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Form **990-PF**

**Return of Private Foundation**

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

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

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

**2014**

Open to Public Inspection

For calendar year **2014** or tax year beginning **2014**, and ending **20**

Name of foundation **EDITH M. BURBECK T/U/W EASTERN BANK, TRUSTEE**

Number and street (or P.O. box number if mail is not delivered to street address) **605 BROADWAY LF 42**

Room/suite

City or town, state or province, country, and ZIP or foreign postal code **SAUGUS, MA 01906**

**A Employer identification number** **04-6278585**

**B Telephone number (see instructions)** **781-581-4222**

**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

**G** Check all that apply:

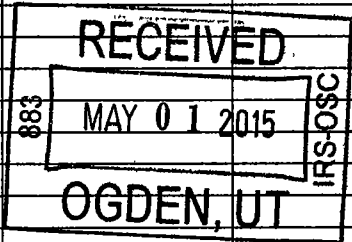
<input type="checkbox"/> Initial return	<input type="checkbox"/> Initial return of a former public charity
<input type="checkbox"/> Final return	<input type="checkbox"/> Amended return
<input type="checkbox"/> Address change	<input type="checkbox"/> Name change

**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) **\$ 175,234.**

**J** Accounting method:  Cash  Accrual  
 Other (specify) \_\_\_\_\_  
(Part I, column (d) must be on cash basis.)

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)
<b>Revenue</b>					
1	Contributions, gifts, grants, etc., received (attach schedule)				
2	Check <input checked="" type="checkbox"/> if the foundation is not required to attach Sch. B				
3	Interest on savings and temporary cash investments				
4	Dividends and interest from securities	3,309.	3,242.		STMT 1
5a	Gross rents				
b	Net rental income or (loss)				
6a	Net gain or (loss) from sale of assets not on line 10	9,300.			
b	Gross sales price for all assets on line 6a <b>65,309</b>				
7	Capital gain net income (from Part IV, line 2)		9,300.		
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	<b>Total.</b> Add lines 1 through 11	12,609.	12,542.		
<b>Operating and Administrative Expenses</b>					
13	Compensation of officers, directors, trustees, etc.	2,945.	1,472.		1,472.
14	Other employee salaries and wages				
15	Pension plans, employee benefits				
16a	Legal fees (attach schedule)				
b	Accounting fees (attach schedule) <b>STMT 3</b>	600.	300.	NONE	300.
c	Other professional fees (attach schedule)				
17	Interest				
18	Taxes (attach schedule) (see instructions) <b>STMT 4</b>	44.			
19	Depreciation (attach schedule) and depletion				
20	Occupancy				
21	Travel, conferences, and meetings				
22	Printing and publications				
23	Other expenses (attach schedule) <b>STMT 5</b>	275.			275.
24	<b>Total operating and administrative expenses.</b> Add lines 13 through 23.	3,864.	1,772.	NONE	2,047.
25	Contributions, gifts, grants paid	8,000.			8,000.
26	<b>Total expenses and disbursements</b> Add lines 24 and 25	11,864.	1,772.	NONE	10,047.
27	Subtract line 26 from line 12:				
a	Excess of revenue over expenses and disbursements	745.			
b	<b>Net investment income</b> (if negative, enter -0-)		10,770.		
c	<b>Adjusted net income</b> (if negative, enter -0-)				



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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 . . . . .			
	3	Accounts receivable ▶ _____ Less: allowance for doubtful accounts ▶ _____			
	4	Pledges receivable ▶ _____ Less: allowance for doubtful accounts ▶ _____			
	5	Grants receivable . . . . .			
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions) . . . . .			
	7	Other notes and loans receivable (attach schedule) ▶ _____ Less: allowance for doubtful accounts ▶ _____			
	8	Inventories for sale or use . . . . .			
	9	Prepaid expenses and deferred charges . . . . .			
	10a	Investments - U S. and state government obligations (attach schedule), . . . . .			
	b	Investments - corporate stock (attach schedule) . . . . .			
	c	Investments - corporate bonds (attach schedule) . . . . .			
	11	Investments - land, buildings, and equipment, basis ▶ _____ Less: accumulated depreciation (attach schedule) ▶ _____			
	12	Investments - mortgage loans . . . . .			
	13	Investments - other (attach schedule) . . . . .	142,657.	143,466.	175,234.
	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) . . . . .	142,657.	143,466.	175,234.	
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 . . . . .	142,657.	143,466.	
	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) . . . . .	142,657.	143,466.		
31	<b>Total liabilities and net assets/fund balances</b> (see instructions) . . . . .	142,657.	143,466.		

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	142,657.
2	Enter amount from Part I, line 27a . . . . .	2	745.
3	Other increases not included in line 2 (itemize) ▶ <u>BOOK VALUE ADJUSTMENT</u> . . . . .	3	64.
4	Add lines 1, 2, and 3 . . . . .	4	143,466.
5	Decreases not included in line 2 (itemize) ▶ _____ . . . . .	5	
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	143,466.

Part IV Capital Gains and Losses for Tax on Investment Income

Table with columns (a) through (k) for publicly traded securities. Includes rows for gross sales price, depreciation, cost basis, gain/loss, and net capital gain/loss.

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 [X] No

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

Table with columns (a) Base period years, (b) Adjusted qualifying distributions, (c) Net value of noncharitable-use assets, (d) Distribution ratio.

Table with rows 2 through 8 for qualification calculations, including total distribution, average ratio, net value, and qualifying distributions.



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

Table with 11 rows and 2 columns. Row 1: Exempt operating foundations... 108. Row 2: Domestic foundations... 108. Row 3: All other domestic foundations... NONE. Row 4: Tax under section 511... 108. Row 5: Add lines 1 and 2... 108. Row 6: Subtitle A (income) tax... NONE. Row 7: Tax based on investment income... 108. Row 8: Credits/Payments: 6a 140, 6b NONE, 6c NONE, 6d. Row 9: Total credits and payments... 140. Row 10: Enter any penalty... 32. Row 11: Tax due... 32. Row 12: Overpayment... 32. Row 13: Enter the amount of line 10 to be: Credited to 2015 estimated tax 32. Refunded.

Part VII-A Statements Regarding Activities

Table with 10 rows and 3 columns (Yes, No, and an unlabeled column). Row 1a: During the tax year, did the foundation attempt to influence any national, state, or local legislation... X. Row 1b: Did it spend more than \$100 during the year... X. Row 1c: Did the foundation file Form 1120-POL for this year? X. Row 2: Has the foundation engaged in any activities that have not previously been reported to the IRS? X. Row 3: Has the foundation made any changes, not previously reported to the IRS... X. Row 4a: Did the foundation have unrelated business gross income of \$1,000 or more during the year? X. Row 4b: If "Yes," has it filed a tax return on Form 990-T for this year? X. Row 5: Was there a liquidation, termination, dissolution, or substantial contraction during the year? X. Row 6: Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: 6 X. Row 7: Did the foundation have at least \$5,000 in assets at any time during the year? 7 X. Row 8a: Enter the states to which the foundation reports or with which it is registered (see instructions) MA. Row 8b: If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General... X. Row 9: Is the foundation claiming status as a private operating foundation... X. Row 10: Did any persons become substantial contributors during the tax year? 10 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) . . . . .			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) . . . . .			X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ▶ N/A	X		
14	The books are in care of ▶ EASTERN BANK Telephone no. ▶ (781) 581-4222 Located at ▶ 605 BROADWAY, LF 41, SAUGUS, MA ZIP+4 ▶ 01906			
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 ▶		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)? . . . . . Organizations relying on a current notice regarding disaster assistance check here . . . . . ▶ <input type="checkbox"/>		
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? . . . . .		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 ▶		
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.) . . . . .		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.) . . . . .		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		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?		X



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
EASTERN BANK 605 BROADWAY, LF 42, SAUGUS, MA 01906	TRUSTEE 2	2,945.	-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		-0-	-0-	-0-

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



**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 <b>N/A</b>	
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 <b>N/A</b>	
2	
All other program-related investments. See instructions. 3 <b>NONE</b>	

**Total. Add lines 1 through 3 . . . . .**



**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>	174,692.
<b>b</b>	Average of monthly cash balances . . . . .	<b>1b</b>	NONE
<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>	174,692.
<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>	174,692.
<b>4</b>	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions). . . . .	<b>4</b>	2,620.
<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>	172,072.
<b>6</b>	<b>Minimum investment return.</b> Enter 5% of line 5 . . . . .	<b>6</b>	8,604.

**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>	8,604.
<b>2a</b>	Tax on investment income for 2014 from Part VI, line 5 . . . . .	<b>2a</b>	108.
<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>	108.
<b>3</b>	Distributable amount before adjustments. Subtract line 2c from line 1 . . . . .	<b>3</b>	8,496.
<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>	8,496.
<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>	8,496.

**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>	10,047.
<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>	10,047.
<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>	108.
<b>6</b>	<b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4 . . . . .	<b>6</b>	9,939.

**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 . . . . .				8,496.
<b>2</b> Undistributed income, if any, as of the end of 2014:				
<b>a</b> Enter amount for 2013 only . . . . .			6,470.	
<b>b</b> Total for prior years: 20 <u>12</u> , 20 <u>  </u> , 20 <u>  </u> . . . . .		NONE		
<b>3</b> Excess distributions carryover, if any, to 2014:				
<b>a</b> From 2009 . . . . .	NONE			
<b>b</b> From 2010 . . . . .	NONE			
<b>c</b> From 2011 . . . . .	NONE			
<b>d</b> From 2012 . . . . .	NONE			
<b>e</b> From 2013 . . . . .	NONE			
<b>f</b> Total of lines 3a through e . . . . .	NONE			
<b>4</b> Qualifying distributions for 2014 from Part XII, line 4: ► \$ <u>10,047.</u>				
<b>a</b> Applied to 2013, but not more than line 2a . . . . .			6,470.	
<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 . . . . .				3,577.
<b>e</b> Remaining amount distributed out of corpus . . . . .	NONE			
<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 . . . . .	NONE			
<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 . . . . .				
<b>f</b> Undistributed income for 2014. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2015 . . . . .				4,919.
<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) . . . . .	NONE			
<b>9</b> Excess distributions carryover to 2015. Subtract lines 7 and 8 from line 6a . . . . .	NONE			
<b>10</b> Analysis of line 9:				
<b>a</b> Excess from 2010 . . . . .	NONE			
<b>b</b> Excess from 2011 . . . . .	NONE			
<b>c</b> Excess from 2012 . . . . .	NONE			
<b>d</b> Excess from 2013 . . . . .	NONE			
<b>e</b> 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)

2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed

Table with columns: Tax year (a) 2014, (b) 2013, (c) 2012, (d) 2011, (e) Total. Rows include 85% of line 2a, Qualifying distributions from Part XII, line 4, and alternative tests (Assets, Endowment, Support).

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).

NONE

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.

NONE

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.

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

SEE STATEMENT 6

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**

Recipient Name and address (home or business)	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>				
ST. JOESPH'S FOOD PANTRY	NONE	NONE	CHARITABLE	4,000.
BOYS & GIRLS CLUB OF SALEM	NONE	NONE	CHARITABLE	4,000.
<b>Total</b> .....				<b>3a</b> 8,000.
<b>b Approved for future payment</b>				
NONE				
<b>Total</b> .....				<b>3b</b>





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... a Transfers from the reporting foundation to a noncharitable exempt organization of: (1) Cash (2) Other assets b Other transactions: (1) Sales of assets to a noncharitable exempt organization (2) Purchases of assets from a noncharitable exempt organization (3) Rental of facilities, equipment, or other assets (4) Reimbursement arrangements (5) Loans or loan guarantees (6) Performance of services or membership or fundraising solicitations c Sharing of facilities, equipment, mailing lists, other assets, or paid employees d If the answer to any of the above is "Yes," complete the following schedule.

Table with 4 columns: (a) Line no, (b) Amount involved, (c) Name of noncharitable exempt organization, (d) Description of transfers, transactions, and sharing arrangements

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

Table with 3 columns: (a) Name of organization, (b) Type of organization, (c) Description of relationship

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

Sign Here Signature of officer or trustee Date 04/07/2015 Title V.P. May the IRS discuss this return with the preparer shown below (see instructions)? Yes No

Paid Preparer Use Only Print/Type preparer's name GORDON POWERS Preparer's signature Date 04/07/2015 Check self-employed if PTIN P00260194 Firm's name ERNST & YOUNG U.S. LLP Firm's EIN 34-6565596 Firm's address 200 CLARENDON STREET BOSTON, MA 02116 Phone no 617-587-9019

EDITH M. BURBECK T/U/W

04-6278585

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

DESCRIPTION	REVENUE AND EXPENSES PER BOOKS	NET INVESTMENT INCOME
-------------	--------------------------------	-----------------------

AETNA U S HEALTHCARE INC	13.	13.
AMERICAN EXPRESS CO	27.	27.
ANALOG DEVICES	57.	57.
APPLE	58.	58.
BANK AMERICA CORP	14.	14.
BECTON DICKINSON CO	40.	40.
CARDINAL HEALTH, INC.	30.	30.
CATERPILLAR INC.	47.	47.
CHEVRON CORP	63.	63.
CHUBB CORP	41.	41.
GUGGENHEIM BULLETSHARES 2020 CORPORATE B	35.	35.
GUGGENHEIM BULLETSHARES 2019	74.	74.
GUGGENHEIM BULLETSHARES 2018	148.	148.
GUGGENHEIM BULLETSHARES 2017	136.	136.
GUGGENHEIM BULLETSHARES 2016	84.	84.
COACH, INC.	23.	23.
COCA-COLA CO	52.	52.
CORNING INC	23.	23.
COSTCO WHOLESALE CORP, NEW	21.	21.
WALT DISNEY PRODUCTIONS	35.	35.
DISCOVER FINANCIAL SERVICES	33.	33.
DOW CHEMICAL CO	59.	59.
DUKE ENERGY CORP NEW	11.	11.
FEDEX CORPORATION	12.	12.
FORD MOTOR CO	66.	66.
GENERAL ELEC CO	50.	50.
HALLIBURTON CO	21.	21.
HOLLYFRONTIER CORP	107.	107.
HOME DEPOT INC	43.	43.
HONEYWELL INT'L INC.	45.	45.
I B M CORP	36.	36.
I SHARES S & P MIDCAP 400	194.	194.

EDITH M. BURBECK T/U/W

04-6278585

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

DESCRIPTION	REVENUE AND EXPENSES PER BOOKS	NET INVESTMENT INCOME
I SHARES NATIONAL MUNI BOND ETF	26.	377.
I SHARES BARCLAYS INT CRDT	377.	46.
I SHARES BARCLAYS 1-3 YR CREDIT BOND FUN	46.	10.
I SHARES FLOATING RATE BOND ETF	10.	48.
JOHNSON & JOHNSON	48.	60.
KIMBERLY CLARK CORP	60.	25.
MASCO CORP	25.	51.
MERCK & CO INC. NEW	51.	1.
FEDERATED GOV'T OBLIGATION TAX MANAGED F	1.	25.
MORGAN STANLEY	25.	36.
NATIONAL-OILWELL, INC	36.	45.
NUCOR CORP	45.	45.
OCCIDENTAL PETROLEUM CORP	45.	7.
ORACLE CORPORATION	7.	54.
PROCTER & GAMBLE CO	54.	43.
QUALCOMM INC	43.	210.
SPDR BARCLAYS HIGH YIELD BOND ETF	210.	27.
STARBUCKS CORP	27.	34.
STATE STREET CORP	34.	43.
SUNTRUST BANKS	43.	16.
TJX COMPANIES INC	16.	54.
UIL HOLDINGS CORPORATION	54.	89.
VERIZON COMMUNICATIONS INC	89.	19.
VISA, INC	19.	38.
WALGREEN CO	38.	18.
THE WILLIAMS COS.	18.	25.
WILLIAMS SONOMA INC	25.	56.
XCEL ENERGY, INC.	56.	41.
EATON CORP PLC	41.	26.
INVESCO LTD.	26.	16.
TRANSOCEAN LTD	16.	
TOTAL	3,309.	3,242.

EDITH M. BURBECK T/U/W

04-6278585

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	600.	300.		300.
TOTALS	600.	300.	NONE	300.



EDITH M. BURBECK T/U/W

04-6278585

FORM 990PF, PART I - TAXES

=====

DESCRIPTION -----	REVENUE AND EXPENSES PER BOOKS -----
FEDERAL ESTIMATES - PRINCIPAL	44.
	-----
TOTALS	44.
	=====

EDITH M. BURBECK T/U/W

04-6278585

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

REVENUE  
AND  
EXPENSES  
PER BOOKS  
-----

CHARITABLE  
PURPOSES  
-----

DESCRIPTION  
-----

OTHER ALLOCABLE EXPENSE-PRINCI

275.

275.

TOTALS

-----  
275.  
=====

-----  
275.  
=====





EDITH M. BURBECK T/U/W  
FORM 990PF, PART XV - LINES 2a - 2d  
=====

04-6278585

RECIPIENT NAME:

EASTERN BANK, C/O JAMES BONFANTI

ADDRESS:

605 BROADWAY, LF 41

SAUGUS, MA 01906

RECIPIENT'S PHONE NUMBER: 781-581-4222

FORM, INFORMATION AND MATERIALS:

APPLICATION FORMS AVAILABLE UPON REQUEST

SUBMISSION DEADLINES:

NONE

RESTRICTIONS OR LIMITATIONS ON AWARDS:

LIMITED TO CHARITABLE, RELIGIOUS AND SCIENTIFIC  
ORGANIZATIONS LOCATED WITHIN ESSEX COUNTY,  
MASSACHUSETTS.



**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 <b>EDITH M. BURBECK T/U/W</b>	Employer identification number <b>04-6278585</b>
--	---

**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 . . . . .	11,594.	11,362.		232.
<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> <b>Net short-term capital gain or (loss).</b> Combine lines 1a through 6 in column (h). Enter here and on line 17, column (3) on the back . . . . . ▶			<b>7</b>	232.

**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 . . . . .	53,655.	44,647.		9,008.
<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>	60.
<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> <b>Net long-term capital gain or (loss).</b> Combine lines 8a through 15 in column (h). Enter here and on line 18a, column (3) on the back . . . . . ▶			<b>16</b>	9,068.

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.

Table with 4 columns: (1) Beneficiaries' (see instr.), (2) Estate's or trust's, (3) Total, and a description column. Rows include Net short-term gain or (loss), Net long-term gain or (loss) (Total for year, Unrecaptured section 1250 gain, 28% rate gain), and Total net gain or (loss).

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

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.

Table with 4 columns: (1) Beneficiaries' (see instr.), (2) Estate's or trust's, (3) Total, and a description column. Rows include taxable income from Form 1041, line 22 (or Form 990-T, line 34), and various calculations for tax on capital gains (lines 22-45).



Form **8949**

# Sales and Other Dispositions of Capital Assets

OMB No 1545-0074

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

**2014**

Department of the Treasury  
Internal Revenue Service

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

Attachment  
Sequence No. **12A**

Name(s) shown on return

EDITH M. BURBECK T/U/W

Social security number or taxpayer identification number

04-6278585

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 as 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 Note above)
- (B) Short-term transactions reported on Form(s) 1099-B showing basis was not reported to the IRS
- (C) Short-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	
3.	ANALOG DEVICES	12/10/2013	06/24/2014	163.00	147.00			16.00
7.	BANK AMERICA CORP	06/05/2014	06/24/2014	109.00	108.00			1.00
2.	CHEVRON CORP	07/02/2013	06/24/2014	264.00	239.00			25.00
18.	GUGGENHEIM BULLETSHARE	08/02/2013	06/24/2014	380.00	375.00			5.00
17.	GUGGENHEIM BULLETSHARE	08/02/2013	06/24/2014	388.00	383.00			5.00
15.	GUGGENHEIM BULLETSHARE	08/02/2013	06/24/2014	334.00	334.00			
42.	GUGGENHEIM BULLETSHARE	01/27/2014	11/18/2014	929.00	940.00			-11.00
3.	COACH, INC.	03/04/2013	01/27/2014	145.00	147.00			-2.00
1.	COACH, INC.	03/13/2013	03/06/2014	48.00	50.00			-2.00
1.	COSTCO WHOLESALE CORP,	03/04/2013	01/27/2014	113.00	103.00			10.00
11.	DOW CHEMICAL CO	12/04/2013	03/06/2014	549.00	429.00			120.00
3.	DOW CHEMICAL CO	12/04/2013	06/24/2014	158.00	117.00			41.00
5.	GENERAL ELEC CO	01/27/2014	06/24/2014	133.00	124.00			9.00
12.	HOLLYFRONTIER CORP	10/08/2013	03/06/2014	571.00	485.00			86.00

**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 1b (if Box A above is checked), line 2 (if Box B above is checked), or line 3 (if Box C above is checked) ▶

**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 (g) to correct the basis. See Column (g) 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)



Form **8949**

**Sales and Other Dispositions of Capital Assets**

OMB No 1545-0074

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

**2014**

Department of the Treasury  
Internal Revenue Service

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

Attachment Sequence No **12A**

Name(s) shown on return

EDITH M. BURBECK T/U/W

Social security number or taxpayer identification number

04-6278585

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 Note above)
- (B) Short-term transactions reported on Form(s) 1099-B showing basis was not reported to the IRS
- (C) Short-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	
5.	HOLLYFRONTIER CORP	10/08/2013	06/24/2014	246.00	202.00			44.00
38.	HOLLYFRONTIER CORP	10/08/2013	10/07/2014	1,608.00	1,537.00			71.00
2.	HOME DEPOT INC	09/17/2013	06/24/2014	161.00	152.00			9.00
1.	I B M CORP	10/03/2013	06/24/2014	181.00	184.00			-3.00
9.	I SHARES NATIONAL MUNI	01/27/2014	04/09/2014	963.00	941.00			22.00
3.	I SHARES BARCLAYS 1-3 Y BOND FUN	08/02/2013	06/24/2014	316.00	315.00			1.00
9.	I SHARES BARCLAYS 1-3 Y BOND FUN	01/27/2014	08/18/2014	949.00	949.00			
2.	ISHARES FLOATING RATE B	04/10/2014	06/24/2014	102.00	102.00			
2.	NATIONAL-OILWELL, INC	03/07/2014	06/24/2014	159.00	141.00			18.00
.	.75 NOW, INC.	03/07/2014	06/09/2014	24.00	24.00			
3.	NOW, INC.	03/07/2014	06/24/2014	108.00	95.00			13.00
28.	NOW, INC.	06/10/2014	11/06/2014	772.00	915.00			-143.00
6.	SALESFORCE.COM	04/08/2014	06/24/2014	345.00	331.00			14.00
2.	WILLIAMS SONOMA INC	03/07/2014	06/24/2014	143.00	119.00			24.00

**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 1b (if Box A above is checked), line 2 (if Box B above is checked), or line 3 (if Box C above is checked) ►

**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 (g) to correct the basis. See Column (g) 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)



Form **8949**

# Sales and Other Dispositions of Capital Assets

OMB No 1545-0074

Department of the Treasury  
Internal Revenue Service

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

**2014**

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

Attachment Sequence No. **12A**

Name(s) shown on return

Social security number or taxpayer identification number

EDITH M. BURBECK T/U/W

04-6278585

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 **Note** above)
- (B) Short-term transactions reported on Form(s) 1099-B showing basis was **not** reported to the IRS
- (C) Short-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 <i>Column (e)</i> 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) <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	
	3. EATON CORP PLC	08/05/2013	06/24/2014	233.00	199.00			34.00
	16. EATON CORP PLC	01/27/2014	10/27/2014	1,000.00	1,175.00			-175.00
<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 1b (if Box A above is checked), line 2 (if Box B above is checked), or line 3 (if Box C above is checked) ►				11,594.	11,362.			232.

**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 (g) to correct the basis. See *Column (g)* 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 <b>EDITH M. BURBECK T/U/W</b>	Social security number or taxpayer identification number <b>04-6278585</b>
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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 (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	
	7. AETNA U S HEALTHCARE IN	03/09/2012	01/27/2014	484.00	328.00			156.00
	26. AETNA U S HEALTHCARE I	03/09/2012	04/08/2014	1,885.00	1,218.00			667.00
	2. AMERICAN EXPRESS CO	10/05/2011	01/27/2014	172.00	86.00			86.00
	6. AMERICAN EXPRESS CO	10/05/2011	06/05/2014	555.00	257.00			298.00
	2. AMERICAN EXPRESS CO	10/05/2011	06/24/2014	190.00	86.00			104.00
	1. APPLE	09/16/2010	04/08/2014	522.00	272.00			250.00
	3. APPLE	09/22/2011	06/24/2014	273.00	174.00			99.00
	4. BECTON DICKINSON CO	03/09/2012	01/27/2014	430.00	309.00			121.00
	2. BECTON DICKINSON CO	03/09/2012	06/24/2014	237.00	154.00			83.00
	1. BIOGEN IDEC INC	03/09/2012	06/24/2014	316.00	120.00			196.00
	1. CARDINAL HEALTH, INC.	03/09/2012	06/24/2014	69.00	42.00			27.00
	1. CATERPILLAR INC.	03/09/2012	01/27/2014	91.00	111.00			-20.00
	2. CATERPILLAR INC.	03/09/2012	06/24/2014	216.00	221.00			-5.00
	4. CELGENE CORPORATION	08/01/2012	01/27/2014	630.00	274.00			356.00
<p><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) ▶</p>								

**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 <b>EDITH M. BURBECK T/U/W</b>	Social security number or taxpayer identification number <b>04-6278585</b>
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**Part II Long-Term.** Transactions involving capital assets you held more than 1 year are long term. For short-term transactions, see page 1.

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- (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 <i>Column (e)</i> 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	
	1. CELGENE CORPORATION	08/01/2012	06/24/2014	171.00	69.00			102.00
	2. CHUBB CORP	06/06/2013	06/24/2014	187.00	172.00			15.00
	100. GUGGENHEIM BULLETS HAR	08/02/2013	11/14/2014	2,217.00	2,224.00			-7.00
	231. GUGGENHEIM BULLETS HAR	08/02/2013	11/18/2014	5,112.00	5,137.00			-25.00
	32. COACH, INC.	03/04/2013	03/06/2014	1,547.00	1,568.00			-21.00
	5. COCA-COLA CO	03/09/2012	06/24/2014	209.00	174.00			35.00
	5. CORNING INC	12/04/2012	06/24/2014	110.00	61.00			49.00
	1. COSTCO WHOLESALE CORP,	03/04/2013	06/24/2014	116.00	103.00			13.00
	11. WALT DISNEY PRODUCTION	03/09/2012	01/27/2014	800.00	467.00			333.00
	6. DISCOVER FINANCIAL SERV	04/04/2012	01/27/2014	321.00	199.00			122.00
	6. DISCOVER FINANCIAL SERV	04/04/2012	06/05/2014	360.00	199.00			161.00
	3. DISCOVER FINANCIAL SERV	04/04/2012	06/24/2014	186.00	99.00			87.00
	3. EBAY INC	03/09/2012	01/27/2014	159.00	108.00			51.00
	3. EBAY INC	03/09/2012	06/24/2014	147.00	108.00			39.00
<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**  
 EDITH M. BURBECK T/U/W . 04-6278585

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- (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	
	34. EBAY INC	03/13/2013	10/27/2014	1,737.00	1,244.00			493.00
	2. FEDEX CORPORATION	03/09/2012	06/24/2014	300.00	183.00			117.00
	8. FORD MOTOR CO	02/05/2013	06/24/2014	136.00	106.00			30.00
	1. GOOGLE INC CL A	03/04/2011	06/24/2014	576.00	301.00			275.00
	1. GOOGLE INC CL C	03/04/2011	06/24/2014	567.00	300.00			267.00
	3. HALLIBURTON CO	05/14/2010	01/27/2014	146.00	85.00			61.00
	3. HALLIBURTON CO	09/16/2010	06/24/2014	205.00	87.00			118.00
	.625 HALYARD HEALTH INC	12/04/2012	11/07/2014	24.00	18.00			6.00
	2. HONEYWELL INT'L INC.	05/02/2012	06/24/2014	186.00	121.00			65.00
	11. I SHARES S & P MIDCAP	04/29/2010	01/27/2014	1,437.00	922.00			515.00
	9. I SHARES S & P MIDCAP 4	04/29/2010	06/24/2014	1,275.00	754.00			521.00
	23. I SHARES NATIONAL MUNI	02/24/2012	04/09/2014	2,461.00	2,538.00			-77.00
	6. I SHARES BARCLAYS INT C	02/16/2011	06/24/2014	659.00	630.00			29.00
	27. I SHARES BARCLAYS INT	02/24/2012	11/14/2014	2,959.00	2,874.00			85.00
<p><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) ▶</p>								

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Name(s) shown on return Name and SSN or taxpayer identification no. not required if shown on other side <b>EDITH M. BURBECK T/U/W</b>	Social security number or taxpayer identification number <b>04-6278585</b>
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- (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 <i>Column (e)</i> 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) <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	
	70. I SHARES BARCLAYS 1-3 BOND FUN	08/02/2013	08/18/2014	7,380.00	7,360.00			20.00
	2. JOHNSON & JOHNSON	03/09/2012	06/24/2014	210.00	130.00			80.00
	2. KIMBERLY CLARK CORP	12/04/2012	01/27/2014	216.00	172.00			44.00
	2. KIMBERLY CLARK CORP	12/04/2012	06/24/2014	223.00	172.00			51.00
	3. KIMBERLY CLARK CORP	12/04/2012	10/27/2014	340.00	258.00			82.00
	2. MERCK & CO INC. NEW	01/07/2011	01/27/2014	106.00	75.00			31.00
	2. MERCK & CO INC. NEW	02/16/2011	06/24/2014	116.00	66.00			50.00
	23. MORGAN STANLEY	03/09/2012	06/05/2014	724.00	421.00			303.00
	6. MORGAN STANLEY	03/09/2012	06/24/2014	193.00	110.00			83.00
	2. NUCOR CORP	03/09/2012	01/27/2014	97.00	85.00			12.00
	2. NUCOR CORP	03/09/2012	06/24/2014	100.00	85.00			15.00
	3. OCCIDENTAL PETROLEUM CO	01/15/2010	06/24/2014	306.00	237.00			69.00
	14. OCCIDENTAL PETROLEUM C	10/03/2012	11/06/2014	1,198.00	1,130.00			68.00
	59. ORACLE CORPORATION	01/05/2012	01/27/2014	2,162.00	1,724.00			438.00
<p><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 8b</b> (if <b>Box D</b> above is checked), <b>line 9</b> (if <b>Box E</b> above is checked), or <b>line 10</b> (if <b>Box F</b> above is checked) ▶</p>								

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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

EDITH M. BURBECK T/U/W

04-6278585

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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 <i>Column (e)</i> 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) <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	
2.	PROCTER & GAMBLE CO	03/09/2012	01/27/2014	157.00	134.00			23.00
2.	PROCTER & GAMBLE CO	03/09/2012	06/24/2014	158.00	134.00			24.00
2.	QUALCOMM INC	07/10/2012	01/27/2014	147.00	110.00			37.00
2.	QUALCOMM INC	07/10/2012	06/24/2014	159.00	110.00			49.00
4.	SPDR BARCLAYS HIGH YIELD	02/11/2010	06/24/2014	167.00	150.00			17.00
3.	STARBUCKS CORP	05/02/2012	01/27/2014	224.00	174.00			50.00
3.	STARBUCKS CORP	05/02/2012	06/24/2014	232.00	174.00			58.00
10.	STATE STREET CORP	03/09/2012	06/05/2014	665.00	421.00			244.00
2.	STATE STREET CORP	03/09/2012	06/24/2014	136.00	84.00			52.00
4.	SUNTRUST BANKS	01/03/2013	01/27/2014	152.00	114.00			38.00
5.	SUNTRUST BANKS	01/03/2013	06/24/2014	202.00	143.00			59.00
2.	TJX COMPANIES INC	03/09/2012	01/27/2014	116.00	76.00			40.00
2.	TJX COMPANIES INC	03/09/2012	06/24/2014	108.00	76.00			32.00
31.	TJX COMPANIES INC	03/09/2012	08/12/2014	1,683.00	1,184.00			499.00
<p><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) ▶</p>								

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Name(s) shown on return. Name and SSN or taxpayer identification no. not required if shown on other side <b>EDITH M. BURBECK T/U/W</b>	Social security number or taxpayer identification number <b>04-6278585</b>
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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	
	3. UIL HOLDINGS CORPORTION	03/09/2012	01/27/2014	114.00	104.00			10.00
	3. UIL HOLDINGS CORPORTION	03/09/2012	06/24/2014	113.00	104.00			9.00
	28. UIL HOLDINGS CORPORTIO	03/09/2012	10/07/2014	1,031.00	973.00			58.00
	4. VERIZON COMMUNICATIONS	01/10/2012	01/27/2014	192.00	155.00			37.00
	3. VERIZON COMMUNICATIONS	01/10/2012	06/24/2014	148.00	116.00			32.00
	1. VISA, INC	03/09/2012	01/27/2014	217.00	118.00			99.00
	2. VISA, INC	03/09/2012	06/10/2014	428.00	235.00			193.00
	1. VISA, INC	03/09/2012	06/24/2014	209.00	118.00			91.00
	6. WALGREEN CO	03/09/2012	01/27/2014	346.00	198.00			148.00
	5. WALGREEN CO	03/09/2012	06/10/2014	371.00	165.00			206.00
	2. WALGREEN CO	03/09/2012	06/24/2014	146.00	66.00			80.00
	6. WEYERHAEUSER CO	05/06/2013	06/24/2014	192.00	186.00			6.00
	4. XCEL ENERGY, INC.	02/03/2012	01/27/2014	113.00	106.00			7.00
	5. XCEL ENERGY, INC.	02/03/2012	06/24/2014	157.00	133.00			24.00
<p><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) ▶</p>								

**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.

