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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

▶ Do not enter social security numbers on this form as it may be made public.

▶ Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf

OMB No 1545-0052

2014

Open to Public Inspection

For calendar year 2014 or tax year beginning

, 2014, and ending

, 20

Name of foundation

ROME CHARITABLE TRUST

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

ONE BEACON ST 33RD FL

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

BOSTON, MA 02108

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 foundation

I Fair market value of all assets at

end of year (from Part II, col. (c), line

16) ▶ \$ 387,480.

J Accounting method: ☒ Cash ☐ Accrual☐ Other (specify) _____

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

A Employer identification number

04-6017410

B Telephone number (see instructions)

617-726-7286

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)

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 38,089

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) STMT. 4

17 Interest

18 Taxes (attach schedule) (see instructions) STMT. 5

19 Depreciation (attach schedule) and depletion

20 Occupancy

21 Travel, conferences, and meetings

22 Printing and publications

23 Other expenses (attach schedule) STMT. 6

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-)

24

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	27,658.	14,129.	14,129.
	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)	52,197.	51,340.	51,340.
	b	Investments - corporate stock (attach schedule)	109,775.	116,010.	317,545.
	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)			
	14	Land, buildings, and equipment basis Less: accumulated depreciation (attach schedule) ▶			
15	Other assets (describe ▶)		3,607.	4,466.	
16	Total assets (to be completed by all filers - see the instructions Also, see page 1, item I)	189,630.	185,086.	387,480.	
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)		NONE		
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, . . . ▶ <input checked="" type="checkbox"/> check here and complete lines 27 through 31.				
	27	Capital stock, trust principal, or current funds	189,630.	185,086.	
	28	Paid-in or capital surplus, or land, bldg, and equipment fund			
	29	Retained earnings, accumulated income, endowment, or other funds			
	30	Total net assets or fund balances (see instructions)	189,630.	185,086.	
	31	Total liabilities and net assets/fund balances (see instructions)	189,630.	185,086.	

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	189,630.
2	Enter amount from Part I, line 27a	2	-4,238.
3	Other increases not included in line 2 (itemize) ▶ ROUNDING	3	1,004.
4	Add lines 1, 2, and 3	4	186,396.
5	Decreases not included in line 2 (itemize) ▶ COST ADJUSTMENT	5	1,310.
6	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	185,086.

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Part IV Capital Gains and Losses for Tax on Investment Income(a) List and describe the kind(s) of property sold (e.g., real estate,
2-story brick warehouse; or common stock, 200 shs. MLC Co.)

			(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a PUBLICLY TRADED SECURITIES					
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 38,089.		29,165.	8,924.		
b					
c					
d					
e					
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			
a			8,924.		
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	8,924.	
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	15,644.	359,795.	0.043480
2012	16,081.	318,234.	0.050532
2011	14,449.	311,268.	0.046420
2010	15,948.	292,718.	0.054482
2009	15,880.	277,878.	0.057147
2 Total of line 1, column (d)			2 0.252061
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 0.050412
4 Enter the net value of noncharitable-use assets for 2014 from Part X, line 5			4 357,776.
5 Multiply line 4 by line 3			5 18,036.
6 Enter 1% of net investment income (1% of Part I, line 27b)			6 139.
7 Add lines 5 and 6			7 18,175.
8 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.			8 17,425.

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)		
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	1	279.
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	279.
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	279.
6 Credits/Payments		
a 2014 estimated tax payments and 2013 overpayment credited to 2014	6a	474.
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	474.
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	
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	195.
11 Enter the amount of line 10 to be Credited to 2015 estimated tax <input type="checkbox"/> 195. 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"/> MA		
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

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Part VII-A Statements Regarding Activities (continued)

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions)	12		
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ► N/A	13		X
14	The books are in care of ► BOSTON TRUST & INVESTMENT MGT. CO. Telephone no ► (617) 726-7286 Located at ► ONE BEACON ST., 33RD FL, BOSTON, MA ZIP+4 ► 02108			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the year	15		
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 ►	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 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)?	1b	
Organizations relying on a current notice regarding disaster assistance check here		
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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
If "Yes," list the years ► 2008 2007 2006		
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. ►		
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 ☒ NoOrganizations 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**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
BOSTON TRUST & INV. MGMT CO. ONE BEACON ST 33RD FL, BOSTON, MA 02108	CO-TRUSTEE	2,640.	-0-	-0-
JOAN ROME, SUCCESSOR CO-TRUSTEE NEWTON CENTRE, MA 02159	CO-TRUSTEE	325.	-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.)

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 343,074.
b	Average of monthly cash balances	1b 20,150.
c	Fair market value of all other assets (see instructions).	1c NONE
d	Total (add lines 1a, b, and c)	1d 363,224.
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	1e
2	Acquisition indebtedness applicable to line 1 assets	2 NONE
3	Subtract line 2 from line 1d	3 363,224.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	4 5,448.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5 357,776.
6	Minimum investment return. Enter 5% of line 5	6 17,889.

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 17,889.
2a	Tax on investment income for 2014 from Part VI, line 5	2a 279.
b	Income tax for 2014. (This does not include the tax from Part VI.)	2b
c	Add lines 2a and 2b	2c 279.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3 17,610.
4	Recoveries of amounts treated as qualifying distributions	4 NONE
5	Add lines 3 and 4.	5 17,610.
6	Deduction from distributable amount (see instructions).	6 NONE
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7 17,610.

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 17,425.
b	Program-related investments - total from Part IX-B	1b
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2 NONE
3	Amounts set aside for specific charitable projects that satisfy the:	
a	Suitability test (prior IRS approval required)	3a NONE
b	Cash distribution test (attach the required schedule)	3b NONE
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4 17,425.
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 N/A
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6 17,425.

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
1 Distributable amount for 2014 from Part XI, line 7				17,610.
2 Undistributed income, if any, as of the end of 2014:				
a Enter amount for 2013 only			16,815.	
b Total for prior years. 20 <u>12</u> , 20 <u> </u> , 20 <u> </u>		NONE		
3 Excess distributions carryover, if any, to 2014:				
a From 2009	NONE			
b From 2010	NONE			
c From 2011	NONE			
d From 2012	NONE			
e From 2013	NONE			
f Total of lines 3a through e	NONE			
4 Qualifying distributions for 2014 from Part XII, line 4: ► \$ <u>17,425.</u>				
a Applied to 2013, but not more than line 2a			16,815.	
b Applied to undistributed income of prior years (Election required - see instructions)		NONE		
c Treated as distributions out of corpus (Election required - see instructions)	NONE			
d Applied to 2014 distributable amount				610.
e Remaining amount distributed out of corpus	NONE			
5 Excess distributions carryover applied to 2014	NONE			NONE
<i>(If an amount appears in column (d), the same amount must be shown in column (a))</i>				
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	NONE			
b Prior years' undistributed income. Subtract line 4b from line 2b		NONE		
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		NONE		
d Subtract line 6c from line 6b. Taxable amount - see instructions		NONE		
e Undistributed income for 2013 Subtract line 4a from line 2a Taxable amount - see instructions				
f Undistributed income for 2014 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2015				17,000.
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)	NONE			
8 Excess distributions carryover from 2009 not applied on line 5 or line 7 (see instructions)	NONE			
9 Excess distributions carryover to 2015. Subtract lines 7 and 8 from line 6a	NONE			
10 Analysis of line 9:				
a Excess from 2010	NONE			
b Excess from 2011	NONE			
c Excess from 2012	NONE			
d Excess from 2013	NONE			
e Excess from 2014	NONE			

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)

	Tax year	Prior 3 years			(e) Total
	(a) 2014	(b) 2013	(c) 2012	(d) 2011	
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 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:

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

c Any submission deadlines:

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

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 Paid during the year				
SEE STATEMENT 21				16,515.
Total			▶ 3a	16,515.
b Approved for future payment				
Total			▶ 3b	

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	
1	Program service revenue:					
a	_____					
b	_____					
c	_____					
d	_____					
e	_____					
f	_____					
g	Fees and contracts from government agencies					
2	Membership dues and assessments					
3	Interest on savings and temporary cash investments					
4	Dividends and interest from securities			14	7,748.	
5	Net rental income or (loss) from real estate:					
a	Debt-financed property					
b	Not debt-financed property					
6	Net rental income or (loss) from personal property .					
7	Other investment income					
8	Gain or (loss) from sales of assets other than inventory			18	8,924.	
9	Net income or (loss) from special events . . .					
10	Gross profit or (loss) from sales of inventory . .					
11	Other revenue. a _____					
b	_____					
c	_____					
d	_____					
e	_____					
12	Subtotal. Add columns (b), (d), and (e)				16,672.	
13	Total. Add line 12, columns (b), (d), and (e)				13	16,672

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

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

Line No. Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes). (See instructions.)

NOT APPLICABLE

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

- | | | |
|--|------------|-----------|
| <p>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?</p> <p>a Transfers from the reporting foundation to a noncharitable exempt organization of:</p> <p>(1) Cash</p> <p>(2) Other assets</p> <p>b Other transactions:</p> <p>(1) Sales of assets to a noncharitable exempt organization</p> <p>(2) Purchases of assets from a noncharitable exempt organization</p> <p>(3) Rental of facilities, equipment, or other assets</p> <p>(4) Reimbursement arrangements</p> <p>(5) Loans or loan guarantees</p> <p>(6) Performance of services or membership or fundraising solicitations</p> <p>c Sharing of facilities, equipment, mailing lists, other assets, or paid employees</p> <p>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.</p> | <p>Yes</p> | <p>No</p> |
| | | |
| <p>1a(1)</p> | | <p>X</p> |
| <p>1a(2)</p> | | <p>X</p> |
| | | |
| <p>1b(1)</p> | | <p>X</p> |
| <p>1b(2)</p> | | <p>X</p> |
| <p>1b(3)</p> | | <p>X</p> |
| <p>1b(4)</p> | | <p>X</p> |
| <p>1b(5)</p> | | <p>X</p> |
| <p>1b(6)</p> | | <p>X</p> |
| <p>1c</p> | | <p>X</p> |

[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

05/13/2015
Date

▶
Title

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

**Paid
Preparer
Use Only**

Print/Type preparer's name

Preparer's signature _____

Date _____

Check ☐ if self-employed

PTIN	
------	--

Firm's name ► PRICEWATERHOUSECOOPERS

Firm's address ► 600 GRANT STREET, 51ST FLOOR
PITTSBURGH, PA

Firm's EIN ▶ 13-4008324

Phone no 412-355-6000

ROME CHARITABLE TRUST

04-6017410

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

DESCRIPTION	REVENUE AND EXPENSES PER BOOKS	NET INVESTMENT INCOME
APPLE COMPUTER INC COM	148.	148.
APTARGROUP INC COM	109.	109.
AUTOMATIC DATA PROCESSING INC COM	192.	192.
BARD C R CO COM	43.	43.
BECTON DICKINSON & CO COM	112.	112.
CDK GLOBAL INC-W/I	4.	4.
CHUBB CORP COM	97.	97.
CINNINNATI FINL CORP COM	131.	131.
CISCO SYSTEMS INC	93.	93.
COLGATE-PALMOLIVE COMPANY	213.	213.
COMMERCE BANCSHARES INC	73.	73.
COSTCO WHOLESALE CORP	103.	103.
DEERE & CO COM	111.	111.
DONALDSON INC COM	127.	127.
EMERSON ELECTRIC CO COM	176.	176.
EXXON MOBIL CORPORATION	1,215.	1,215.
FED HOME LN BKS	955.	955.
FHLB (FED HM LN BK)	125.	125.
FHLB (FED HM LN BK)	219.	219.
INTL BUSINESS MACHINES CORP CAP	326.	326.
J P MORGAN CHASE & CO COM	156.	156.
JOHNSON & JOHNSON COM	138.	138.
MICROSOFT CORP COM	173.	173.
NIKE INC CL B COM	96.	96.
NORTHEAST UTILITIES	785.	785.
OMNICOM GROUP COM	180.	180.
ORACLE CORP COM	48.	48.
PNC BK CORP COM	94.	94.
PEPSICO INC	122.	122.
PRICE T ROWE GROUP INC	231.	231.
PROCTER & GAMBLE CO COM	253.	253.
ROSS STORES INC	40.	40.

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STATEMENT 1

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

DESCRIPTION	REVENUE AND EXPENSES PER BOOKS	NET INVESTMENT INCOME
SIGMA ALDRICH CORP COM	92.	92.
STATE STREET CORP COM	84.	84.
3M COMPANY	342.	342.
TIME WARNER CABLE INC	244.	244.
ACCENTURE PLC IRELAND	98.	98.
TOTAL	7,748.	7,748.

FORM 990PF, PART I - ACCOUNTING FEES

=====

DESCRIPTION -----	REVENUE AND EXPENSES PER BOOKS -----	NET INVESTMENT INCOME -----	ADJUSTED NET INCOME -----	CHARITABLE PURPOSES -----
TAX PREPARATION FEE (NON-ALLOC	500.	375.		125.
TOTALS	500.	375.	NONE	125.
	=====	=====	=====	=====

FORM 990PF, PART I - OTHER PROFESSIONAL FEES

=====

DESCRIPTION -----	REVENUE AND EXPENSES PER BOOKS -----	NET INVESTMENT INCOME -----	CHARITABLE PURPOSES -----
COMM. OF MASS FILING FEE	35.	26.	9.
TOTALS	35.	26.	9.
	=====	=====	=====

FORM 990PF, PART I - TAXES

=====

DESCRIPTION -----	REVENUE AND EXPENSES PER BOOKS -----
FEDERAL TAX PAYMENT - PRIOR YE	271.
FEDERAL ESTIMATES - PRINCIPAL	474.

TOTALS	745.
	=====

ROME CHARITABLE TRUST

04-6017410

FORM 990PF, PART I - OTHER EXPENSES

=====

DESCRIPTION -----	REVENUE AND EXPENSES PER BOOKS -----	NET INVESTMENT INCOME -----	CHARITABLE PURPOSES -----
	150.	115.	35.
TOTALS	----- 150. =====	----- 115. =====	----- 35. =====

ROME CHARITABLE TRUST

04-6017410

FORM 990PF, PART II - U.S. AND STATE OBLIGATIONS
=====

DESCRIPTION -----	BEGINNING BOOK VALUE -----
FED HOME LN BKS 4.500% 9/16/13	
FED HOME LN BKS 3.5% 7/29/21	27,157.
313380L96 FHLB .5% 11/20/15	25,040.

TOTALS	52,197.
	=====

ROME CHARITABLE TRUST

04-6017410

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

DESCRIPTION -----	BEGINNING BOOK VALUE -----
3M CO	1,786.
INTL BUSINESS MACHS	1,601.
EXXON MOBIL CORP	1,650.
PRICE T ROWE GROUP	2,877.
COSTCO WHOLESALE CORP	3,186.
JOHNSON & JOHNSON	3,127.
STATE STREET CORP	4,796.
COLGATE-PALMOLIVE CO	4,470.
PEPSICO INC	3,169.
SIGMA ALDRICH CORP	3,466.
CISCO SYSTEMS INC	3,058.
BECTON DICKINSON & CO	3,118.
PROCTER & GAMBLE CO	7,319.
MICROSOFT CORPORATION	4,182.
OMNICO GROUP INC	2,531.
EMERSON ELECTRIC CO	3,423.
BARD C R INC	4,056.
VARIAN MED SYS INC	
CHUBB CORP	2,554.
CINCINNATI FINANCIAL CORP	1,968.
JP MORGAN CHASE & CO COM	4,402.
PNC FINANCIAL SERVICES GRP INC	2,724.
NIKE INC	3,236.
ROSS STORES INC	1,033.
TIME WARNER CABLE INC	4,169.
DONALDSON CO INC	3,299.
APTARGROUP INC	3,690.
AUTOMATIC DATA PROCESSING, INC	4,227.
ORACLE CORPORATION	2,438.

ROME CHARITABLE TRUST

04-6017410

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

DESCRIPTION -----	BEGINNING BOOK VALUE -----
WATERS CORPORATION	3,292.
NORTHEAST UTILITIES	620.
COMMERCE BANCSHARES INC	2,844.
AT & T INC	
METTLER-TOLEDO INTERNATIONAL	3,795.
DEERE & CO	4,062.
ACCENTURE PLC IRELAND	3,607.

TOTALS	109,775.
	=====

ROME CHARITABLE TRUST

04-6017410

FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID

=====

RECIPIENT NAME:

DANA FARBER CANCER INSTITUTE

AMOUNT OF GRANT PAID 50.

RECIPIENT NAME:

VETERANS OF FOREIGN WARS

ADDRESS:

715 E 4TH STREET

BOSTON, MA 02127

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

VETERANS ASSOCIATION

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID 100.

RECIPIENT NAME:

BOSTON UNIVERSITY

OFC OF GIFT/ESTATE PLANG

ADDRESS:

19 DEERFIELD STREET

BOSTON, MA 02215

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

HIGHER EDUCATION

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID 336.

RECIPIENT NAME:

COMBINED JEWISH PHILANTHROPIES

OF GREATER BOSTON

ADDRESS:

126 HIGH STREET

BOSTON, MA 02109

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CARE FOR THE VULNERABLE

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID 1,682.

STATEMENT 10

ROME CHARITABLE TRUST

04-6017410

FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID

=====

RECIPIENT NAME:

MUSEUM OF FINE ARTS

ADDRESS:

465 HUNTINGTON AVE

BOSTON, MA 02115

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

PRESERVES REEMINENT COLLECTIONS OF ART

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID 110.

RECIPIENT NAME:

PERKINS SCHOOL FOR BLIND

ADDRESS:

172 N. BEACON ST

WATERTOWN, MA 02472

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

EDUCATION FOR THE BLIND

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID 50.

RECIPIENT NAME:

BETH ISRAEL HOSPITAL

ADDRESS:

330 BROOKLINE AVENUE

BOSTON, MA 02215

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

HOSPITAL

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID 3,363.

STATEMENT 11

ROME CHARITABLE TRUST

04-6017410

FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID

=====

RECIPIENT NAME:

JEWISH FAMILY & CHILDRENS SERVICE
SERVICE

ADDRESS:

1430 MAIN STREET
WALTHAM, MA 02451

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

HUMAN SERVICE & HEALTH CARE PROGRAMS

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID 841.

RECIPIENT NAME:

WGBH

ADDRESS:

125 WESTERN AVE.
ALLSTON, MA 02134

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

ENRICH PEOPLE'S LIVES

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID 75.

RECIPIENT NAME:

ARTHRITIS FOUNDATION

ADDRESS:

29 CRAFTS STREET
NEWTON, MH 02458

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

IMPROVE LIVES VIA PREVENTION CONTROL & CURE

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID 50.

STATEMENT 12

ROME CHARITABLE TRUST

04-6017410

FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID

=====

RECIPIENT NAME:

HEBREW FREE SCHOOL

C/O CONGREGATION KEHILATH

ADDRESS:

384 HARVARD ST.

BROOKLINE, MA 02446

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

EDUCATIONAL

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID 841.

RECIPIENT NAME:

NATIONAL MULTIPLE SCLEROSIS SOCIETY

ADDRESS:

PO BOX 845945

BOSTON, MA 02284-5945

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

MOBILIZE PEOPLE & RESOURCES TO DRIVE RESEARCH

FOUNDATION STATUS OF RECIPIENT:

PC

RECIPIENT NAME:

TEMPLE BETH AVODAH

ADDRESS:

45 PUDDINGSTONE LANE

NEWTON, MA 02459

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

RELIGIOUS

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID 1,500.

ROME CHARITABLE TRUST

04-6017410

FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID

=====

RECIPIENT NAME:

ALZHEIMER'S ASSOC.

ADDRESS:

480 PLEASANT STREET

WATERTOWN, MA 02472

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

RESEARCH & CARE FOR AFFECTED

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID 200.

RECIPIENT NAME:

MACULAR DEGENERATION RESEARCH

FOUNDATION

ADDRESS:

243 CHARLES STREET

BOSTON, MA 02114

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

FOR ORGANIZATION'S GENERAL PURPOSES

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID 50.

RECIPIENT NAME:

PROJECT BREAD

ADDRESS:

145 BORDER STREET

EAST BOSTON, MA 02128

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

ANTI-HUNGER ORGANIZATION

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID 130.

STATEMENT 14

ROME CHARITABLE TRUST

04-6017410

FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID

=====

RECIPIENT NAME:

HABITAT FOR HUMANITY

ADDRESS:

240 COMMERICAL STREET, 4TH FLOOR

BOSTON, MA 02128

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

DECENT PLACES FOR EVERYONE TO LIVE

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID 50.

RECIPIENT NAME:

NEWTON SENIOR CENTER

ADDRESS:

345 WALNUT STREET

NEWTON, MA 02460

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

ELDERLY

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID 300.

RECIPIENT NAME:

AMERICAN LUNG ASSOCIATION

ADDRESS:

460 TOTTEN POND ROAD #400

WALTHAM, MA 02451

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

EDUCATION RESEARCH & ADVOCACY

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID 50.

STATEMENT 15

ROME CHARITABLE TRUST

04-6017410

FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID

=====

RECIPIENT NAME:

US OLYMPICS

ADDRESS:

P.O. BOX 7010

ALBERT LEA, MN 56007-8010

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

SUPPORT US ATHLETES

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID 100.

RECIPIENT NAME:

HEBREW UNIVERSITY

C/O ALBERT KALTER, P C

ADDRESS:

225 BROADWAY

NEW YORK, NY 10007

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

STRENGTHEN HEBREW UNIVERSITY

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID 1,009.

RECIPIENT NAME:

AMERICAN DIABETES ASSOC

ADDRESS:

1 BROMFIELD STREET

BOSTON, MA 02108

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

PREVENT+CURE DIABETES & AID AFFECTED

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID 200.

ROME CHARITABLE TRUST

04-6017410

FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID

RECIPIENT NAME:

JEWISH NATIONAL FUND

ADDRESS:

77 FRANKLIN STREET, SUITE 541

BOSTON, MA 02110

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CARETAKER OF THE LAND OF ISRAEL

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID 200.

RECIPIENT NAME:

MARCH OF DIMES

ADDRESS:

112 TURNPIKE ROAD #102

WESTBOROUGH, MA 01581

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

RESEARCH-SAVE BABIES FROM DEATH/ DISABILITY

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID 50.

RECIPIENT NAME:

DOCTORS WITHOUT BORDERS

ADDRESS:

333 7TH AVENUE

NEW YORK, NY 10001-5004

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

RELIEF/ VICTIMS ARMED OF CONFLICT, DISASTERS

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID 100.

STATEMENT 17

ROME CHARITABLE TRUST

04-6017410

FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID

=====

RECIPIENT NAME:

SMILE TRAIN

ADDRESS:

PO BOX 96231

WASHINGTON, DC 20090-6231

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

SOLVE CLEFT LIP AND PALATE

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID 50.

RECIPIENT NAME:

ORT AMERICA

ADDRESS:

75 MAIDEN LANE

NEW YORK, NY 10038

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

ADVANCEMENT OF JEWISH PEOPLE & OTHERS

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID 300.

RECIPIENT NAME:

AMERICAN HEART ASSOC

ADDRESS:

20 SPEEN STREET

FRAMINGHAM, MA 01701

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

LIVES FREE OF HEART DISEASE & STROKE

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID 100.

STATEMENT 18

ROME CHARITABLE TRUST

04-6017410

FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID

=====

RECIPIENT NAME:

MAKE A WISH

ADDRESS:

ONE BULFINCH PLACE, 2ND FLOOR

BOSTON, MA 02114

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

GRANTS WISHES OF ILL CHILDREN

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID 100.

RECIPIENT NAME:

SPECIAL OLYMPICS

ADDRESS:

512 FOREST STREET

MARLBOROUGH, MA 01752

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

SPORTS-INDIVIDUALS W INTELLECTUALLY DISABLED

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID 50.

RECIPIENT NAME:

WORLD WILDLIFE FUND

ADDRESS:

P.O. BOX 97180

WASHINGTON, DC 20090-7180

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CONSERVATION OF NATURE

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID 50.

ROME CHARITABLE TRUST

04-6017410

FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID

=====

RECIPIENT NAME:

NATIONAL JEWISH MEDICAL & RESEARCH
CENTER

ADDRESS:

1400 JACKSON ST., ROOM M116
DENVER, CO 80206

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

MEDICAL RESEARCH

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID 336.

RECIPIENT NAME:

SUSAN G KOMEN BREAST
CANCER FOUNDATION

ADDRESS:

89 SOUTH STREET, SUITE 406
BOSTON, MA 02111

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

END BREAST CANCER FOREVER - SAVE LIVES

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID 100.

RECIPIENT NAME:

AMC CANCER RESEARCH FDN

ADDRESS:

1600 PIERCE STREET
DENVER, CO 80214

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

AWARENESS

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID 504.

ROME CHARITABLE TRUST

04-6017410

FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID

=====

RECIPIENT NAME:

HEBREW SENIOR LIFE

ADDRESS:

1200 CENTRE STREET

BOSTON, MA 02131-1097

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

RESPECT & PROMOTE ELDER INDEPENDENCE

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID 3,438.

RECIPIENT NAME:

MADD

ADDRESS:

15 NEW ENGLAND EXECUTIVE PARK

BURLINGTON, MA 01803

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

STOP DRUNK DRIVING

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID 50.

TOTAL GRANTS PAID:

16,515.

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**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

OMB No 1545-0092

2014

Name of estate or trust

ROME CHARITABLE TRUST

Employer identification number

04-6017410

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)
1a 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.				
1b Totals for all transactions reported on Form(s) 8949 with Box A checked				
2 Totals for all transactions reported on Form(s) 8949 with Box B checked				
3 Totals for all transactions reported on Form(s) 8949 with Box C checked				
4 Short-term capital gain or (loss) from Forms 4684, 6252, 6781, and 8824				4
5 Net short-term gain or (loss) from partnerships, S corporations, and other estates or trusts				5
6 Short-term capital loss carryover. Enter the amount, if any, from line 9 of the 2013 Capital Loss Carryover Worksheet				6 ()
7 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 ▶				7

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)
8a 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.				
8b Totals for all transactions reported on Form(s) 8949 with Box D checked				
9 Totals for all transactions reported on Form(s) 8949 with Box E checked				
10 Totals for all transactions reported on Form(s) 8949 with Box F checked	38,089.	29,165.		8,924.
11 Long-term capital gain or (loss) from Forms 2439, 4684, 6252, 6781, and 8824				11
12 Net long-term gain or (loss) from partnerships, S corporations, and other estates or trusts.				12
13 Capital gain distributions.				13
14 Gain from Form 4797, Part I.				14
15 Long-term capital loss carryover. Enter the amount, if any, from line 14 of the 2013 Capital Loss Carryover Worksheet				15 ()
16 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 ▶				16 8,924.

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

Schedule D (Form 1041) 2014

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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
17 Net short-term gain or (loss)	17		
18 Net long-term gain or (loss):			
a Total for year	18a		8,924.
b Unrecaptured section 1250 gain (see line 18 of the wrksht.)	18b		
c 28% rate gain	18c		
19 Total net gain or (loss). Combine lines 17 and 18a. ▶	19		8,924.

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

20 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:

a The loss on line 19, column (3) or **b** \$3,000 **20** ()

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.

21 Enter taxable income from Form 1041, line 22 (or Form 990-T, line 34). . .	21		
22 Enter the smaller of line 18a or 19 in column (2) but not less than zero.	22		
23 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) . .	23		
24 Add lines 22 and 23	24		
25 If the estate or trust is filing Form 4952, enter the amount from line 4g; otherwise, enter -0- . . . ▶	25		
26 Subtract line 25 from line 24. If zero or less, enter -0-	26		
27 Subtract line 26 from line 21. If zero or less, enter -0-	27		
28 Enter the smaller of the amount on line 21 or \$2,500	28		
29 Enter the smaller of the amount on line 27 or line 28	29		
30 Subtract line 29 from line 28. If zero or less, enter -0-. This amount is taxed at 0% ▶	30		
31 Enter the smaller of line 21 or line 26	31		
32 Subtract line 30 from line 26	32		
33 Enter the smaller of line 21 or \$12,150	33		
34 Add lines 27 and 30	34		
35 Subtract line 34 from line 33. If zero or less, enter -0-	35		
36 Enter the smaller of line 32 or line 35	36		
37 Multiply line 36 by 15% ▶	37		
38 Enter the amount from line 31	38		
39 Add lines 30 and 36	39		
40 Subtract line 39 from line 38. If zero or less, enter -0-	40		
41 Multiply line 40 by 20% ▶	41		
42 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)	42		
43 Add lines 37, 41, and 42	43		
44 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)	44		
45 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) ▶	45		

Schedule D (Form 1041) 2014

Social security number or taxpayer identification number

04-6017410

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).

	(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
X	(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	
	.3333 CDK GLOBAL INC-W/I	07/28/2010	10/07/2014	10.00	5.00			5.00
	.05 COMMERCE BANCSHARES IN	01/03/2012	12/02/2014	2.00	2.00			
	25000. FED HOME LN BKS 7/29/21	12/28/2011	08/28/2014	26,867.00	27,157.00			-290.00
	30. INTL BUSINESS MACHINES	02/05/1982	03/25/2014	5,726.00	480.00			5,246.00
	25. PRICE T ROWE GROUP INC	04/17/2002	03/25/2014	2,057.00	479.00			1,578.00
	25. TIME WARNER CABLE INC	10/01/2009	03/25/2014	3,427.00	1,042.00			2,385.00
2 Totals. 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) ▶				38,089.	29,165.			8,924.

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.