b>	

## Enter gross amounts unless otherwise indicated.

Enter gross amounts unless otherwise indicated.		Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See instructions.)
		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	
<b>1</b> Program service revenue:						
a _____						
b _____						
c _____						
d _____						
e _____						
f _____						
g Fees and contracts from government agencies						
<b>2</b> Membership dues and assessments . . . . .						
<b>3</b> Interest on savings and temporary cash investments						
<b>4</b> Dividends and interest from securities . . . . .				14	270,180.	
<b>5</b> Net rental income or (loss) from real estate:						
a Debt-financed property . . . . .						
b Not debt-financed property . . . . .						
<b>6</b> Net rental income or (loss) from personal property .						
<b>7</b> Other investment income . . . . .						
<b>8</b> Gain or (loss) from sales of assets other than inventory				18	508,605.	
<b>9</b> Net income or (loss) from special events . . . . .						
<b>10</b> Gross profit or (loss) from sales of inventory . .						
<b>11</b> Other revenue: a _____						
b _____				14	760.	
c _____						
d _____						
e _____						
<b>12</b> Subtotal. Add columns (b), (d), and (e) . . . . .					779,545.	
<b>13</b> Total. Add line 12, columns (b), (d), and (e) . . . . .						779,545.

Line No.	▼																																																																																							

NOT APPLICABLE

**Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations**

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

[illegible]

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

(a) Name of organization	(b) Type of organization	(c) Description of relationship

**Sign  
Here**

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Signature of officer or trustee

04/24/2015  
Date

**TRUSTEE**  
Title

May the IRS discuss this return with the preparer shown below (see instructions)? ☒ Yes ☐ No

H M PAYSON & CO

**Paid  
Preparer  
Use Only**

Print/Type preparer's name

MICHELE L DORE. EA

Preparer's signature

Preparer's signature Michael L. Dore

Date

04/24/2015

Check ☐ if self-employed

PTIN	
------	--

P00637410

Firm's name ▶ ERNST & YOUNG U.S. LLP

Firm's EIN ▶ 34-6565596

Firm's address ► 2100 E. CARY STREET, SUITE 201  
RICHMOND, VA 2

Phone no 804-344-4548

FORM 990PF, PART I - DIVIDENDS AND INTEREST FROM SECURITIES  
=====

DESCRIPTION -----	REVENUE AND EXPENSES PER BOOKS -----	NET INVESTMENT INCOME -----
DIVIDENDS AND INTEREST	270,180.	270,179.
	-----	-----
TOTAL	270,180.	270,179.
	=====	=====

FORM 990PF, PART I - OTHER INCOME  
=====

DESCRIPTION -----	REVENUE AND EXPENSES PER BOOKS -----
FEDERAL EXCISE TAX REFUND	760.
	-----
TOTALS	760.
	=====



FORM 990PF, PART I - ACCOUNTING FEES  
=====

DESCRIPTION -----	REVENUE AND EXPENSES PER BOOKS -----	NET INVESTMENT INCOME -----	ADJUSTED NET INCOME -----	CHARITABLE PURPOSES -----
ACCOUNTING FEES	635.	318.		318.
TOTALS	635.	318.	NONE	318.
	=====	=====	=====	=====

FORM 990PF, PART I - TAXES

=====

DESCRIPTION	REVENUE AND EXPENSES PER BOOKS	NET INVESTMENT INCOME
-----	-----	-----
FOREIGN TAXES	236.	236.
FOREIGN TAXES ON QUALIFIED FOR	812.	812.
FOREIGN TAXES ON NONQUALIFIED	730.	730.
-----	-----	-----
TOTALS	1,778.	1,778.
	=====	=====

FORM 990PF, PART I - OTHER EXPENSES  
=====

DESCRIPTION -----	REVENUE AND EXPENSES PER BOOKS -----	NET INVESTMENT INCOME -----
OTHER NON-ALLOCABLE EXPENSE -	2,057.	2,057.
OTHER NON-ALLOCABLE EXPENSE -	500.	500.
TOTALS	----- 2,557. =====	----- 2,557. =====

FORM 990PF, PART II - CORPORATE STOCK  
=====

DESCRIPTION -----	ENDING BOOK VALUE -----	ENDING FMV ---
WELLS FARGO & CO	182,453.	243,675.
ABBOTT LABORATORIES	128,104.	214,070.
JOHNSON AND JOHNSON	28,820.	222,211.
GENERAL DYNAMICS CORP	60,411.	261,616.
HARRIS CORP	143,388.	231,332.
MICROSOFT CORP	162,771.	282,602.
AFLAC INC	167,478.	211,982.
UNITED TECHNOLOGIES CORP	149,984.	219,075.
HASBRO INC		
BERKSHIRE HATHAWAY INC	176,239.	332,582.
PARKER HANNIFIN CORP		
APPLE INC	151,421.	313,700.
INTEL CORP	137,667.	228,119.
MCDONALDS CORP	186,204.	198,176.
WEIGHT WATCHERS INTL INC		
WILEY JOHN & SONS INC	113,733.	177,424.
PEPSICO INC	143,162.	215,408.
BP PLC SPONS ADR	221,685.	186,102.
CONOCOPHILLIPS		
PEABODY ENERGY CORP		
AMERICAN INTERNATIONAL GROUP	142,852.	245,884.
BANK OF AMERICA	158,220.	312,878.
LABORATORY CORP OF AMERICA		
TEVA PHARMACEUTICAL IND		
JOY GLOBAL INC	135,678.	112,206.
COACH INC		
CISCO SYSTEMS INC	173,013.	230,698.
DANAHER CORP	190,857.	235,703.
DEVON ENERGY CORP	211,137.	209,032.

FORM 990PF, PART II - CORPORATE STOCK  
=====

DESCRIPTION -----	ENDING BOOK VALUE -----	ENDING FMV ----
DIRECTV CLASS A	142,613.	192,474.
INTERNATIONAL BUSINESS MACHINE	197,453.	167,820.
MARATHON PETE CORP		
SPIRIT AEROSYSTEMS HLDS INC		
BAXTER INTERNATIONAL INC		
AGCO CORP DE	202,341.	226,539.
AMBEV SA SPONSORED ADR	214,919.	179,354.
CALIFORNIA RES CORP COM	184,222.	177,096.
EXPRESS SCRIPTS HLDGS CO	86,262.	74,313.
EXXON MOBIL CORP	210,707.	238,092.
MASTERCARD INC CLASS A	202,513.	192,204.
OCCIDENTAL PETROLEUM CORP	121,392.	139,407.
QUALCOMM INC	164,877.	135,828.
VERIZON COMMUNICATIONS INC	209,127.	202,401.
VISA INC CLASS A SHARES	70,353.	70,451.
VODAFONE GROUP PLC ADR	141,886.	179,607.
WALMART INC	314,204.	197,229.
	211,178.	241,666.
	-----	-----
TOTALS	5,839,324.	7,498,956.
	=====	=====

FORM 990PF, PART II - CORPORATE BONDS  
=====

DESCRIPTION -----	ENDING BOOK VALUE -----	ENDING FMV -----
FNMA POOL 5.5% 10/01/16	215.	204.
VALEANT PHARMACEUTICALS INSTL	230,291.	240,854.
	-----	-----
TOTALS	230,506.	241,058.
	=====	=====

MARGARET E BURNHAM CHARITABLE TRUST

01-0496879

FORM 990PF, PART II - OTHER INVESTMENTS  
=====

DESCRIPTION -----	COST/ FMV C OR F -----	ENDING BOOK VALUE -----	ENDING FMV ---
PROSHARES TRUST ULTRASHORT	C	119,358.	28,994.
VANGUARD EMERGING MKTS	C	339,627.	310,155.
VANGUARD DEV EX NORTH AMERICA	C	337,635.	371,224.
		-----	-----
TOTALS		796,620.	710,373.
		=====	=====

FORM 990PF, PART III - OTHER DECREASES IN NET WORTH OR FUND BALANCES  
=====DESCRIPTION  
-----AMOUNT  
-----

2014 SALES SETTLED IN 2015	53,313.
2014 DISALLOWED WASH SALE LOSS	10.
	-----
TOTAL	53,323.
	=====



RECIPIENT NAME:

THOMAS M PIERCE, TRUSTEE

ADDRESS:

C/O H M PAYSON & CO, P O BOX 31

PORTLAND, ME 04112-0031

RECIPIENT'S PHONE NUMBER: 207-772-3761

FORM, INFORMATION AND MATERIALS:

SEE ATTACHED

SUBMISSION DEADLINES:

OCTOBER 1

RESTRICTIONS OR LIMITATIONS ON AWARDS:

AWARDS ARE ONLY MADE TO ORGANIZATIONS THAT ARE EXEMPT UNDER  
SECTION 501(C)(3) AND NOT TO PRIVATE FOUNDATIONS UNDER SECTION 509,  
NOR TO GOVERNMENTAL ENTITIES OR RELIGIOUS ORGANIZATIONS.

**SCHEDULE D  
(Form 1041)**Department of the Treasury  
Internal Revenue Service**Capital Gains and Losses**

▶ Attach to Form 1041, Form 5227, or Form 990-T.

▶ Use Form 8949 to list your transactions for lines 1b, 2, 3, 8b, 9 and 10.

▶ Information about Schedule D and its separate instructions is at [www.irs.gov/form1041](http://www.irs.gov/form1041)

OMB No 1545-0092

**2014**

Name of estate or trust

MARGARET E BURNHAM CHARITABLE TRUST

Employer identification number

01-0496879

**Note:** Form 5227 filers need to complete **only** Parts I and II.**Part I Short-Term Capital Gains and Losses - Assets Held One Year or Less**

See instructions for how to figure the amounts to enter on the lines below.

This form may be easier to complete if you round off cents to whole dollars.

	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gain or loss from Form(s) 8949, Part I, line 2, column (g)	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
<b>1a</b> Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b.				
<b>1b</b> Totals for all transactions reported on Form(s) 8949 with <b>Box A</b> checked . . . . .				
<b>2</b> Totals for all transactions reported on Form(s) 8949 with <b>Box B</b> checked . . . . .				
<b>3</b> Totals for all transactions reported on Form(s) 8949 with <b>Box C</b> checked . . . . .	575,946.	540,873.	10.	35,083.
<b>4</b> Short-term capital gain or (loss) from Forms 4684, 6252, 6781, and 8824 . . . . .			<b>4</b>	
<b>5</b> Net short-term gain or (loss) from partnerships, S corporations, and other estates or trusts . . . . .			<b>5</b>	
<b>6</b> Short-term capital loss carryover. Enter the amount, if any, from line 9 of the 2013 Capital Loss Carryover Worksheet . . . . .			<b>6</b> ( )	
<b>7</b> Net short-term capital gain or (loss). Combine lines 1a through 6 in column (h). Enter here and on line 17, column (3) on the back . . . . . ▶			<b>7</b>	35,083.

**Part II Long-Term Capital Gains and Losses - Assets Held More Than One Year**

See instructions for how to figure the amounts to enter on the lines below.

This form may be easier to complete if you round off cents to whole dollars.

	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gain or loss from Form(s) 8949, Part II, line 2, column (g)	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
<b>8a</b> Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b.				
<b>8b</b> Totals for all transactions reported on Form(s) 8949 with <b>Box D</b> checked . . . . .				
<b>9</b> Totals for all transactions reported on Form(s) 8949 with <b>Box E</b> checked . . . . .				
<b>10</b> Totals for all transactions reported on Form(s) 8949 with <b>Box F</b> checked . . . . .	2,138,509.	1,664,987.		473,522.
<b>11</b> Long-term capital gain or (loss) from Forms 2439, 4684, 6252, 6781, and 8824 . . . . .			<b>11</b>	
<b>12</b> Net long-term gain or (loss) from partnerships, S corporations, and other estates or trusts. . . . .			<b>12</b>	
<b>13</b> Capital gain distributions. . . . .			<b>13</b>	
<b>14</b> Gain from Form 4797, Part I. . . . .			<b>14</b>	
<b>15</b> Long-term capital loss carryover. Enter the amount, if any, from line 14 of the 2013 Capital Loss Carryover Worksheet . . . . .			<b>15</b> ( )	
<b>16</b> Net long-term capital gain or (loss). Combine lines 8a through 15 in column (h). Enter here and on line 18a, column (3) on the back . . . . . ▶			<b>16</b>	473,522.

For Paperwork Reduction Act Notice, see the Instructions for Form 1041.

Schedule D (Form 1041) 2014

**Part III Summary of Parts I and II****Caution:** Read the instructions before completing this part.

	(1) Beneficiaries' (see instr.)	(2) Estate's or trust's	(3) Total
<b>17</b> Net short-term gain or (loss) . . . . .	<b>17</b>		35,083.
<b>18</b> Net long-term gain or (loss):			
<b>a</b> Total for year . . . . .	<b>18a</b>		473,522.
<b>b</b> Unrecaptured section 1250 gain (see line 18 of the wrksh.) . . . .	<b>18b</b>		
<b>c</b> 28% rate gain . . . . .	<b>18c</b>		
<b>19</b> Total net gain or (loss). Combine lines 17 and 18a. . . . . ▶	<b>19</b>		508,605.

**Note:** If line 19, column (3), is a net gain, enter the gain on Form 1041, line 4 (or Form 990-T, Part I, line 4a). If lines 18a and 19, column (2), are net gains, go to Part V, and do not complete Part IV. If line 19, column (3), is a net loss, complete Part IV and the **Capital Loss Carryover Worksheet**, as necessary.

**Part IV Capital Loss Limitation**

<b>20</b> Enter here and enter as a (loss) on Form 1041, line 4 (or Form 990-T, Part I, line 4c, if a trust), the smaller of:	<b>20</b> ( )
<b>a</b> The loss on line 19, column (3) or <b>b</b> \$3,000 . . . . .	

**Note:** If the loss on line 19, column (3), is more than \$3,000, or if Form 1041, page 1, line 22 (or Form 990-T, line 34), is a loss, complete the **Capital Loss Carryover Worksheet** in the instructions to figure your capital loss carryover.

**Part V Tax Computation Using Maximum Capital Gains Rates**

**Form 1041 filers.** Complete this part only if both lines 18a and 19 in column (2) are gains, or an amount is entered in Part I or Part II and there is an entry on Form 1041, line 2b(2), and Form 1041, line 22, is more than zero.

**Caution:** Skip this part and complete the **Schedule D Tax Worksheet** in the instructions if:

- Either line 18b, col. (2) or line 18c, col. (2) is more than zero, or
- Both Form 1041, line 2b(1), and Form 4952, line 4g are more than zero.

**Form 990-T trusts.** Complete this part only if both lines 18a and 19 are gains, or qualified dividends are included in income in Part I of Form 990-T, and Form 990-T, line 34, is more than zero. Skip this part and complete the **Schedule D Tax Worksheet** in the instructions if either line 18b, col. (2) or line 18c, col. (2) is more than zero.

<b>21</b> Enter taxable income from Form 1041, line 22 (or Form 990-T, line 34). . .	<b>21</b>		
<b>22</b> Enter the smaller of line 18a or 19 in column (2) but not less than zero. . . . .	<b>22</b>		
<b>23</b> Enter the estate's or trust's qualified dividends from Form 1041, line 2b(2) (or enter the qualified dividends included in income in Part I of Form 990-T). . .	<b>23</b>		
<b>24</b> Add lines 22 and 23 . . . . .	<b>24</b>		
<b>25</b> If the estate or trust is filing Form 4952, enter the amount from line 4g; otherwise, enter -0- . . . ▶	<b>25</b>		
<b>26</b> Subtract line 25 from line 24. If zero or less, enter -0- . . . . .	<b>26</b>		
<b>27</b> Subtract line 26 from line 21. If zero or less, enter -0- . . . . .	<b>27</b>		
<b>28</b> Enter the smaller of the amount on line 21 or \$2,500 . . . . .	<b>28</b>		
<b>29</b> Enter the smaller of the amount on line 27 or line 28 . . . . .	<b>29</b>		
<b>30</b> Subtract line 29 from line 28. If zero or less, enter -0-. This amount is taxed at 0% . . . . . ▶	<b>30</b>		
<b>31</b> Enter the smaller of line 21 or line 26 . . . . .	<b>31</b>		
<b>32</b> Subtract line 30 from line 26 . . . . .	<b>32</b>		
<b>33</b> Enter the smaller of line 21 or \$12,150 . . . . .	<b>33</b>		
<b>34</b> Add lines 27 and 30 . . . . .	<b>34</b>		
<b>35</b> Subtract line 34 from line 33. If zero or less, enter -0- . . . . .	<b>35</b>		
<b>36</b> Enter the smaller of line 32 or line 35 . . . . .	<b>36</b>		
<b>37</b> Multiply line 36 by 15%. . . . . ▶	<b>37</b>		
<b>38</b> Enter the amount from line 31 . . . . .	<b>38</b>		
<b>39</b> Add lines 30 and 36 . . . . .	<b>39</b>		
<b>40</b> Subtract line 39 from line 38. If zero or less, enter -0- . . . . .	<b>40</b>		
<b>41</b> Multiply line 40 by 20% . . . . . ▶	<b>41</b>		
<b>42</b> Figure the tax on the amount on line 27. Use the 2014 Tax Rate Schedule for Estates and Trusts (see the Schedule G instructions in the instructions for Form 1041) . . . .	<b>42</b>		
<b>43</b> Add lines 37, 41, and 42 . . . . .	<b>43</b>		
<b>44</b> Figure the tax on the amount on line 21. Use the 2014 Tax Rate Schedule for Estates and Trusts (see the Schedule G instructions in the instructions for Form 1041) . . . .	<b>44</b>		
<b>45</b> Tax on all taxable income. Enter the smaller of line 43 or line 44 here and on Form 1041, Schedule G, line 1a (or Form 990-T, line 36) . . . . . ▶	<b>45</b>		

Schedule D (Form 1041) 2014

## Sales and Other Dispositions of Capital Assets

► Information about Form 8949 and its separate instructions is at [www.irs.gov/form8949](http://www.irs.gov/form8949).

**► File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D.**

OMB No. 1545-0074

2014

Attachment Sequence No **12A**

Name(s) shown on return

MARGARET E BURNHAM CHARITABLE TRUST

Social security number or taxpayer identification number

01-0496879

*Before you check Box A, B, or C below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either may show your basis (usually your cost) even if your broker did not report it to the IRS. Brokers must report basis to the IRS for most stock you bought in 2011 or later (and for certain debt instruments you bought in 2014 or later)*

**Part I** **Short-Term.** Transactions involving capital assets you held 1 year or less are short-term. For long-term transactions, see page 2.

**Note.** You may aggregate all short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the total directly on Schedule D, line 1a; you are not required to report these transactions on Form 8949 (see instructions).

**You must check Box A, B, or C below. Check only one box.** If more than one box applies for your short-term transactions, complete a separate Form 8949, page 1, for each applicable box. If you have more short-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

- |   |  |
|---|--|
|   | (A) Short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see <b>Note</b> above) |
|   | (B) Short-term transactions reported on Form(s) 1099-B showing basis was <b>not</b> reported to the IRS              |
| X | (C) Short-term transactions not reported to you on Form 1099-B   |

<b>1</b>	(a) Description of property (Example: 100 sh XYZ Co.)	(b) Date acquired (Mo., day, yr.)	(c) Date sold or disposed (Mo., day, yr.)	(d) Proceeds (sales price) (see instructions)	(e) Cost or other basis See the Note below and see Column (e) in the separate instructions	<b>Adjustment, if any, to gain or loss.</b> If you enter an amount in column (g), enter a code in column (f). <b>See the separate instructions.</b>		(h) <b>Gain or (loss).</b> Subtract column (e) from column (d) and combine the result with column (g)
						(f) Code(s) from instructions	(g) Amount of adjustment	
3725.	COACH INC	03/07/2013	01/13/2014	204,279.00	183,520.00			20,759.00
1237.	WEIGHT WATCHERS INTL	03/07/2013	01/29/2014	34,023.00	52,814.00			-18,791.00
739.	WEIGHT WATCHERS INTL	03/07/2013	01/30/2014	19,802.00	31,551.00			-11,749.00
629.	MARATHON PETE CORP	08/01/2013	02/25/2014	57,074.00	47,073.00			10,001.00
.4697	VERIZON COMMUNICATIO	02/24/2014	02/27/2014	22.00	22.00			
.3636	VODAFONE GROUP PLC A	01/30/2014	03/07/2014	15.00	25.00	W	10.00	
2078.	MARATHON PETE CORP	08/01/2013	03/11/2014	189,069.00	155,515.00			33,554.00
1506.	VERIZON COMMUNICATIO	02/24/2014	12/29/2014	71,662.00	70,353.00			1,309.00
<b>2 Totals.</b> Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts). Enter each total here and include on your Schedule D, <b>line 1b</b> (if <b>Box A</b> above is checked), <b>line 2</b> (if <b>Box B</b> above is checked), or <b>line 3</b> (if <b>Box C</b> above is checked) ▶				575,946.	540,873.		10.	35,083.

**Note.** If you checked Box A above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (a) to correct the basis. See *Column (a)* in the separate instructions for how to figure the amount of the adjustment.

**For Paperwork Reduction Act Notice, see your tax return instructions.**

Form **8949** (2014)

Name(s) shown on return Name and SSN or taxpayer identification no not required if shown on other side

Social security number or taxpayer identification number

MARGARET E BURNHAM CHARITABLE TRUST

01-0496879

Before you check Box D, E, or F below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either may show your basis (usually your cost) even if your broker did not report it to the IRS. Brokers must report basis to the IRS for most stock you bought in 2011 or later (and for certain debt instruments you bought in 2014 or later).

**Part II Long-Term.** Transactions involving capital assets you held more than 1 year are long term. For short-term transactions, see page 1.

**Note.** You may aggregate all long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the total directly on Schedule D, line 8a; you are not required to report these transactions on Form 8949 (see instructions).

**You must check Box D, E, or F below. Check only one box.** If more than one box applies for your long-term transactions, complete a separate Form 8949, page 2, for each applicable box. If you have more long-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

☐ **(D)** Long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see **Note** above)

☐ **(E)** Long-term transactions reported on Form(s) 1099-B showing basis was **not** reported to the IRS

☒ **(F)** Long-term transactions not reported to you on Form 1099-B

1	(a) Description of property (Example: 100 sh XYZ Co)	(b) Date acquired (Mo, day, yr)	(c) Date sold or disposed (Mo, day, yr)	(d) Proceeds (sales price) (see instructions)	(e) Cost or other basis. See the Note below and see Column (g) in the separate instructions	Adjustment, if any, to gain or loss. If you enter an amount in column (g), enter a code in column (f) See the separate instructions.		(h) Gain or (loss). Subtract column (e) from column (d) and combine the result with column (g)
						(f) Code(s) from instructions	(g) Amount of adjustment	
	639. HARRIS CORPORATION	12/06/2012	01/10/2014	43,792.00	29,640.00			14,152.00
	10.24 FEDERAL NATIONAL MOR POOL #612660 DTD 10/01/	10/30/2001	01/27/2014	10.00	11.00			-1.00
	1220. WEIGHT WATCHERS INTL	10/18/2012	01/29/2014	33,555.00	66,295.00			-32,740.00
	1695. LABORATORY CORP OF A HOLDINGS	10/19/2012	01/30/2014	151,322.00	148,232.00			3,090.00
	1070. WEIGHT WATCHERS INTL	10/19/2012	01/30/2014	28,672.00	58,256.00			-29,584.00
	1925. WILEY JOHN & SONS IN	12/27/2012	01/30/2014	104,162.00	73,635.00			30,527.00
	10.27 FEDERAL NATIONAL MOR POOL #612660 DTD 10/01/	10/30/2001	02/25/2014	10.00	11.00			-1.00
	2300. PARKER HANNIFIN CORP	12/06/2012	03/04/2014	279,666.00	188,258.00			91,408.00
	11.18 FEDERAL NATIONAL MOR POOL #612660 DTD 10/01/	10/30/2001	03/25/2014	11.00	12.00			-1.00
	5826. PEABODY ENERGY CORP	11/29/2012	03/27/2014	92,043.00	148,368.00			-56,325.00
	3585. CONOCOPHILLIPS	10/08/2012	04/01/2014	251,921.00	196,546.00			55,375.00
	4390. HASBRO INC	11/18/2011	04/01/2014	245,819.00	157,669.00			88,150.00
	313. JOY GLOBAL INC	12/06/2012	04/02/2014	18,168.00	17,607.00			561.00
	939. GENERAL DYNAMICS CORP	08/02/2012	04/03/2014	103,706.00	58,039.00			45,667.00
<b>2 Totals.</b> Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts). Enter each total here and include on your Schedule D, line 8b (if Box D above is checked), line 9 (if Box E above is checked), or line 10 (if Box F above is checked) ►								

**Note.** If you checked Box D above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See Column (g) in the separate instructions for how to figure the amount of the adjustment.

Name(s) shown on return. Name and SSN or taxpayer identification no. not required if shown on other side

Social security number or taxpayer identification number

MARGARET E BURNHAM CHARITABLE TRUST

01-0496879

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☐ (D) Long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see **Note** above)

☐ (E) Long-term transactions reported on Form(s) 1099-B showing basis was **not** reported to the IRS

☒ (F) Long-term transactions not reported to you on Form 1099-B

1	(a) Description of property (Example 100 sh. XYZ Co.)	(b) Date acquired (Mo., day, yr.)	(c) Date sold or disposed (Mo., day, yr.)	(d) Proceeds (sales price) (see instructions)	(e) Cost or other basis. See the Note below and see Column (e) in the separate instructions	Adjustment, if any, to gain or loss. If you enter an amount in column (g), enter a code in column (f). See the separate instructions.		(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
						(f) Code(s) from instructions	(g) Amount of adjustment	
	10.29 FEDERAL NATIONAL MOR POOL #612660 DTD 10/01/	10/30/2001	04/25/2014	10.00	11.00			-1.00
	4560. TEVA PHARMACEUTICAL LTD SP ADR (ISIN #US881	10/08/2012	05/02/2014	228,717.00	185,179.00			43,538.00
	10.35 FEDERAL NATIONAL MOR POOL #612660 DTD 10/01/	10/30/2001	05/27/2014	10.00	12.00			-2.00
	10.43 FEDERAL NATIONAL MOR POOL #612660 DTD 10/01/	10/30/2001	06/25/2014	10.00	12.00			-2.00
	1430. INTEL CORP	01/27/2011	07/16/2014	48,391.00	31,319.00			17,072.00
	10.49 FEDERAL NATIONAL MOR POOL #612660 DTD 10/01/	10/30/2001	07/25/2014	10.00	12.00			-2.00
	10.58 FEDERAL NATIONAL MOR POOL #612660 DTD 10/01/	10/30/2001	08/25/2014	11.00	12.00			-1.00
	667. DIRECTV CLASS A	07/25/2013	09/11/2014	57,807.00	42,848.00			14,959.00
	10.57 FEDERAL NATIONAL MOR POOL #612660 DTD 10/01/	10/30/2001	09/25/2014	11.00	12.00			-1.00
	4727. SPIRIT AEROSYSTEMS H	04/01/2013	09/26/2014	182,575.00	89,366.00			93,209.00
	11.55 FEDERAL NATIONAL MOR POOL #612660 DTD 10/01/	10/30/2001	10/27/2014	12.00	13.00			-1.00
	1609. MICROSOFT CORP	02/07/2001	11/14/2014	79,814.00	56,915.00			22,899.00
	10.79 FEDERAL NATIONAL MOR POOL #612660 DTD 10/01/	10/30/2001	11/25/2014	11.00	12.00			-1.00
	1400. INTEL CORP	01/27/2011	12/16/2014	50,237.00	30,662.00			19,575.00
<b>2 Totals.</b> Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts). Enter each total here and include on your Schedule D, line 8b (if Box D above is checked), line 9 (if Box E above is checked), or line 10 (if Box F above is checked) ▶								

**Note.** If you checked Box D above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See Column (g) in the separate instructions for how to figure the amount of the adjustment.

Name(s) shown on return Name and SSN or taxpayer identification no. not required if shown on other side

Social security number or taxpayer identification number

MARGARET E BURNHAM CHARITABLE TRUST

01-0496879

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**Note.** You may aggregate all long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the total directly on Schedule D, line 8a; you are not required to report these transactions on Form 8949 (see instructions).

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☐ (D) Long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see **Note** above)

☐ (E) Long-term transactions reported on Form(s) 1099-B showing basis was **not** reported to the IRS

☒ (F) Long-term transactions not reported to you on Form 1099-B

1	(a) Description of property (Example 100 sh. XYZ Co.)	(b) Date acquired (Mo., day, yr.)	(c) Date sold or disposed (Mo., day, yr.)	(d) Proceeds (sales price) (see instructions)	(e) Cost or other basis. See the <b>Note</b> below and see Column (e) in the separate instructions	Adjustment, if any, to gain or loss. If you enter an amount in column (g), enter a code in column (f) <b>See the separate instructions.</b>		(h) Gain or (loss). Subtract column (e) from column (d) and combine the result with column (g)
						(f) Code(s) from instructions	(g) Amount of adjustment	
	10.8 FEDERAL NATIONAL MORT POOL #612660 DTD 10/01/	10/30/2001	12/26/2014	11.00	12.00			-1.00
	1092. HARRIS CORPORATION	01/06/2011	12/29/2014	80,438.00	50,263.00			30,175.00
	1213. MICROSOFT CORP	12/06/2012	12/29/2014	57,577.00	35,748.00			21,829.00
<b>2 Totals.</b> Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts). Enter each total here and include on your Schedule D, line 8b (if Box D above is checked), line 9 (if Box E above is checked), or line 10 (if Box F above is checked) ►				2,138,509.	1,664,987.			473,522.

**Note.** If you checked Box D above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See Column (g) in the separate instructions for how to figure the amount of the adjustment.

2014

Margaret E Burnham Charitable Trust 01-0498879

RECIPIENT	RELATIONSHIP	STATUS	PURPOSE	AMOUNT AWARDED
AMISTAD, PO BOX 992 PORTLAND, ME 04104	None	PC	General Use	\$1,500 00
ANDROSCOGGIN HOME CARE & HOSPICE 15 STRAWBERRY AVE, LEWISTON, ME 04240	None	PC	General Use	\$3,000 00
AROOSTOOK ASPIRATIONS INITIATIVE PO BOX 138, 26 NORTH ST, PRESQUE ISLE, ME 4789	None	PC	General Use	\$3,000 00
AROOSTOOK COUNTY ACTION PROGRAM, PO BOX 1118, PRESQUE ISLE, ME 04789	None	PC	General Use	\$2,000 00
BANGOR BALLET 14 STATE ST BANGOR, ME 04401	None	PC	General Use	\$1,500 00
BANGOR PUBLIC LIBRARY 145 HARLOW ST BANGOR, ME 04401	None	PC	General Use	\$5,000 00
BERWICK PUBLIC LIBRARY, PO BOX 838, BERWICK ME 03901	None	PC	General Use	\$5,000 00
BIDDEFORD FREE CLINIC, PO BOX 325, BIDDEFORD ME 04005	None	PC	General Use	\$3,500 00
BIGELOW LABORATORY FOR OCEAN SCIENCES, PO BOX 380, 80 BIGELOW DR, EAST BOOTHBAY ME 04544	None	PC	General Use	\$5,000 00
BOWDOIN INTERNATIONAL MUSIC FESTIVAL, 6300 COLLEGE STATION, BRUNSWICK ME 04011	None	PC	General Use	\$3,000 00
BRIDGTON HISTORICAL SOCIETY, PO BOX 44, BRIDGTON, ME 04009	None	PC	General Use	\$1,500 00
CAMP SUSAN CURTIS, 1321 WASHINGTON AVE SUITE 104, PORTLAND, ME 04103	None	PC	General Use	\$2,200 00
CENTER FOR GREIVING CHILDREN, PO BOX 1438, PORTLAND, ME 04104	None	PC	General Use	\$2,500 00
CHILDREN'S MUSEUM & THEATRE OF MAINE, PO BOX 4041, 142 FREE STREET, PORTLAND, ME 04101	None	PC	General Use	\$3,000 00
CHORAL ART SOCIETY, 50 MONUMENT SQUARE, 2ND FLOOR, PORTLAND, ME 04101	None	PC	General Use	\$1,500 00
COMMUNITY DENTAL, 368 ROUTE ONE, FALMOUTH, ME 04105	None	PC	General Use	\$3,500 00
EASTPORT ARTS CENTER, 38 WASHINGTON ST, EASTPORT, ME 04831	None	PC	General Use	\$2,000 00
FARMS, PO BOX 421, DAMARISCOTTA ME 04543	None	PC	General Use	\$3,500 00
FRANNIE PEABODY CENTER, 30 DANFORTH ST, SUITE 311, PORTLAND, ME 04101	None	PC	General Use	\$3,500 00
FRIENDS OF FORT KNOX, PO BOX 456, BUCKSPORT, ME 04418	None	PC	General Use	\$2,500 00
FURNITURE FRIENDS, PO BOX 7894, PORTLAND, ME 04112-7894	None	PC	General Use	\$2,500 00
GOOD SHEPHERD FOOD BANK, 3121 HOTEL RD, PO BOX 1807, AUBURN, ME 04211	None	PC	General Use	\$10,000 00
GOODWILL INDUSTRIES OF NORTHERN NEW ENGLAND, 75 WASHINGTON AVE, SUITE 300, PORTLAND, ME 04101	None	PC	General Use	\$2,500 00
GRAHAMTASTIC CONNECTION, 21 BRADEEN ST SUITE 107, SPRINGVALE, ME 04083	None	PC	General Use	\$4,000 00
GREATER PORTLAND LANDMARKS, 93 HIGH ST PORTLAND, ME 04101	None	PC	General Use	\$7,500 00
GULF OF MAINE RESEARCH INSTITUTE, 350 COMMERICAL ST PORTLAND, ME 04101	None	PC	General Use	\$5,000 00
HABITAT FOR HUMANITY OF GREATER PORTLAND, PO BOX 10505, PORTLAND, ME 04104	None	PC	General Use	\$2,500 00
HOSPICE OF SOUTHERN MAINE, 180 US ROUTE ONE #1, SCARBOROUGH, ME 04074	None	PC	General Use	\$2,500 00
HOULTON REGIONAL HEALTH SERVICES, PO BOX 1231, HOULTON, ME 04730-1231	None	PC	General Use	\$10,000 00
IMMIGRANT LEGAL ADVOCACY PROJECT, PO BOX 17917, 309 CUMBERLAND AVE, PORTLAND, ME 04112	None	PC	General Use	\$2,500 00
KENNEBEC ESTUARY LAND TRUST, 92 FRONT ST, BATH, ME 04530	None	PC	General Use	\$2,500 00
KIDS FIRST CENTER, 222 ST JOHN ST SUITE 101, PORTLAND, ME 04102	None	PC	General Use	\$2,500 00
KIDS FREE TO GROW, 82 PORTLAND RD SUITE 15, KENNEBUNK, ME 04043	None	PC	General Use	\$1,000 00
L C BATES MUSEUM PO BOX 159, HINCKLEY, ME 04944	None	PC	General Use	\$2,000 00
LAKES ENVIROMENTAL ASSOCIATION, 230 MAIN ST, BRIDGTON ME 04009	None	PC	General Use	\$3,000 00
LAUDHOLM TRUST, 342 LAUDHOLM FARM RD, WELLS, ME 04090	None	PC	General Use	\$3,000 00
LEARNINGWORKS, 181 BRACKETT ST, PORTLAND, ME 04112	None	PC	General Use	\$2,500 00
MAINE AUDUBON, 20 GILSLAND FARM RD, FALMOUTH, ME 04105	None	PC	General Use	\$5,000 00
MAINE HISTORICAL SOCIETY, 489 CONGRESS ST PORTLAND, ME 04101	None	PC	General Use	\$5,000 00
MAINE HOUSING AND BUILDING MATERIALS EXCHANGE, 102 LISBON ST, LISBON, ME 04250	None	PC	General Use	\$2,500 00
MAINE HUMANITIES COUNCIL, 874 BRIGHTON AVE, PORTLAND, ME 04102	None	PC	General Use	\$3,000 00
MAINE IRISH HERITAGE CENTER PO BOX 7588 34 GRAY ST, PORTLAND, ME 04112	None	PC	General Use	\$2,000 00
MAINE ISLAND TRAIL ASSOCIATION, 58 FORE ST SUITE 30-3, PORTLAND, ME 04101	None	PC	General Use	\$3,000 00
MAINE JEWISH FILM FESTIVAL, PO BOX 7465, PORTLAND, ME 04112	None	PC	General Use	\$2,500 00
MAINE MEDICAL CENTER, 22 BRAMHALL ST, PORTLAND, ME 04102	None	PC	General Use	\$15,000 00
MAINE WINTER SPORTS CENTER 552 MAIN STREET, CARIBOU, ME 4738	None	PC	General Use	\$10,000 00
MAINE WOMEN'S POLICY CENTER, 124 SEWALL ST, AUGUSTA, ME 04330	None	PC	General Use	\$5,000 00
MARGARET CHASE SMITH POLICY CENTER 5784 YORK COMPLEX, BUILDING #4, ORONO, ME 04469	None	PC	General Use	\$5,000 00
MERCY HOSPITAL/MCAULEY RESIDENCE, 144 STATE ST, PORTLAND, ME 04101	None	PC	General Use	\$3,000 00
MID COAST HUNGER PREVENTION PROGRAM, 84A UNION ST, BRUNSWICK, ME 04011	None	PC	General Use	\$3,000 00
MIDCOAST SYMPHONY ORCHESTRA, PO BOX 88, BRUNSWICK, ME 04011	None	PC	General Use	\$2,000 00
MITCHELL INSTITUTE 22 MONUMENT SQ SUITE 200, PORTLAND, ME 04101	None	PC	General Use	\$5,000 00
MOUNT DESERT ISLAND HOSPITAL, PO BOX 8 BAR HARBOR, ME 04609-0008	None	PC	General Use	\$2,500 00
MULTILINGUAL & MULTICULTURAL CENTER , 353 CUMBERLAND AVE, PORTLAND, ME 04101	None	PC	General Use	\$3,000 00
NATURAL RESOURCES COUNCIL OF MAINE, 3 WADE ST AUGUSTA, ME 04330	None	PC	General Use	\$3,500 00
NEW ENGLAND SCHOOL OF METALWORK, 7 ALBISTON WAY, AUBURN, ME 04210	None	PC	General Use	\$2,500 00
NORTH GORHAM PUBLIC LIBRARY, 2 STANDISH NECK RD, GORHAM, ME 04038	None	PC	General Use	\$1,000 00
ORATORIO CHORALE, PO BOX 712 BRUNSWICK, ME 04011	None	PC	General Use	\$2,000 00
PATTEN FREE LIBRARY, 33 SUMMER ST, BATH, ME 04530	None	PC	General Use	\$3,500 00
PENOBSCOT MARINE MUSEUM, PO BOX 498, SEARSPORT, ME 04974	None	PC	General Use	\$2,500 00
PENOBSCOT THEATRE COMPANY, 115 MAIN ST, FOURTH FLOOR, BANGOR, ME 04401	None	PC	General Use	\$2,500 00
PINE TREE LEGAL ASSISTANCE, PO BOX 547, PORTLAND, ME 04112	None	PC	General Use	\$2,500 00
PINE TREE SOCIETY PO BOX 518, BATH , ME 04530	None	PC	General Use	\$3,500 00
PORTLAND CHAMBER MUSIC FESTIVAL, PO BOX 15385, PORTLAND, ME 04112	None	PC	General Use	\$3,000 00
PORTLAND CONSERVATORY OF MUSIC, 202 WOODFORD ST, 3RD FLOOR, PORTLAND, ME 04103	None	PC	General Use	\$2,500 00
PORTLAND STAGE, 25A FOREST AVE, PORTLAND, ME 04101	None	PC	General Use	\$5,000 00
PORTLAND SYMPHONY ORCHESTRA, 50 MONUMENT SQ, 2ND FLOOR, PORTLAND, ME 04101	None	PC	General Use	\$5,000 00
PORTOPERA, PO BOX 7733 PORTLAND, ME 04112	None	PC	General Use	\$3,000 00
PREBLE STREET PO BOX 1459, 38 PREBLE ST, PORTLAND, ME 04104	None	PC	General Use	\$10,000 00
PRESQUE ISLE COMMUNITY DEVELOPMENT ASSOCIATION, 12 SECOND ST, PRESQUE ISLE, ME 04789	None	PC	General Use	\$1,000 00
PRESUMPSHOT REGIONAL LAND TRUST, PO BOX 33, GORHAM, ME 04038	None	PC	General Use	\$2,000 00
RESTORATIVE JUSTICE INSTITUTE OF MAINE, PO BOX 799, BATH , ME 04530	None	PC	General Use	\$1,500 00
RIDING TO THE TOP, PO BOX 1928, WINDHAM, ME 04082	None	PC	General Use	\$1,500 00
ROBBIE FOUNDATION, PO BOX 1534, SCARBOROUGH, ME 04070	None	PC	General Use	\$2,500 00
RONALD MCDONALD HOUSE OF BANGOR, 854 STATE ST, BANGOR , ME 04401	None	PC	General Use	\$2,500 00
SACO RIVER THEATRE, PO BOX 861, BAR MILLS, ME 04004	None	PC	General Use	\$2,500 00
SIMPLE GIFTS, PO BOX 2884 SOUTH PORTLAND ME 04118	None	PC	General Use	\$1,500 00
SOMALI BANTU COMMUNITY ASSOCIATION OF LEWISTON, 145 LISBON ST, LEWISTON ME 04240	None	PC	General Use	\$5,000 00
SOUTH PORTLAND HISTORICAL SOCIETY, 55 BUG LIGHT PARK SO PORTLAND, ME 04108	None	PC	General Use	\$3,500 00
SOUTHERN MAINE AGENCY ON AGING 138 US ROUTE ONE SCARBOROUGH, ME 04074	None	PC	General Use	\$5,000 00
SOUTHERN MAINE CONSERVATION COLLABORATIVE, 217 COMMERICAL ST SUITE 302, PORTLAND, ME 04101	None	PC	General Use	\$3,000 00
SPECIAL OLYMPICS MAINE 595 VILLAGE RD, STETSON, ME 04488	None	PC	General Use	\$2,145 00
STAGE FORCE , 81 CROCKETT NECK RD, KITTEERY POINT, ME 03905	None	PC	General Use	\$1,500 00
SWEETSER 50 MOODY ST, SACO, ME 04072	None	PC	General Use	\$2,500 00
TATE HOUSE MUSEUM, 1267 WESTBROOK ST, PORTLAND, ME 04102	None	PC	General Use	\$4,745 00
TEDFORD HOUSING, PO BOX 958, BRUNSWICK ME 04011	None	PC	General Use	\$2,750 00
THE FIRST TEE, 58 VAL HALLA RD CUMBERLAND ME 04021	None	PC	General Use	\$2,000 00
THE OPPORTUNITY ALLIANCE, 50 MONUMENT SQ, 6TH FLOOR, PORTLAND, ME 04101	None	PC	General Use	\$2,500 00
THE ROOT CELLAR, 94 WASHINGTON AVE, PORTLAND, ME 04101	None	PC	General Use	\$2,500 00
THE TELLING ROOM, 225 COMMERICAL ST, PORTLAND, ME 04101	None	PC	General Use	\$2,500 00
TIDES INSTITUTE & MUSEUM OF ART, PO BOX 161 43 WATER ST, EASTPORT, ME 04831	None	PC	General Use	\$2,500 00
TRI-COUNTY LITERACY, 34 WING FARM PARKWAY, BATH, ME 04530	None	PC	General Use	\$2,500 00
TRI-COUNTY MENTAL HEALTH SERVICES PO BOX 2008, LEWISTON, ME 04241	None	PC	General Use	\$2,500 00
TRUST FOR PUBLIC LAND 30 DANFORTH ST, SUITE 108, PORTLAND, ME 04103	None	PC	General Use	\$5,000 00



RECIPIENT	RELATIONSHIP	STATUS	PURPOSE	AMOUNT AWARDED
UNITED WAY OF GREATER PORTLAND, PO BOX 15200, PORTLAND, ME 04112-5200	None	PC	General Use	\$33,000.00
VICTORIA MANSION, 109 DANFORTH ST, PORTLAND, ME 04103	None	PC	General Use	\$5,000.00
WALDOBOROUGH HISTORICAL SOCIETY PO BOX 110, WALDOBORO, ME 04572-0110	None	PC	General Use	\$2,000.00
WAYFINDER SCHOOLS, 215 GLOUCESTER HILL RD NEW GLOUCESTER, ME 04280	None	PC	General Use	\$3,000.00
WAYNFLETE SCHOOL, 380 SPRING ST, PORTLAND, ME 04102	None	PC	General Use	\$2,500.00
WAYSIDE FOOD PROGRAMS, PO BOX 1278 PORTLAND, ME 04104	None	PC	General Use	\$10,000.00
				<u>\$374,840.00</u>

# THE MARGARET E. BURNHAM CHARITABLE TRUST

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|----------------------|------------------------------|-----------------------------|
| ■ Our Mission        | ■ Requirements & Limitations | ■ Applicant Certification   |
| ■ Funding Priorities | ■ Annual Funding Cycle       | ■ Grant Application Form    |
| ■ How to Reach Us    | ■ Application Guidelines     | ■ Charitable Gifts for 2008 |

• **Our Mission** The Margaret E. Burnham Charitable Trust was established to benefit nonprofit organizations (1) located or operating in the State of Maine and (2) serving within the State of Maine.

• **Our Funding Priorities** The Trust, in responding to the needs of the Maine communities it serves, is dedicated to funding five (5) significant program areas of interest within the following *general* annual distribution and allocation percentages:

- Community/Social Services 30%
- Medical 20%
- Educational 20%
- Arts/Culture 20%
- Environment 10%

**Note:** From time to time, the Trust may make awards to organizations and institutions who have made no formal request, who we have recognized for exemplary work, and/or show significant promise in one or more of these five areas, and whose continuing work and mission would be more fully enhanced and supported by this funding.

- **Applicant Requirements and Limitations** The Trust annually awards charitable grants *only* to organizations which are tax-exempt under Section 501(c)3 of the Internal Revenue Code, not to private *foundations* under Section 509 of the Code, nor to governmental entities. The Trust generally does not fund multi-year requests. We do not fund awards to individuals or to religious organizations.

- **Application Consideration and Funding Cycle** The Trustees meet once a year in December to review applications for grants and to make awards. **Applications must be submitted to the Trustees by October 1st\***. Those organizations submitting grants will be notified of the Trustees' decision by the end of the year.

\* Please note new deadline.

- **Application Guidelines** For your application to be considered:

- Please submit a **completed** application, which consists of:

- (1) The certification, application, project description & budget pages
- (2) A copy of the organization's most recent Section 501 (c) (3) IRS ruling
- (3) A copy of the organization's most recent financial statement or tax return
- (4) A list of the organization's officers and directors.

- **Letters and grant application requests should be addressed to:**

Margaret E. Burnham Charitable Trust  
Thomas M. Pierce, Trustee  
c/o H.M. Payson & Co  
P.O. Box 31  
Portland, ME 04112-0031  
207-772-3761

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**Applicant Certification:** (please copy or cut, paste and print on your letterhead)

**To: The Trustees of the Margaret E. Burnham Charitable Trust**

The applicant hereby gives assurance that:

1. The activities and services for which assistance is sought will be administered by or under the supervision of the applicant;
2. Funds received under this application will be used in accordance with the request;
3. The filing of this request has been authorized by the Board of Directors of the applicant;
4. The requesting organization is recognized by the IRS as a tax-exempt, nonprofit organization and is not a private foundation.

I, \_\_\_\_\_, do attest that the information contained in this application is true and correct to the best of my knowledge.

Signature of authorized representative of organization

Name (printed) \_\_\_\_\_

Signature \_\_\_\_\_

Title \_\_\_\_\_

Date \_\_\_\_\_

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**Margaret E. Burnham Charitable Trust  
Application Form**

**I. GENERAL INFORMATION**

A. Organization Name \_\_\_\_\_

B. Year Organized \_\_\_\_\_

C. Address \_\_\_\_\_

D. Telephone No. \_\_\_\_\_

E. Contact Person & Title \_\_\_\_\_

F. Email Address \_\_\_\_\_

G. Tax ID # \_\_\_\_\_

**2. SPECIFIC INFORMATION**

(Note: If the space provided is insufficient, the following information can be provided in an attachment.)

A. Type of **Use** for which funding is being requested:

\_\_\_\_\_  
B. Expected *measurable* **Benefits**:

\_\_\_\_\_  
C. **Evaluation Method**: Tell us how you will regularly measure, document, and evaluate your results, (both qualitative and quantitative) and what the impact of your project will be in your community?

D. How will you **Involve** those served - and other organizations in the community - in your

planning and implementation to broaden your base of support and to ensure appropriate and responsive service?

E. How will you tell the community - **Market** your project - to those being served?

F. **Detailed Line Item Budget:** (attached) What is your proposed Budget, detailing each of your line item income and expenses - listing **all** funding sources.  
(Details should be appended)

G. **Funding Continuation:** How will the project continue to be funded and sustained at the end of the grant?

H. How will you build collaborative **Partnerships** in your community to encourage shared ownership, participation and ongoing project sustainability?

I. Funding requested from the Margaret E. Burnham Charitable Trust:

\$ \_\_\_\_\_

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