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CANNED AUG 1 3 2015

Form 990-RF
Department of the Treasury
Internal Revenue Service

EXTENDED TO AUGUST 17, 2015 Return of Private Foundation

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

Do not enter social security numbers on this form as it may be made public.
 Information about Form 990-PF and its separate instructions is at www.lrs.gov/form990pf.

OMB No 1545-0052

2014

For	calen	dar year 2014 or tax year beg	ginning		, and ending		
Na	ne of	foundation				A Employer identification	on number
J	•	IRVING & JANE	L. ENGLAN	D CHARITABLE			
_T	RU	ST, A. MOLLOY 8	& F. RUSSE	LL,CO-TRUSTE	ES	04-683626	<u>5</u>
Nur	nber a	nd street (or P O box number if mai	il is not delivered to street	address)	Room/suite	B Telephone number	
_3	70	MAIN ST			800	508-756-2	423
City	y or to	own, state or province, country	y, and ZIP or foreign p	ostal code		C if exemption application is	pending, check here
W	OR	CESTER, MA 0:	1608				
G (Check	all that apply:	tial return	Initial return of a fo	rmer public charity	D 1. Foreign organization	ns, check here
		Fin	al return	Amended return			
_			dress change	Name change		2 Foreign organizations r check here and attach	computation
H_(heck	type of organization:	∫ Section 501(c) <u>(3) e</u> x	empt private foundation		E If private foundation st	tatus was terminated
<u>L</u>	Se	ction 4947(a)(1) nonexempt c	haritable trust	Other taxable private founda	tion	under section 507(b)(1)(A), check here
I Fa	air ma	rket value of all assets at end	of year J Accounting	ng method: X Cash	Accrual	F If the foundation is in a	a 60-month termination
(fi	rom F	Part II, col (c), line 16)	Ot	her (specify)		under section 507(b)(1)(B), check here 🕨 🗔
_	- \$			mn (d) must be on cash b	pasis)		
Pa	art I	Analysis of Revenue and E) (The total of amounts in columns necessarily equal the amounts in	(b), (c), and (d) may not	(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, e	tc., received			N/A	
	2	Check X if the foundation is no	•				
	3	Interest on savings and temporary cash investments		788.	788.		STATEMENT 1
	4	Dividends and interest from s	securities	118,094.	118,094.		STATEMENT 2
	5a	Gross rents					
	Ь	Net rental income or (loss)					
•	6a	Net gain or (loss) from sale of asse	ets not on line 10	5,057.			
ž	Ь	Gross sales price for all assets on line 6a	468,707.				
Revenue	7	Capital gain net income (from Part	IV, line 2)		5,057.		
Ě	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)					
	11	Other income		681.	681.		STATEMENT 3
	12	Total. Add lines 1 through 1	1	124,620.	124,620.		
	13	Compensation of officers, directors	· ·	7,500.	3,750.		3,750.
	14	Other employee salaries and	wages				
σ.	15	Pension plans, employee ben					
ses	16a	Legal fees	STMT 4	3,000.	1,500.		1,500.
Expense	b	Accounting fees	STMT 5	4,500.	2,250.		2,250.
ă	C	Other professional fees	STMT 6	4,910.	<u>2,455.</u>		2,455.
tive	17	Interest	am. = =				
Operating and Administrative	18-	Taxes	STMT 7	2,232.	0.		0.
inis	19	Depreciation and depletion					
ΛĒ	20	Occupancy Office					
/¿Þ	21	Travel, conferences, and mee	, lings		 		
/,E	22	Printing and publications	CDMD 0	365			4.5-
Ei.	23-	Other expenses	STMT 8	365.	0.		195.
era	24	Total operating and adminis		22 507	0 055		10 150
ŏ	0.5	expenses. Add lines 13 throi		22,507.	9,955.		10,150.
	25	Contributions, gifts, grants pa		225,000.			225,000.
	26	Total expenses and disburse	ements.	247,507.	0 055		225 150
	27	Add lines 24 and 25	·	<u> </u>	9,955.		235,150.
	1	Subtract line 26 from line 12:		122 007			
	1 .	Excess of revenue over expenses		<122,887.	114,665.		
	i	Net investment income (if neg			114,005.	NT / 3	-
4235		Adjusted net income (if negati	ive, enter -U-)	<u> </u>		N/A	

TRUST, A. MOLLOY & F. RUSSELL, CO-TRUSTEES

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`Parl	Balance Sheets Attached schedules and amounts in the description	Beginning of year	End of	
Pari	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
1	Cash - non-interest-bearing			
2	Savings and temporary cash investments	1,193,996.	139,941.	139,941.
3	Accounts receivable ►			
	Less: allowance for doubtful accounts			
4				
'	Less; allowance for doubtful accounts ▶			
5	Grants receivable			
ء ا	Receivables due from officers, directors, trustees, and other			
"	disqualified persons			
_	· · · · ·			
'	Other notes and loans receivable			
	Less: allowance for doubtful accounts			
2 8				
8 9 9	Prepaid expenses and deferred charges			
10	a Investments - U.S. and state government obligations			
Į.	b Investments - corporate stock \mathbf{STMT} 9 $oxedsymbol{oxed}$	1,842,727.	2,693,755.	3,427,809.
	c Investments - corporate bonds STMT 10	794,143.	874,236.	913,114.
11	Investments - land, buildings, and equipment basis			
	Less accumulated depreciation			
12				
13				
14				
' '	Less accumulated depreciation			
4.5				
15	,			
16	Total assets (to be completed by all filers - see the	3 930 966	2 707 022	4 400 064
	instructions. Also, see page 1, item I)	3,830,866.	3,707,932.	4,480,864.
	Accounts payable and accrued expenses			
18	· · ·			
မ္မ 19	Deferred revenue			
를 20	Loans from officers, directors, trustees, and other disqualified persons			
Liabilities 50 51	Mortgages and other notes payable			
그 22	Other liabilities (describe 🕨)			
			}	
23	Total liabilities (add lines 17 through 22)	0.	0.	
	Foundations that follow SFAS 117, check here			
	and complete lines 24 through 26 and lines 30 and 31.			
S 24	Unrestricted	3,830,866.	3,707,932.	
E 25				
E 26	Permanently restricted			
֓֞֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓	Foundations that do not follow SFAS 117, check here			
Ē	and complete lines 27 through 31			
৳ ৣ	· · · · · · · · · · · · · · · · · · ·			
Net Assets or Fund Balances		7		
98 28 28	· · · · · · · · · · · · · · · · · · ·			
주 29	- · · · · · · · · · · · · · · · · · · ·	2 020 066	2 707 000	
≥ 30	Total net assets or fund balances	3,830,866.	3,707,932.	
31	Total liabilities and net assets/fund balances	3,830,866.	3,707,932.	
Par	Analysis of Changes in Net Assets or Fund Ba	alances		
	~~~~~	00		
	al net assets or fund balances at beginning of year - Part II, column (a), line	30		
•	ust agree with end-of-year figure reported on prior year's return)		1	3,830,866.
	er amount from Part I, line 27a		2	<122,887.
	er increases not included in line 2 (itemize)	<del>- ·</del>	3	0.
	d lines 1, 2, and 3		4	3,707,979.
<b>5</b> De	creases not included in line 2 (itemize) ADJUSTMENTS TO	COST BASIS		47.
6 To	al net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	lumn (b), line 30	6	3,707,932.
	<del>-</del>	<del></del>		Form <b>990-PF</b> (2014)

Form 990-PF (2014)

Form 990-PF (2014) TRUST, A. MOLLOY & F. RUSSELL, CO-TRUSTEES 04-6836265 Page 3 Part IV Capital Gains and Losses for Tax on Investment Income (b) How acquired P - Purchase (c) Date acquired (mo., day, yr.) (d) Date sold (mo., day, yr.) (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.) D - Donation 1a þ SEE ATTACHED STATEMENTS C d е (f) Depreciation allowed (g) Cost or other basis (h) Gain or (loss) (e) Gross sales price (or allowable) plus expense of sale (e) plus (f) minus (g) а b C d 468.707. 463,650 5,057. е 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 (j) Adjusted basis (k) Excess of col. (i) Losses (from col. (h)) (i) F.M.V. as of 12/31/69 as of 12/31/69 over col. (j), if any b C d 5,057. е If gain, also enter in Part I, line 7 2 Capital gain net income or (net capital loss) 5,057. If (loss), enter -0- in Part I, line 7 2 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). If (loss), enter -0- in Part I, line 8 N/A 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. Yes X No Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part, Enter the appropriate amount in each column for each year; see the instructions before making any entries. (d)
Distribution ratio
(col. (b) divided by col. (c)) (a) Base period years (c) Adjusted qualifying distributions Net value of noncharitable-use assets Calendar year (or tax year beginning in) 227,324. 4,274,961 2013 .053176 2012 215,024. 4,029,866. .053358 206,845. 2011 3,950,558. .052358 197,300. 2010 3,870,432 .050976 170,000 2009 341,092 050882 2 Total of line 1, column (d) 2 <u>.26</u>0750 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 .052150 Enter the net value of noncharitable-use assets for 2014 from Part X, line 5 <u>4,438,003.</u> Multiply line 4 by line 3 231,442. 5 Enter 1% of net investment income (1% of Part I, line 27b) 6 1,147. 7 Add lines 5 and 6 232,589. 7 8 Enter qualifying distributions from Part XII, line 4 235,150. 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.

•	J. IRVING & JANE L. ENGLAND CHARITABLE				
		4-683			age 4
Pa	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 49	48 - see	instru	ctior	15)
1a	Exempt operating foundations described in section 4940(d)(2), check here  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 🕨 🗶 and enter 1%	1		<u>1,1</u>	<u>47.</u>
	of Part I, line 27b				
	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			<u>.0.</u>
3	F	3		1,1	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4			<u>0.</u>
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5		1,1	<u>47.</u>
6	Credits/Payments:				
	2014 estimated tax payments and 2013 overpayment credited to 2014  6a 1,449.				
	Exempt foreign organizations - tax withheld at source				
	Tax paid with application for extension of time to file (Form 8868)  6c				
	Backup withholding erroneously withheld 6d	_			4.0
_	Total credits and payments. Add lines 6a through 6d	7		1,4	<u>49.</u>
8	Enter any penalty for underpayment of estimated tax. Check here 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		2	<u> </u>
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid  Enter the amount of line 10 to be: Credited to 2015 estimated tax	10			02.
11 Da	Enter the amount of line 10 to be: Credited to 2015 estimated tax ► 302. Refunded ► 1  Int VII-A Statements Regarding Activities	11	<del></del>	<del></del>	<u> </u>
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in		1 -	Yes	No
ıa	any political campaign?	•	1a		X
h	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)?	)	1b		X
U	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published		''		
	distributed by the foundation in connection with the activities.	, 0,			
c	Did the foundation file Form 1120-POL for this year?		1c		х
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:		''		
·	(1) On the foundation. ► \$ 0 . (2) On foundation managers. ► \$ \$				
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation				
·	managers. ► \$ 0.				
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		2		х
	If "Yes," attach a detailed description of the activities.				
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		3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	N/A	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		5		X
	If "Yes," attach the statement required by General Instruction T				
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?		6	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		7	_X	
_					
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)	<del></del>			
	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	.a	<u>8</u> b	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 caler	ıuar			v
40	year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "Yes," complete Part XIV		9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses		10	L	X

IRVING & JANE L. ENGLAND CHARITABLE TRUST, A. MOLLOY & F. RUSSELL, CO-TRUSTEES 04-6836265 Form 990-PF (2014) Page 5 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 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? 13 Website address ► N/A The books are in care of ▶ ANN K. MOLLOY & FRANCIS J. RUSSELL, Telephone no. ▶508-756-2423 Located at ▶ 370 MAIN STREET, SUITE 800, WORCESTER, MA ZIP+4 **▶**01608 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 N/A Yes No 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? 16 X 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 Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required Yes No File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. 1a During the year did the foundation (either directly or indirectly): Yes X No (1) Engage in the sale or exchange, or leasing of property with a disqualified person? (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) Yes X No a disqualified person? (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No Yes X No (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? (5) Transfer any income or assets to a disqualified person (or make any of either available Yes X No for the benefit or use of a disqualified person)? (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 Yes X No termination of government service, if terminating within 90 days.) 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)? 16 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? X 10 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(1)(3) or 4942(1)(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 」Yes □X No before 2014? 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

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.

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that

c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time

Form 4720, to determine if the foundation had excess business holdings in 2014.)

had not been removed from jeopardy before the first day of the tax year beginning in 2014?

4b X Form **990-PF** (2014)

X

3b

4a

2b

N/A

N/A

Yes X No

statement - see instructions.)

during the year?

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Part VII-B   Statements Regarding Activities for Which F	Form 4/20 May Be I	Required (continu	ued)	
. 5a During the year did the foundation pay or incur any amount to:				
(1) Carry on propaganda, or otherwise attempt to influence legislation (section			s X No	
(2) Influence the outcome of any specific public election (see section 4955); o	or to carry on, directly or indire			
any voter registration drive?			s X No	}
(3) Provide a grant to an individual for travel, study, or other similar purposes		Ye	s X No	
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section			
4945(d)(4)(A)? (see instructions)			s X No	
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or			
the prevention of cruelty to children or animals?			s X No	
<b>b</b> If any answer is "Yes" to 5a(1)-(5), did <b>any</b> of the transactions fail to qualify und	<u>.</u>	in Regulations	,_	
section 53.4945 or in a current notice regarding disaster assistance (see instru	•		N/A	ib
Organizations relying on a current notice regarding disaster assistance check h				
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr				
expenditure responsibility for the grant?		「/A	s L No	
If "Yes," attach the statement required by Regulations section 53.494	• •			
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on	<u> </u>	( <del></del>	
a personal benefit contract?		Ye	s X No	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	personal penetit contract?		<u> </u>	Sb X
If "Yes" to 6b, file Form 8870	distant a control		[ <del>52</del> ]	1 1
7a At any time during the tax year, was the foundation a party to a prohibited tax s		Y€	s X No	<del></del>
b If "Yes," did the foundation receive any proceeds or have any net income attributed Part VIII Information About Officers, Directors, Trust		nagara Highli		7b
Paid Employees, and Contractors	ees, roundation wa	magers, migni	,	
1 List all officers, directors, trustees, foundation managers and their	compensation.			
	(b) Title, and average	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Expense
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	and deferred compensation	account, other allowances
ANN K. MOLLOY	CO-TRUSTEE	1		
MOUNTAIN, DEARBORN & WHITING, 370 MAI	n		[	
WORCESTER, MA 01608	1.00	5,625.	0.	0.
FRANCIS J. RUSSELL	CO-TRUSTEE			
MOUNTAIN, DEARBORN & WHITING, 370 MAI				
WORCESTER, MA 01608	0.25	1,875.	0.	0.
			<u></u>	
2 Compensation of five highest-paid employees (other than those inc	(b) Title, and average	enter "NONE."	(d) Contributions to	(e) Expense
(a) Name and address of each employee paid more than \$50,000	hours per week	(c) Compensation	(d) Contributions to employee benefit plans and deferred	account, other
MONT	devoted to position		compensation	allowances
NONE				
	1			
			ļ	
		<del> </del>	<del></del>	
			<del></del>	
	1			

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

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Part VIII Information About Officers, Directors, Trusted Paid Employees, and Contractors (continued)		
3 Five highest-paid independent contractors for professional services.	If none, enter "NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of se	ervice (c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services		▶ 0
Part IX-A   Summary of Direct Charitable Activities  List the foundation's four largest direct charitable activities during the tax year. Include	le relevant statistical information such as the	Expenses
number of organizations and other beneficiaries served, conferences convened, research	irch papers produced, etc.	
N/A		
Part IX-B   Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during	the tax year on lines 1 and 2.	Amount
N/A		
2		
All other program-related investments. See instructions.		
3		

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Total. Add lines 1 through 3

P.	Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	ndations,	see instructions )
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
а	Average monthly fair market value of securities	1a	3,586,216.
	Average of monthly cash balances	1b	919,371.
C	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	4,505,587.
	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) le le l		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	4,505,587.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	67,584.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	4,438,003.
6	Minimum investment return. Enter 5% of line 5	6	221,900.
Р	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here  and do not complete this part.)	nd certain	
1	Minimum investment return from Part X, line 6	1	221,900.
2a	Tax on investment income for 2014 from Part VI, line 5		
b	Income tax for 2014. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	1,147.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	220,753.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	220,753.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	220,753.
P	art 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	235,150.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	235,150.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	income. Enter 1% of Part I, line 27b	5	1,147.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	234,003.
	Note The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation 4940(e) reduction of tax in those years.	qualifies fo	r the section

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				220,753.
2 Undistributed income, if any, as of the end of 2014				
a Enter amount for 2013 only			0.	
b Total for prior years:				
		0.		
3 Excess distributions carryover, if any, to 2014:				
a From 2009 6,129.				
b From 2010 6,815.				•
c From 2011 12,935. d From 2012 16,401.				
16 076				
-	58,356.			
f Total of lines 3a through e  4 Qualifying distributions for 2014 from	30,330.			
Part XII, line 4: ►\$ 235, 150.				
a Applied to 2013, but not more than line 2a			0.	
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus			<u>.</u>	· · · · · · · · · · · · · · · · · · ·
(Election required - see instructions)	0.			
d Applied to 2014 distributable amount				220,753.
e Remaining amount distributed out of corpus	14,397.			
5 Excess distributions carryover applied to 2014 ((f an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract fine 5	72,753.			
<b>b</b> Prior years' undistributed income. Subtract	72,733.			
line 4b from line 2b		0.		
c Enter the amount of prior years'				
undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2013. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2014. Subtract		<del></del>		
lines 4d and 5 from line 1. This amount must				
be distributed in 2015				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required - see instructions)	0.			
8 Excess distributions carryover from 2009	6 100			
not applied on line 5 or line 7	6,129.			
9 Excess distributions carryover to 2015 Subtract lines 7 and 8 from line 6a	66,624.			
10 Analysis of line 9:	00,024.	·	<del> </del>	
a Excess from 2010 6,815.				
b Excess from 2011 12, 935.				
c Excess from 2012 16, 401.	1			
d Excess from 2013 16,076.				
e Excess from 2014 14,397.		· · · · · · · · · · · · · · · · · · ·	<u> </u>	
423581 11-24-14				Form <b>990-PF</b> (2014)

J. IRVING & JANE L. ENGLAND CHARITABLE TRUST, A. MOLLOY & F. RUSSELL, CO-TRUSTEES

Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9) N/A 1 a 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 4942(j)(5) b Check box to indicate whether the foundation is a private operating foundation described in section 4942(i)(3) or 2 a Enter the lesser of the adjusted net Tax year Prior 3 years (a) 2014 (b) 2013 (c) 2012 (d) 2011 (e) Total 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 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 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 Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year-see instructions.) 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).) 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. 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: ANN K. MOLLOY, TRUSTEE, (508)756-2423 370 MAIN STREET, SUITE 800, WORCESTER, MA 01608 b The form in which applications should be submitted and information and materials they should include: DETAILS OF CHARITABLE ACTIVITY Any submission deadlines. DECEMBER 1 OF YEAR FOR WHICH DONATION IS REQUESTED. d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors: DONATIONS ORDINARILY LIMITED TO CHARITIES OPERATING IN WEST BROOKFIELD AND WORCESTER

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TRUST, A. MOLLOY & F. RUSSELL, CO-TRUSTEES 04-6836265 Page 11 Form 990-PF (2014) 'Supplementary Information (continued) Part XV Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual. Purpose of grant or contribution show any relationship to Foundation any foundation manager or substantial contributor Amount status of Name and address (home or business) recipient a Paid during the year ABBY'S HOUSE NONE 501(C)(3) GENERAL 52 HIGH STREET ORGANIZATION WORCESTER, MA 01609 1,000. NONE 501(C)(3) GENERAL ALEX'S TEAM 63 ATLANTIC AVENUE, 3RD FLOOR ORGANIZATION 3,000, BOSTON MA 02110 ALZHEIMER'S ASSOCIATION OF EASTERN NONE 501(C)(3) GENERAL MASSACHUSETTS **DRGANIZATION** PO BOX 96011 WASHINGTON DC 20090 5,000. AMERICAN RED CROSS OF CENTRAL NONE 501(C)(3) GENERAL MASSACHUSETTS ORGANIZATION 2000 CENTURY DR WORCESTER, MA 01606 7,000. AMERICAN ANTIQUARIAN SOCIETY NONE 501(C)(3) GENERAL 185 SALISBURY STREET ORGANIZATION WORCESTER MA 01609 1,000. SEE CONTINUATION SHEET(S) ➤ 3a 225 000. Total **b** Approved for future payment NONE

Total

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TRUST, A. MOLLOY & F. RUSSELL, CO-TRUSTEES

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nter gross amounts unless otherwise indicated.	Unrelated b	usiness income	Excluded	by section 512, 513, or 514	(e)
4.0	(a) Business code	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income
Program service revenue:	COGE		1000		
a					
b	i I		<del>  -   -</del>		
d	i i		<del>                                     </del>		<del></del>
e	1				
1					
Fees and contracts from government agencies					
Membership dues and assessments					
Interest on savings and temporary cash investments					788
Dividends and interest from securities					118,094
Net rental income or (loss) from real estate:					
a Debt-financed property					
b Not debt-financed property					
Net rental income or (loss) from personal					
property			<del>                                     </del>		
Other investment income	<u> </u>		1		681
Gain or (loss) from sales of assets other				1	5 055
than inventory			<del> </del> -		5,057
Net income or (loss) from special events			+		
Gross profit or (loss) from sales of inventory Other revenue:	<u> </u>	<del></del>		<del></del>	<del></del>
b		<del></del>	1 1		
C	1		1 1		<del>_</del>
d	1 1				
е					
Subtotal. Add columns (b), (d), and (e)		0.		0.	124,620
Total Addison 10 columns (b) (d) and (s)				13	124,620
Total Add the 12, coldina (b), (d), and (e)					
	ons.)				
See worksheet in line 13 instructions to verify calculati		plishment of E	xempt F	Purposes	
Part XVI-B Relationship of Activi	ties to the Accon	olumn (e) of Part XVI-	<u> </u>		plishment of
Part XVI-B Relationship of Activities No Explain below how each activity for white	ties to the Accorr ch income is reported in c er than by providing funds	olumn (e) of Part XVI- s for such purposes).	A contribute	d importantly to the accom	
Part XVI-B Relationship of Activities  Explain below how each activity for whith foundation's exempt purposes (other	ties to the Accorr ch income is reported in c er than by providing funds	olumn (e) of Part XVI- s for such purposes).	A contribute	d importantly to the accom	
Line No Explain below how each activity for whith the foundation's exempt purposes (other UNDER TERMS OF THE	ties to the Accorr ch income is reported in c er than by providing funds	olumn (e) of Part XVI- s for such purposes).	A contribute	d importantly to the accom	
Part XVI-B Relationship of Activitine No  Explain below how each activity for whith the foundation's exempt purposes (other UNDER TERMS OF THE	ties to the Accorr ch income is reported in c er than by providing funds	olumn (e) of Part XVI- s for such purposes).	A contribute	d importantly to the accom	
Part XVI-B Relationship of Activities  Explain below how each activity for whith the foundation's exempt purposes (other UNDER TERMS OF THE	ties to the Accorr ch income is reported in c er than by providing funds	olumn (e) of Part XVI- s for such purposes).	A contribute	d importantly to the accom	
Part XVI-B Relationship of Activities  Explain below how each activity for whith the foundation's exempt purposes (other UNDER TERMS OF THE	ties to the Accorr ch income is reported in c er than by providing funds	olumn (e) of Part XVI- s for such purposes).	A contribute	d importantly to the accom	
Part XVI-B Relationship of Activities No Explain below how each activity for white foundation's exempt purposes (other UNDER TERMS OF THE	ties to the Accorr ch income is reported in c er than by providing funds	olumn (e) of Part XVI- s for such purposes).	A contribute	d importantly to the accom	
Part XVI-B Relationship of Activities No Explain below how each activity for white foundation's exempt purposes (other UNDER TERMS OF THE	ties to the Accorr ch income is reported in c er than by providing funds	olumn (e) of Part XVI- s for such purposes).	A contribute	d importantly to the accom	
Part XVI-B Relationship of Activities  Explain below how each activity for white foundation's exempt purposes (other UNDER TERMS OF THE	ties to the Accorr ch income is reported in c er than by providing funds	olumn (e) of Part XVI- s for such purposes).	A contribute	d importantly to the accom	
Part XVI-B Relationship of Activities  Explain below how each activity for whith the foundation's exempt purposes (other UNDER TERMS OF THE	ties to the Accorr ch income is reported in c er than by providing funds	olumn (e) of Part XVI- s for such purposes).	A contribute	d importantly to the accom	
Part XVI-B Relationship of Activities  Explain below how each activity for white foundation's exempt purposes (other UNDER TERMS OF THE	ties to the Accorr ch income is reported in c er than by providing funds	olumn (e) of Part XVI- s for such purposes).	A contribute	d importantly to the accom	
Part XVI-B Relationship of Activities  Explain below how each activity for whith the foundation's exempt purposes (other UNDER TERMS OF THE	ties to the Accorr ch income is reported in c er than by providing funds	olumn (e) of Part XVI- s for such purposes).	A contribute	d importantly to the accom	
Part XVI-B Relationship of Activities  Explain below how each activity for whith the foundation's exempt purposes (other UNDER TERMS OF THE	ties to the Accorr ch income is reported in c er than by providing funds	olumn (e) of Part XVI- s for such purposes).	A contribute	d importantly to the accom	
Part XVI-B Relationship of Activities No Explain below how each activity for white foundation's exempt purposes (other UNDER TERMS OF THE	ties to the Accorr ch income is reported in c er than by providing funds	olumn (e) of Part XVI- s for such purposes).	A contribute	d importantly to the accom	

J. IRVING & JANE L. ENGLAND CHARITABLE <u>04-6836265</u> Form 990-PF (2014) TRUST, A. MOLLOY & F. RUSSELL, CO-TRUSTEES Page 13 Information Regarding Transfers To and Transactions and Relationships With Noncharitable Part XVII **Exempt Organizations** Yes No 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? a Transfers from the reporting foundation to a noncharitable exempt organization of: 1a(1) (1) Cash 1a(2) (2) Other assets **b** Other transactions: (1) Sales of assets to a noncharitable exempt organization 1b(1) 1b(2) (2) Purchases of assets from a noncharitable exempt organization (3) Rental of facilities, equipment, or other assets 1b(3) X (4) Reimbursement arrangements 1b(4) X (5) Loans or loan guarantees 1b(5) (6) Performance of services or membership or fundraising solicitations 1b(6) X c Sharing of facilities, equipment, mailing lists, other assets, or paid employees X 1¢ d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. (b) Amount involved (c) Name of noncharitable exempt organization (a) Line no (d) Description of transfers, transactions, and sharing arrangements N/A2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described Yes X No in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? b If "Yes," complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship N/A Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge May the IRS discuss this return with the preparer and belief, it is true, corregt, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge

lere Signatur	mf. wilver of trustee	5 17/ Date	24 /15 co-	TRUSTEE	shown below (see instr )?  X Yes N
Paid A	nt/Type preparer's name	Preparer's signature  ANN K. MOLLO		self- employed	P01438500
Jse Only	m's address ► 370 MAIN S	TREET, SUITE	TING LLP 800	Firm's EIN ► 04	-2186262
	WORCESTER	_MA_01608		Phone no. (50	8)756-2423

J. IRVING & JANE L. ENGLAND CHARITABLE CONTINUATION FOR 990-PF, TRUST, A. MOLLOY & F. RUSSELL, CO-TRUSTEES 04-6836265 PAGE 1

PART IV

OF

Part IV | Capital Gains and Losses for Tax on Investment Income (b) How acquired (c) Date acquired (a) List and describe the kind(s) of property sold, e.g., real estate. (d) Date sold (mo., day, yr.) (mo., day, yr.) 2-story brick warehouse; or common stock, 200 shs. MLC Co. D - Donation 1a \$50,000 VERIZON COMMUNICATIONS 5.55% 2/15/16 04/02/0811/24/14 09/17/0706/16/14 P b 2,000 SHS AEGON NV CLD PFD 7.25% c \$2,400 CITIGROUP CAPITAL XVII TR PFD SECS 6.35% 02/28/0704/28/14 P d \$2,000 CITIGROUP CAP TRUST CLD CAP TRUST PFD SEC P 02/06/03|04/28/14 e 41.668 SHS FORWARD SELECT INCOME C P 12/06/1312/02/14 1 600 SHS MARKET VECTORS GOLD MINERS P 09/25/1204/28/14 08/23/0012/02/14 g 250 SHS FEDEX CORP P h 2310.952 SHS FORWARD SELECT INCOME C P VARIOUS 12/02/14 1500 SHS GENERAL ELECTRIC CO P VARIOUS 04/28/14 500 SHS HOME DEPOT INC P 11/04/0409/10/14 k 25 SHS EXXON MOBIL CORP P 06/20/14/10/14/14 1 100 SHS OCCIDENTAL PETROLEUM CORP P 10/14/1412/10/14 P 06/20/14|12/10/14 m 50 SHS OCCIDENTAL PETROLEUM CORP P n 636.13 SHS OPPENHEIMER INTL GROWTH FUND 06/20/1410/14/14 o CAPITAL GAINS DIVIDENDS (f) Depreciation allowed (g) Cost or other basis (h) Gain or (loss) (e) Gross sales price (e) plus (f) minus (g) (or allowable) plus expense of sale 53,150. 49,907. 3,243. a 50,000. 50,000. 0. b 60,000. 0. 60,000. C 50,000. 0. 50,000 d 88. 1,068. 980. 14,085. 32,230. <18,145.> 44,583. 10,259. 34,324. g 59,223 84,885. <25,662.> h 39,7<mark>35</mark>. 63,265. <23,530.> 43,975. 21,055. 22,920. 2,281. 2,590. <309.> 7,500. <987.> 8,487. 1 3,750. 4,992. <1,242.> 21,520. 25,000. <3,480.> n 17,837. 17.837. Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (I) Losses (from col. (h)) Gains (excess of col. (h) gain over col. (k), (i) Adjusted basis (k) Excess of col. (i) (i) F.M.V. as of 12/31/69 but not less than "-0-") as of 12/31/69 over col. (1), if any 3,243. а 0. b 0. 0. d 88. е <18,145.> 34,324. 9 h <25,662.> <23,530.> 22,920. <309.> <987.> m <1,242.> n <3,480.> 0 17,837. { If gain, also enter in Part I, line 7 If (loss), enter "-0-" in Part I, line 7 } 2 Capital gain net income or (net capital loss) 2 5,057. 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). If (loss), enter "-0-" in Part I, line 8 3

# J. IRVING & JANE L. ENGLAND CHARITABLE TRUST, A. MOLLOY & F. RUSSELL, CO-TRUSTEES 04-6836265

Supplementary Information Part XV 3 Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to Amount status of contribution any foundation manager Name and address (home or business) recipient or substantial contributor ARTS WORCESTER NONE GENERAL 501(C)(3) ORGANIZATION 660 MAIN STREET WORCESTER, MA 01610 1,000, 501(C)(3) BOY SCOUT TROUP 118 OF WEST NONE GENERAL BROOKFIELD ORGANIZATION PO BOX 165 WEST BROOKFIELD MA 01585 6,500. NONE BOY SCOUTS OF AMERICA, MOHEGAN 501(C)(3) GENERAL ORGANIZATION 19 HARVARD STREET WORCESTER, MA 01609 1,000. BOYS & GIRLS CLUB OF WORCESTER NONE 501(C)(3) GENERAL ORGANIZATION 65 TAINTER ST WORCESTER, MA 01604 5,000, BROAD MEADOW BROOK CONSERVATION & NONE 501(C)(3) GENERAL WILDLIFE ORGANIZATION 414 MASSASOIT RD WORCESTER, MA 01604 6,000. COMMUNITY LEGAL AID NONE 501(C)(3) GENERAL 405 MAIN STREET, 4TH FLOOR ORGANIZATION WASHINGTON MA 01608 4,000. CONCORDIA LUTHERAN CHURCH NONE 501(C)(3) GENERAL 86 MURRAY AVENUE ORGANIZATION WORCESTER, MA 01601 2,000, CUB SCOUT PACK 118 OF WEST BROOKFIELD NONE 501(C)(3) GENERAL PO BOX 456 ORGANIZATION WEST BROOKFIELD MA 01585 6,500. DISMAS HOUSE NONE 501(C)(3) GENERAL PO BOX 30125 ORGANIZATION WORCESTER MA 01603 1,500, EAST QUABBIN LAND TRUST NONE 501(C)(3) GENERAL PO BOX 5, 120 RIDGE RD ORGANIZATION HARWICK, MA 01037 10,000. Total from continuation sheets 208,000.

J. IRVING & JANE L. ENGLAND CHARITABLE
TRUST, A. MOLLOY & F. RUSSELL, CO-TRUSTEES 04-6836265
Part XV Supplementary Information

Part XV Supplementary Information 3 Grants and Contributions Paid During the	<del> </del>			Γ
	If recipient is an individual,	T	<del></del>	
Recipient  Name and address (home or business)	show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
	or substantial contributor	recipient	<del></del>	
LM PARK CENTER FOR EARLY CHILDHOOD	NONE	501(C)(3)	GENERAL	
	NONE	1	GENERAL	
EDUCATION 1884 HIGHLAND ST		ORGANIZATION		
WORCESTER MA 01602				1 50
ORCESTER, MA 01002				1,500
FIRST BAPTIST CHURCH	NONE	501(C)(3)	GENERAL	]
.11 PARK AVE		ORGANIZATION		
ORCESTER, MA 01609				2,000
FIRST CONGREGATIONAL CHURCH OF WEST	NONE	501(C)(3)	GENERAL	
BROOKFIELD	1	ORGANIZATION		
O BOX 371, 36 NORTH MAIN ST				
WEST BROOKFIELD, MA 01585				7,000
FRIENDLY HOUSE	NONE	501(C)(3)	GENERAL	
36 WALL ST		ORGANIZATION		
NORCESTER MA 01609				7,00
1233				
FRIENDS OF HOPE CEMETERY	NONE	501(C)(3)	GENERAL	
119 WEBSTER ST	HOLLD	DRGANIZATION	GENERAL	
WORCESTER MA 01603		DRGAN12A11ON		3.00
WORKER THE TOTAL				3,000
TARLE ANGORDODAMED OF WORKERS	NONE	F01 (0) (2)		
GIRLS INCORPORATED OF WORCESTER 125 PROVIDENCE ST	NONE	501(C)(3) ORGANIZATION	GENERAL	
WORCESTER MA 01604		ORGANIZATION		10.00
NORCESIER, MA 01004		<del></del>		10,000
GREATER WORCESTER COMMUNITY	NONE	501(C)(3)	GENERAL	
FOUNDATION		ORGANIZATION		
370 MAIN STREET, SUITE 650				
WORCESTER, MA 01608	<u> </u>			1,00
HADWEN PARK CONGREGATIONAL CHURCH	NONE	501(C)(3)	GENERAL	1
6 CLOVER STREET		ORGANIZATION		-
WORCESTER, MA 01603	<del> </del>	<del> </del>		1,00
HOPE LODGE	NONE	501(C)(3)	GENERAL	
7 OAK ST		ORGANIZATION		
WORCESTER, MA 01609				5,00
JOY OF MUSIC PROGRAM	NONE	501(C)(3)	GENERAL	
ONE GORHAM ST		ORGANIZATION		
WORCESTER MA 01605				3,00
Total from continuation sheets				T 3,00

# J. IRVING & JANE L. ENGLAND CHARITABLE TRUST, A. MOLLOY & F. RUSSELL, CO-TRUSTEES

04-6836265 Supplementary Information Part XV Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Purpose of grant or contribution Foundation show any relationship to Amount status of any foundation manager Name and address (home or business) recipient or substantial contributor LATIN AMERICAN HEALTH ALLIANCE -NONE 501(C)(3) GENERAL HECTOR REYES HOUSE ORGANIZATION 27 VERNON STREET 1,000. WORCESTER, MA 01610 MARLBOROUGH HOSPITAL NONE 501(C)(3) GENERAL ORGANIZATION 157 UNION STREET MARLBOROUGH, MA 01752 2,000. MASONIC EDUCATION & CHARITY TRUST NONE 501(C)(3) GENERAL 186 TREMONT ST - ROOM 207 ORGANIZATION 3,500. BOSTON MA 02111 NONE 501(C)(3) GENERAL MASONIC LEARNING CENTER ORGANIZATION ONE IONIC AVE WORCESTER, MA 01608 3,000. NONE 501(C)(3) GENERAL MECHANICS HALL 321 MAIN STREET ORGANIZATION WORCESTER MA 01608 3,000, MERRIAM-GILBERT LIBRARY NONE 501(C)(3) GENERAL ORGANIZATION 9 WEST MAIN STREET WEST BROOKFIELD, MA 01585 9,000. PRESERVATION WORCESTER NONE 501(C)(3) GENERAL ORGANIZATION 10 CEDAR STREET WORCESTER, MA 01609 2,000. OUABOAG HISTORICAL SOCIETY NONE 501(C)(3) GENERAL PO BOX 635 ORGANIZATION WEST BROOKFIELD MA 01585 7,500. REGIONAL ENVIRONMENTAL COUNCIL NONE 501(C)(3) GENERAL PO BOX 255 ORGANIZATION WORCESTER, MA 01613 5,000. SEVEN HILLS FOUNDATION NONE 501(C)(3) GENERAL 81 HOPE AVE ORGANIZATION WORCESTER, MA 01603 6,000. Total from continuation sheets

TRUST, A. MOLLOY & F. RUSSELL, CO-TRUSTEES 04-6836265 Supplementary Information Part XV Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to contribution Amount status of any foundation manager Name and address (home or business) or substantial contributor recipient STRAIGHT AHEAD NONE 501(C)(3) GENERAL 791 MAIN STREET ORGANIZATION 1,000. WORCESTER MA 01610 THE TRUSTEES OF RESERVATION NONE 501(C)(3) GENERAL 572 ESSEX ST ORGANIZATION 5,000. BEVERLY, MA 01915 UNITED WAY OF CENTRAL MASSACHUSETTS NONE 501(C)(3) GENERAL ORGANIZATION 484 MAIN ST, STE 300 3,000, WORCESTER, MA 01608 NONE VNA OF CENTRAL MASSACHUSETTS 501(C)(3) GENERAL 120 THOMAS ST ORGANIZATION WORCESTER, MA 01608 5,000. WEST BROOKFIELD COUNCIL ON AGING NONE 501(C)(3) GENERAL 27 FRONT ST. PO BOX 207 ORGANIZATION 5,000. WEST BROOKFIELD MA 01585 WEST BROOKFIELD HISTORICAL COMMISSION NONE 501(C)(3) GENERAL ORGANIZATION PO BOX 372 WEST BROOKFIELD MA 01585 7,500. WEST BROOKFIELD PARENT/TEACHER GROUP NONE 501(C)(3) GENERAL NATURE'S CLASSROOM ORGANIZATION 89 NORTH MAIN ST WEST BROOKFIELD, MA 01585 10,000. WEST BROOKFIELD RESCUE SQUAD NONE 501(C)(3) GENERAL PO BOX 540 ORGANIZATION WEST BROOKFIELD, MA 01585 8,000. WHY ME NONE 501(C)(3) GENERAL 1152 PLEASANT STREET ORGANIZATION WORCESTER MA 01602 7,000. WORCESTER ART MUSEUM NONE 501(C)(3) GENERAL ORGANIZATION 55 SALISBURY ST WORCESTER MA 01602 3,000.

Total from continuation sheets

TRUST, A. MOLLOY & F. RUSSELL, CO-TRUSTEES 04-6836265 Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Purpose of grant or show any relationship to Foundation Amount contribution any foundation manager status of Name and address (home or business) or substantial contributor recipient WORCESTER CENTER FOR CRAFTS NONE 501(C)(3) GENERAL 24 SAGAMORE RD ORGANIZATION 3,000. WORCESTER MA 01605 WORCESTER CHAMBER MUSIC SOCIETY NONE 501(C)(3) GENERAL P.O. BOX 21001 ORGANIZATION 1,000. WORCESTER, MA 01602 WORCESTER CHILDREN'S FRIEND SOCIETY NONE GENERAL 501(C)(3) DRGANIZATION 21 CEDAR ST 5,000, WORCESTER, MA 01609 NONE WORCESTER COUNTY FOOD BANK 501(C)(3) GENERAL 474 BOSTON TURNPIKE ORGANIZATION SHREWSBURY MA 01545 1,000. NONE WORCESTER COUNTY HORTICULTURAL 501(C)(3) GENERAL ORGANIZATION SOCIETY 11 FRENCH DRIVE, PO BOX 598 BOYLSTON, MA 01505 5,000, WORCESTER HISTORICAL SOCIETY NONE 501(C)(3) GENERAL ORGANIZATION 30 ELM ST WORCESTER MA 01609 3,500. WORCESTER JEWISH COMMUNITY CENTER NONE 501(C)(3) GENERAL 633 SALISBURY STREET ORGANIZATION WORCESTER MA 01609 1,000, WORCESTER NATURAL HISTORY SOCIETY NONE 501(C)(3) GENERAL 222 HARRINGTON WAY ORGANIZATION WORCESTER, MA 01604 6,500. WORCESTER PUBLIC LIBRARY FOUNDATION NONE 501(C)(3) GENERAL 3 SALEM SQUARE ORGANIZATION WORCESTER MA 01608 1,500. Total from continuation sheets

FORM 990-PF	INTEREST	ON	SAVINGS	AND	TEMPORARY	CASH	INVESTMENTS	STATEMENT	1
SOURCE					(A) REVENUE R BOOKS	NET	(B) INVESTMENT INCOME	(C) ADJUSTE NET INCO	
COMMONWEALTH	FINANCIAI	·	_		2.		2.		
MERRILL LYNCH	I				228.		228.		
MORGAN STANLE	Y				23.		23.		
SANTANDER BAN	TK .				377.		377.		
US TRUST					158.		158.		
TOTAL TO PART	I, LINE	3	-		788.		788.		

FORM 990-PF	DIVIDENDS	AND INTEREST	FROM SECURI	TIES ST.	ATEMENT 2
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS	· ·	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
COMMONWEALTH				-	
FINANCIAL NETWORK	3,540.	301.	3,239.	3,239.	
MERRILL LYNCH	56,768.	0.	56,768.		
MORGAN STANLEY	64,381.	11,733.	52,648.		
US TRUST	11,925.	5,803.	6,122.	6,122.	
US TRUST - 2015					
DIVIDEND	<668.>	0.	<668.>	<668.>	
US TRUST -					
OVERSTATED DIV ON					
1099	<15.>	0.	<15.>	<15.>	
TO PART I, LINE 4	135,931.	17,837.	118,094.	118,094.	

FORM 990-PF OTHER	INCOME		STATEMENT 3
DESCRIPTION	(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
MORGAN STANLEY - NONDIVIDEND DISTRIBUTIONS US TRUST - NONDIVIDEND	282.	282	•
DISTRIBUTIONS	399.	399	•
TOTAL TO FORM 990-PF, PART I, LINE 11	681.	681	•

FORM 990-PF	LEGAL FEES		STATEMENT 4		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
LEGAL FEES	3,000.	1,500.		1,500.	
TO FM 990-PF, PG 1, LN 16A	3,000.	1,500.		1,500.	

FORM 990-PF	ACCOUNTI	NG FEES	STATEMENT 5		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
ACCOUNTING FEES	4,500.	2,250.		2,250.	
TO FORM 990-PF, PG 1, LN 16B	4,500.	2,250.		2,250.	

FOŔM 990-PF C	THER PROFESSIONAL FEES		STATEMENT		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
US TRUST FEES	4,910.	2,455.		2,455.	
TO FORM 990-PF, PG 1, LN 16C	4,910.	2,455.		2,455.	

FORM 990-PF	TAX	ES	STATEME	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
2013 FORM 990-PF ESTIMATED TAX DUE FOREIGN TAXES	1,260. 972.	0.		0.
TO FORM 990-PF, PG 1, LN 18	2,232.	0.		0.

FORM 990-PF	OTHER E	XPENSES	S'	PATEMENT 8
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
FORM PC FILING FEE	70.	0.		70.
MERRILL LYNCH CMA FEE	125.	0.		125.
AGENT CUSTODY FEES - SIEMENS AKTIENGELLSCHAFT AGENT CUSTODY FEES -	12.	0.		0.
ANHEUSER BUSCH INBEV SA SPON	26.	0.		0.
TOA DELIVERY FEE	75.	0.		0.
DEATH CTFES	12.	0.		0.
LUNCHEON	14.	0.		0.
CERTIFIED MAIL	31.	0.		0.
TO FORM 990-PF, PG 1, LN 23	365.	0.		195.

FORM 990-PF CORPORATE STOCK	ζ	STATEMENT 9
DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE
CORPORATE STOCK	2,693,755.	3,427,809.
TOTAL TO FORM 990-PF, PART II, LINE 10B	2,693,755.	3,427,809.

FORM 990-PF CORPORATE BOND	S	STATEMENT :	
DESCRIPTION	BOOK VALUE	FAIR MARKE VALUE	т
CORPORATE BONDS	874,236.	913,1	14.
TOTAL TO FORM 990-PF, PART II, LINE 10C	874,236.	913,1	14.

	END OF YEAR	FAIR MARKET
	BOOK VALUE	VALUE
INVESTMENTS - CORPORATE STOCK		
2,000 SHS AEGON NV 6.375%	50,000.00	51,000.00
2,000 SHS BARCLAYS BANK PLC 8.125% 2,000 SHS HSBC HOLDINGS PLC 8 125%	50,000.00 50,000.00	52,160 00 52,960 00
2,000 3H3 H3BC H0CDINGS FLC 8 125%  2,000 LEHMAN BROS HLDG CP TR III 6.375%	50,000.00	270.00
3.538 SHS LEHMAN BROS HLDGS INC 7 95%	88,450 00	0.00
2,000 SHS LEHMAN BROS HLDGS 6 24% 1/18/54	50,000 00	260 40
1,100 SHS ABBVIE INC COM 1,000 SHS AMER INTL GP INC NEW	11,577 85	71,984 00 56,010.00
400 SHS ANHEUSER BUSCH INBEV SA SPON	36,594.00 35,062.50	44,928.00
1,400 SHS AT&T INC	54,189.84	47,026.00
800 SHS BECTON DICKINSON & CO	23,463.39	111,328.00
700 SHS BOEING CO	73,511.68	90,986 00
500 SHS CBS CORP NEW CL B SHRS 1,000 SHS CLOROX CO DE	30,640 05 55,783.10	27,670 00 104,210.00
1,000 SHS CONOCOPHILLIPS	52,946.40	69,060 00
1,000 SHS DEERE & CO	27,627 65	88,470.00
500 SHS DELPHI AUTOMOTIVE PLC	35,180 10	36,360 00
1,200 SHS EMERSON ELECTRIC CO	26,409 00 80,414 19	74,076 00
12,515 22 SHS EV INCOME FUND OF BOSTON C 750 SHS FEDEX CORP	20,517 09	73,464.34 86,830 00
5,328 964 SHS FRANKLIN MUTUAL EUROPEAN C	120,427 08	108,551 00
1,000 SHS FREEPORT MCMORAN CP & GLD	28,523 70	23,360 00
1,500 SHS GENERAL ELECTRIC CO	38,508.65	37,905 00
1,200 SHS JP MORGAN CHASE & CO	47,695 87	75,096 00
400 SHS JOHNSON & JOHNSON 600 SHS KELLOGG CO	28,153 70 36,372 50	41,828 00 39,264 00
600 SHS MARKET VECTORS GOLD MINERS	14,935.21	11,028 00
700 SHS MERCK & CO INC NEW	21,503 06	39,753 00
1,000 SHS METLIFE INC	34,764.30	54,090.00
500 SHS MONSANTO CO	60,019 50 53,136.99	59,735 00
1,591 SHS PFIZER INC 1,000 SHS PHILLIPS 66 COM	53,047 83	49,559 65 71,700 00
1,000 SHS PLUM CREEK TIMBER CO INC REI	33,269 45	42,790.00
500 SH5 PPG INDUSTRIES INC	30,046 10	115,575.00
1,100 SHS PROCTER & GAMBLE	42,651 14	100,188 00
300 SHS PRUDENTIAL FINANCIAL INC 700 SHS SCHLUMBERGER LTD	27,497.56 64,225 95	27,138.00 59,787 00
300 SHS SIEMENS AKTIENGELLSCHAFT	29,993 10	33,600 00
1,000 SHS TWENTY-FIRST CENTURY FOX CL A	32,563 40	38,405 00
5,049 SHS UNIT FIRST TRUST SMID DIVIDEND 12	51,575 29	50,979 75
5,053 SHS UNIT FIRST TRUST REIT GROWTH & INCOME	51,033 81	52,232 86
900 SHS UNITED PARCEL SERVICE INC CL-B 500 SHS WALMART STORES INC	88,042 63 25,242 89	100,053 00 42,940 00
1,000 SHS WALGREENS CO	8,250 00	76,200 00
45 SHS AMAZON COM	14,051.48	13,965 75
250 SHS APPLE INC	24,381 15	27,595 00
100 SHS BERKSHIRE HATHAWAY INC DEL NEW CL B	13,574 51 12,378 70	15,015 00
40 SHS BLACKROCK INC CL A 75 SHS CHEVRON CORP	8,873.38	14,302.40 8,413.50
150 SHS COMCAST CORP NEW CL A	7,792.25	8,701 50
75 SHS COSTCO WHSL CORP NEW	9,545.02	10,631.25
100 SHS CVS HEALTH CORP	7,895.00	9,631.00
150 SHS DISNEY WALT CO 150 SHS DOW CHEM CO	12,654 25	14,128 50
75 SHS ECOLAB INC	7,075 25 8,122 88	6,841 50 7,839 00
500 SHS EMC CORP	13,798 00	14,870 00
175 SHS EOG RES INC	16,549 63	16,112 25
150 SHS GILEAD SCIENCES INC	14,029 75	14,139 00
30 SHS GOOGLE INC CL C 75 SHS HONEYWELL INTL INC	16,307 30	15,792 00
175 SHS JPMORGAN CHASE & CO	6,692 13 10,063 38	7,494.00 10,951 50
150 SHS JOHNSON & JOHNSON	15,052 50	15,685 50
325 SHS KINDER MORGAN INC DEL	12,868 38	13,750 75
100 SHS MCKESSON CORP	18,883.76	20,758 00
100 SHS MEDTRONIC INC 150 SHS METLIFE INC	7,352.50	7,220 00
225 SHS ORACLE CORP	7,746.25 8,851.63	8,113 50 10,118.25
75 SHS PEPSICO INC	6,925 26	7,092 00
100 SHS PRICE T ROWE GROUP INC	8,415.50	8,586 00
175 SHS QUALCOMM INC	13,041 38	13,007.75

100 SHS ROCKWELL AUTOMATION INC	11,408 00	11,120 00
150 SHS SALESFORCE COM INC	8,220 75	8,896 50
150 SHS SCHLUMBERGER LTD NETHERLAND ANTILLES	14,609.25	12,811.50
175 SHS STARBUCKS CORP	13,230.13	14,358.75
75 SHS THERMO FISHER SCIENTIFIC CORP	8,614.13	9,396 75
75 SHS TJX COS INC	4,288 63	5,143 50
100 SHS UNION PACIFIC CORP	10,003 00	11,913.00
75 SHS UNITED TECHNOLOGIES CORP	7,981 63	8,625 00
225 SHS US BANCORP DEL COM NEW	9,336 38	10,113.75
100 SH5H VERIZON COMMUNICATIONS INC	4,865 26	4,678 00
300 SHS WELLS FARGO & CO NEW	15,144 00	16,446.00
225 SHS WHOLE FOODS MKT INC	8,484 88	11,344 50
775 SHS 3M CO	33,779 84	127,348.00
100 SHS AMERICAN WTR WKS CO INC	4,981.26	5,330 00
1,860.571 SHS PRINCIPAL MIDCAP BLEND FUND	40,000 00	42,300 20
60 SHS CALIFORNIA RESOURCES CORP	486 69	330 60
2,788.075 SHS COLUMBIA SMALL CAP INDEX FUND CL Z	62,500 00	64,656 21
1,366 924 SHS ARTISAN INTL FUND	40,000 00	40,953.04
327 118 SHS MFS INTL NEW DISCOVERY FUND CL I	10,000 00	9,142.95
175 SHS WISDOMTREE JAPAN HEDGED EQUITY FUND	8,367 63	8,615.25
100 SHS ALIBABA GROUP HLDG LTD ADS	10,419 00	10,394.00
1,473 742 SHS DELAWARE EMERGING MKTS FD CL	25,000 00	23,356.85
450 SHS EGSHARES EMERGING MARKETS CONSUMER	11,951 00	11,403.00
175 SHS WISDOMTREE EMERGING MKTS SMALLCAP	8,569.63	7,553 00
1,824.713 SHS PIMCO ALL ASSET FUND INSTL CL	23,000 00	21,166.67
625 SHS VANGUARD REIT	46,746.51	50,625 00
2,226 754 SHS PIMCO COMMODITIES PLUS STRATEGY	25,000.00	<u>17,101.47</u>
	2,693,755 37	3,376,689 39

INVESTMENTS - CORPORATE BONDS		
\$50,000 FORD MOTOR CREDIT CO 3% 10/20/19	50,000 00	49,698 00
\$100,000 GENERAL ELEC CAP CORP 5% 7/15/15	100,000 00	101,899 00
\$100,000 GENERAL ELEC CAP CORP 4% 2/15/23	100,000 00	102,690 00
\$100,000 GOLDMAN SACHS GROUP INC 5 75% 10/1/16	94,911 00	107,304 00
\$100,000 GOLDMAN SACHS GROUP INC 3% 8/15/17	100,000 00	102,795.00
\$50,000 VERIZON COMM 5 5% 2/15/18	49,325.00	55,493 00
\$100,000 BANK OF AMERICA CORP 4.75% 8/15/20	100,000.00	107,705.00
\$40,000 DOW CHEMICAL CO 3% 6/15/21	40,000 00	38,901 20
\$40,000 DOW CHEMICAL 3.6% 6/15/24	40,000 00	40,080 80
\$50,000 MORGAN STANLEY 4.25% 10/4/24	50,000 00	51,389 00
\$50,000 GENERAL ELEC CAP CORP 5 2% 2/15/29	50,000.00	54,038 50
\$50,000 JPMORGAN CHASE & CO 6.3% 9/1/19	50,000.00	51,120 00
\$50,000 BANK OF AMERICA CORP 6 35% 12/15/37	50,000 00	50,000 00
	874,236 00	913,113 50

### Form **8868**

(Sev January 2014)

Department of the Treasury Internal Revenue Service

# Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

▶ Information about Form 8868 and its instructions is at www.lrs.gov/form8868 .

OMB No. 1545-1709

Application Is For   Code	<ul><li>If you a</li></ul>	re filing for an Automatic 3-Month Extension, comple	te only Pa	irt I and check this box			$\triangleright \ \lfloor X \rfloor$
Electronic filing (a-file). You can electronically file Form 8888 if you need a 3-month automatic extension of time to hig 6 months for a corporation of time to file any of the form 9901, or and additional (not automatic) 3 months extension of time to file any of the forms ested in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions), For more details on the electronic filing of this form, well wive use you will not be compared to file form -in-file for Centres 8 Nempor/Sts.  Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed).  A corporations (including 1120-C filers), partnerships, FEMICs, and trusts must use Form 7004 to request an axtension of time to file incomer tax returns.  Type or Jan 1990 and trusts from the stension of time. Only submit original (no copies needed).  Name of exempt organization or other filer, see instructions.  Type or Jan 200 and trusts must use Form 7004 to request an axtension of time to file incomer tax returns.  Type or Jan 200 and trusts from 1990 and 19	If you a	re filing for an Additional (Not Automatic) 3-Month Ex	tension, c	complete only Part II (on page 2 of	this form).		
required to file Form 1907.], or an additional (not automatic) 3-month extension of time You can electronically file Form 1988b to require an extension of time to file any of the forms listed in Part In or Part I with the exception of Form 1970, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, used wave in goverhile and click on e-file for Chantes 2 Nonprofits.  Part I and Variomatic 3-Month Extension of Time. Only submit original (no copies needed).  A corporation required to file Form 9907 and requesting an automatic 6-month extension - check this box and complete Part I only All other corporations (including 1120-C filers), partinerships, REMICs, and trusts must use Form 1004 to request an extension of time for the incomen server externs.  Type or lone income tax returns  Type or lone in the form 1120-C filers), partinerships, REMICs, and trusts must use Form 1004 to request an extension of time for the incomen server externs.  Type or lone income tax returns  Type or lone in the form 1120-C filers), partinerships, REMICs, and trusts must use Form 1004 to request an extension of time of the incomen server forms.  Type or lone in the form 1120-C filers), partinerships, REMICs, and trusts must use Form 1004 to request an extension of time of the incomen server forms.  Type or lone in the filer server forms 100-LENG forms 100-	Do not co	mplete Part II unless you have already been granted a	an automa	itic 3-month extension on a previous	sly filed For	m 8868	
If time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit wavyuris, govietile and click on e-file for Chaeftes & Nonprotis.  Part I   Automatic 3-Month Extension of Time. Only submit original (no copies needed).  A corporation required to file Form 990° and requesting an automatic 6-month extension - check this box and complete.  Part I only  All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.  British by the contract of the form 990° and requesting an automatic 6-month extension of time to file income tax returns.  Scriet filler's identifying number.  Type or   Name of exempt organization or other filer, see instructions.  J. TRYING & JANE L. ENGLAND CHARTTABLE  TRUST JA. MOLLOY & F. RUSSELL, CO-TRUSTEES  Womber, street, and coom or suite no if a P O box, see instructions.  Womber, street, and coom or suite no if a P O box, see instructions.  WORCESTER, MA 01608  Enter the Return code for the return that this application is for (file a separate application for each return)  O 4  Application  Return   Application   Return   Application   Return   Application   Return   Application   Return   Application   Return   Application   Return   Application   Return   Application   Return   Application   Return   Application   Return   Application   Return   Application   Return   Application   Return   Application   Return   Application   Return   Application   Return   Application   Return   Application   Return   Application   Return   Application   Return   Application   Return   Application   Return   Application   Return   Application   Return   Application   Return   Application   Return   Application   Return   Application   Return   Application   Return   App	Electroni	c filing (e-file) . You can electronically file Form 8868 if y	ou need a	a 3-month automatic extension of tir	ne to file (6	months for	a corporation
If time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit wavyuris, govietile and click on e-file for Chaeftes & Nonprotis.  Part I   Automatic 3-Month Extension of Time. Only submit original (no copies needed).  A corporation required to file Form 990° and requesting an automatic 6-month extension - check this box and complete.  Part I only  All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.  British by the contract of the form 990° and requesting an automatic 6-month extension of time to file income tax returns.  Scriet filler's identifying number.  Type or   Name of exempt organization or other filer, see instructions.  J. TRYING & JANE L. ENGLAND CHARTTABLE  TRUST JA. MOLLOY & F. RUSSELL, CO-TRUSTEES  Womber, street, and coom or suite no if a P O box, see instructions.  Womber, street, and coom or suite no if a P O box, see instructions.  WORCESTER, MA 01608  Enter the Return code for the return that this application is for (file a separate application for each return)  O 4  Application  Return   Application   Return   Application   Return   Application   Return   Application   Return   Application   Return   Application   Return   Application   Return   Application   Return   Application   Return   Application   Return   Application   Return   Application   Return   Application   Return   Application   Return   Application   Return   Application   Return   Application   Return   Application   Return   Application   Return   Application   Return   Application   Return   Application   Return   Application   Return   Application   Return   Application   Return   Application   Return   Application   Return   Application   Return   Application   Return   App	required t	o file Form 990-T), or an additional (not automatic) 3-mo	nth extens	sion of time. You can electronically f	ile Form 88	68 to reque	st an extension
Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, withst wawning overlife and click on e-file for Charles & Nonprofits.  Part I   Automatic 3-Month Extension of Time. Only submit original (no copies needed).  A corporation required to file Form 950-T and requesting an automatic 6-month extension - check this box and complete Part I only All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file morone tax returns  Part I only All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time of the morone tax returns  Prior of Interview of the morone tax returns  Prior of Interview of Intervie							
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Part I noty	Part !	Automatic 3-Month Extension of Time	Only s	submit original (no copies ne	eded).		
All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time for filer income tax returns  Type or for filer income tax returns  Type or print  Type or print  TRUST, A. MOLIOY & F. RUSSELL, CO-TRUSTES  O4-6836265  Number, street, and room or suite no if a PO box, see instructions  Social security number (SSN)  370 MAIN ST, NO. 800  City, town or post office, state, and 2P code. For a foreign address, see instructions.  WORCESTER, MA 01608  Enter the Return code for the return that this application is for (file a separate application for each return)  O1 4  Application  Return   Application   Return   Is For   Code   Is For   Code   Is For   Code   Is For   Code   Is Form 990 or Form 990-EZ   0.1   Form 990 or Form 990-EZ   0.1   Form 990 or Form 990-EZ   0.1   Form 990-F   0.4   Form 990-F   0.4   Form 990-F   0.4   Form 990-T (corporation)   0.9   Form 990-T (trust other than above)   0.5   Form 890-T (trust other than above)   0.5   Form 890-T (trust other than above)   0.5   The books are in the care of   370 MAIN STREET, SUITE 8.00   WORCESTER, MA 01608  Telephone No.   508-756-2423   Telephone No.   508-756-2423   Telephone No.   508-756-2423   Telephone No.   508-756-2423   Telephone No.   508-756-90-766-90-766   The street of the group, check this box   1   The street of the group check this box   3   The street of the group check this box   3   The street of the group check this box   3   The street of the group check this box   3   The street of the group check this box   3   The street of the group check this box   3   The street of the group check this box   3   The street of the group check this box   3   The street of the group check this box   3   The street of the group check this box   3   The street of the group check this box   3   The street of the group check this box   3   The street of the group check this box   3   The street of the group check this box   3   The street of the group check this box   3   The street of	A corpora	tion required to file Form 990-T and requesting an autor	natic 6-mc	onth extension - check this box and	complete		
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to file income tex returns    Name of exempt organization or other filer, see instructions.	All other o	corporations (including 1120-C filers), partnerships, REM	IICs, and t	rusts must use Form 7004 to reques	st an extens	sion of time	
Name of exempt organization or other filer, see instructions   J. IRVING & JANE L. ENGLAND CHARITABLE   TRUST, A. MOLLOY & F. RUSSELL, CO-TRUSTES   04-6836265				•	_		na number
J. IRVING & JANE L. ENGLAND CHARTMABLE TRUST_A. MOLLOY & F. RUSSELL, CO-TRUSTEES  370 MAIN ST. NO. 800  Ott, town or post office, state, and zip code. For a foreign address, see instructions.  WORCESTER, MA 01608  Enter the Return code for the return that this application is for (file a separate application for each return)  Application Form 990 or Form 990 exp.  Form 990 or Form 990 exp.  Form 990 or Form 990 exp.  Ott, town or post office, state, and zip code. For a foreign address, see instructions.  WORCESTER, MA 01608  Enter the Return code for the return that this application is for (file a separate application for each return)  O	Type or	Name of exempt organization or other filer, see instru	ctions.				
TRUST, A. MOLLOY & F. RUSSELL, CO-TRUSTEES  Number, street, and room or suite no. if a P O box, see instructions 370 MAIN ST, NO. 800  City, town or post office, state, and ZIP code. For a foreign address, see instructions.  WORCESTER, MA 01608  Enter the Return code for the return that this application is for (file a separate application for each return)  O 4  Application  Return  Code  Enter work of the return that this application is for (file a separate application for each return)  O 4  Application  Return  Code  Enter work of the return that this application is for (file a separate application for each return)  O 6  Application  Return  Code  Enter work of the return that this application is for (file a separate application for each return)  O 7  Form 990-EZ  O 10 Form 990-T (corporation)  O 7  Form 990-BD  O 8  Form 4720 (individual)  O 9  Form 990-FD  O 4 Form 592-T  O 5 Form 6069  O 7  ANN K MOLLOY & FRANCIS J RUSSELL,  Telephone No. ▶ 508 - 756 - 2423  Fax No. ▶  If the organization does not have an office or place of business in the United States, check this box  If this is for a Group Return, enter the organization's four digit Group Exemption Number (SEN)  If it is for part of the group, check this box  If it is for part of the group, check this box  If it is for part of the group, check this box  If it is for part of the group, check this box  If it is for part of the group, check this box  If it is for part of the group, check this box  If the paraization return for the organization named above. The extension is for.  If equiest an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until  AUGUST 17, 2015  It is for fore forms 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonretundable credits See instructions  O 1 Integral the part of the group, check this box  If the axyear entered in line 1 is for less than 12 months, check reason  If this application is for forms 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonretu		I		RITABLE			
Number, street, and room or suite no. If a P O box, see instructions.  370 MAIN ST, NO. 800  City, town or post office, state, and ZIP code. For a foreign address, see instructions.  City, town or post office, state, and ZIP code. For a foreign address, see instructions.  City, town or post office, state, and ZIP code. For a foreign address, see instructions.  City, town or post office, state, and ZIP code. For a foreign address, see instructions.  City, town or post office, state, and ZIP code. For a foreign address, see instructions.  City, town or post office, state, and ZIP code. For a foreign address, see instructions.  City, town or post office, state, and ZIP code. For a foreign address, see instructions.  City, town or post office, state, and ZIP code. For a foreign address, see instructions.  City, town or post office, state, and ZIP code. For a foreign address, see instructions.  City, town or post office, state, and ZIP code. For a foreign address, see instructions.  City, town or post office, state, and ZIP code. For a foreign address, see instructions.  City, town or post office, state, and ZIP code. For a foreign address, see instructions.  City, town or post office, state, and ZIP code. For a foreign address, see instructions.  City, town or post office, state, and ZIP code. For a foreign address, see instructions.  Code  Code  Code  Is For Code  Is For Code  Form 990.T (corporation)  Comm 990.T (corporation)  Comm 990.T (corporation)  Code Town 99	-					04-68	36265
370 MAIN ST, NO. 800		1 · · · · · · · · · · · · · · · · · · ·			Social sec		
City, town or post office, state, and ZIP code. For a foreign address, see instructions.  WORCESTER, MA 01608  Enter the Return code for the return that this application is for (file a separate application for each return)  Peturn Code Is For Code Is Form 990 or Form 990 EZ  Form 990 or Form 990 EZ  Form 990 or Form 990 EZ  Form 990 EZ  Form 1041-A  O8  Form 4720 (individual)  O9  Form 990 PF  O4  Form 5227  10  Form 990 T (see: 401(a) or 408(a) trust)  Form 990 T (see: 401(a) or 408(a) trust)  Form 990 T (trust other than above)  ANN K. MOLLOY & FRANCIS J. RUSSELL,  The books are in the care of ► 370 MAIN STREET, SUITE 800 - WORCESTER, MA 01608  Telephone No. ► 508 − 756 − 2423  Fax No. ►  If the organization does not have an office or place of business in the United States, check this box  If this so for a Group Return, enter the organization's four digit Group Exemption Number (GEN)  If the organization does not have an office or place of business in the United States, check this box  If the organization does not have an office or place of business in the United States, check this box  If the organization form of the group, check this box  If the organization should (6 months for a corporation required to file Form 990-T) extension of time until  AUGUST 17, 2015  It request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until  AUGUST 17, 2015  It follows the exemption of the group, check this box  If this application is freturn for:  The organization's return for:  The organization's retu	filing your	1				,,	J. (J. 1)
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Form 990-BL  Form 7720 (Individual)  O3 Form 4720 (Individual)  O3 Form 7720 (Individual)  O3 Form 7720 (Individual)  O3 Form 7720 (Individual)  O3 Form 7720 (Individual)  O5 Form 6069  111  Form 990-T (trust other than above)  O6 Form 8870  ANN K. MOLLOY & FRANCIS J. RUSSELL,  The books are in the care of ▶ 370 MAIN STREET, SUITE 800 - WORCESTER, MA 01608  Telephone No. ▶ 508-756-2423  Fax No. ▶  If the organization does not have an office or place of business in the United States, check this box  If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN)  If it is for part of the group, check this box  If it is for part of the group, check this box  If it is for part of the group, check this box  If it is for part of the group, check this box  If it is for part of the group, check this box  If it is for part of the group, check this box  If it is for part of the group, check this box  If it is for part of the group, check this box  If it is for part of the group, check this box  If it is for part of the group, check this box  If it is for part of the group, check this box  If it is for part of the group, check this box  If it is for part of the group, check this box  If it is for part of the group, check this box  If it is for part of the group, check this box  If it is for part of the group, check this box  If it is for part of the group, check this box  If it is for part of the group, check this box  If the area of a limit is for the whole group, check this box  If the same and ElNs of all members the extension is for.  If the carea of a limit is for limit is fo	Form 990	or Form 990-EZ	01	Form 990-T (corporation)		-	
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Form 990-PF Form 990-T (sec 401(a) or 408(a) trust) Form 990-T (trust other than above)  ANN K. MOLLOY & FRANCIS J. RUSSELL,  Telephone No. ▶ 370 MAIN STREET, SUITE 8 00 - WORCESTER, MA 01608  Telephone No. ▶ 508-756-2423 Fax No. ▶  If the organization does not have an office or place of business in the United States, check this box  If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN)  I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until  AUGUST 17, 2015 Is for the organization's return for:  X calendar year 2014 or  X calendar year 2014 or  The tax year entered in line 1 is for less than 12 months, check reason:  Change in accounting period  The tax year entered in line 1 is for less than 12 months, check reason:  I fit is application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions  The set mature of the set in the tentative tax is a set in the tentative tax is a set in the certain the certain the care of the properties of the set in the certain the care of the properties of the certain the care of the properties of the whole group, check this box  If this is for part of the group, check this box  If the set of all members the extension is for the whole group, check this box  If the extension of time until  AUGUST 17, 2015  I for the organization return for the organization named above. The extension is for the organization for the organization return for the organization named above. The extension is for the organization for the organization return for the organization named above. The extension is for the organization for	Form 472	0 (individual)	03				
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ANN K. MOLLOY & FRANCIS J. RUSSELL,  The books are in the care of ▶ 370 MAIN STREET, SUITE 800 - WORCESTER, MA 01608  Telephone No.▶ 508-756-2423 Fax No.▶  If the organization does not have an office or place of business in the United States, check this box  If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for the whole group, check this box  If this is for part of the group, check this box ■ and attach a list with the names and EINs of all members the extension is for.  1 request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until  AUGUST 17, 2015 , to file the exempt organization return for the organization named above. The extension is for the organization's return for:  ■ X calendar year 2014 or  ■ Lax year entered in line 1 is for less than 12 months, check reason Initial return Final return  Change in accounting period  3a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions 3a \$ 1,051  b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit. 3b \$ 1,449  c Balance due. Subtract line 3b from line 3a include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System) See instructions. 3c \$ 0	Form 990	-T (trust other than above)	06	Form 8870			
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1 request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until  AUGUST 17, 2015  Is for the organization's return for:  X calendar year 2014  If the tax year entered in line 1 is for less than 12 months, check reason  Change in accounting period  If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits See instructions  If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.  Balance due. Subtract line 3b from line 3a Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System) See instructions.  3c \$ 0	<ul><li>If this</li></ul>	s for a Group Return, enter the organization's four digit	Group Exe	emption Number (GEN)	If this is for	the whole	group, check this
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If the tax year entered in line 1 is for less than 12 months, check reason:  Change in accounting period  If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions  If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.  Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.  3a. \$ 1,051	1   l re	quest an automatic 3-month (6 months for a corporation	required	to file Form 990-T) extension of time	until		-
▶ X calendar year 2014 or , and ending   1 If the tax year entered in line 1 is for less than 12 months, check reason: Initial return   Change in accounting period   3a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions 3a \$ 1,051   b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit. 3b \$ 1,449   c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions. 3c \$ 0		AUGUST 17, 2015 , to file the exemp	t organiza	tion return for the organization nam	ed above.	The extensi	on
tax year beginning, and ending  If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Change in accounting period  If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions							
2 If the tax year entered in line 1 is for less than 12 months, check reason: Initial return  Change in accounting period  3a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions  b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.  c Balance due. Subtract line 3b from line 3a Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.  3c \$ 0.	<b>▶</b>						
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nonrefundable credits See instructions  If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.  Balance due. Subtract line 3b from line 3a Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System) See instructions.  3a \$ 1,051		Change in accounting period					
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	c Ba	ance due. Subtract line 3b from line 3a Include your pa	ayment wit	h this form, if required,			
Caution. If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment							0.
	Caution.	If you are going to make an electronic funds withdrawal	(dırect de	bit) with this Form 8868, see Form 8	8453-EO ar	d Form 887	9-EO for payment