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Form **990-EZ**Department of the Treasury
Internal Revenue Service**Short Form****Return of Organization Exempt From Income Tax**

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

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

▶ Information about Form 990-EZ and its instructions is at www.irs.gov/form990.

OMB No 1545-1150

2014**Open to Public Inspection****A** For the 2014 calendar year, or tax year beginning

, 2014, and ending

, 20

B Check if applicable:

- ☐ Address change
☐ Name change
☐ Initial return
☐ Final return/terminated
☐ Amended return
☐ Application pending

C Name of organization**EVERGREEN WOODS EMPLOYEES SCHOLARSHIP FUND**

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

88 NOTCH HILL RD.

Room/suite

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

NORTH BRANFORD, CT 06471**D** Employer identification number**06162-7929****E** Telephone number**203-488-5616****F** Group ExemptionNumber ▶ **N/A****G** Accounting Method: ☐ Cash ☐ Accrual Other (specify) ▶**I** Website: ▶**J** Tax-exempt status (check only one) – ☒ 501(c)(3) ☐ 501(c) () ◀ (insert no) ☐ 4947(a)(1) or ☐ 527**H** Check ☐ if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF).**K** Form of organization: ☐ Corporation ☐ Trust ☐ Association ☒ Other **SCHOLARSHIP FUND****L** Add lines 5b, 6c, and 7b to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets

(Part II, column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ.

▶ \$

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Part I)Check if the organization used Schedule O to respond to any question in this Part I ☒

Revenue	1	Contributions, gifts, grants, and similar amounts received	1	226,204.00
	2	Program service revenue including government fees and contracts	2	
	3	Membership dues and assessments	3	
	4	Investment income	4	14,129.24
	5a	Gross amount from sale of assets other than inventory	5a	
	b	Less: cost or other basis and sales expenses	5b	
	c	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	5c	
	6	Gaming and fundraising events		
	a	Gross income from gaming (attach Schedule G if greater than \$15,000)	6a	
b	Gross income from fundraising events (not including \$ of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000)	6b		
c	Less: direct expenses from gaming and fundraising events	6c		
d	Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)	6d		
7a	Gross sales of inventory, less returns and allowances	7a		
b	Less: cost of goods sold	7b		
c	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c		
8	Other revenue (describe in Schedule O)	8	1,504.64	
9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8	9	241,838.03	
Expenses	10	Grants and similar amounts paid (list in Schedule O)	10	88,580.00
	11	Benefits paid to or for members	11	
	12	Salaries, other compensation, and employee benefits	12	
	13	Professional fees and other payments to independent contractors	13	
	14	Occupancy, rent, utilities, and maintenance	14	
	15	Printing, publications, postage, and shipping	15	
	16	Other expenses (describe in Schedule O)	16	1,111.79
	17	Total expenses. Add lines 10 through 16	17	89,691.79
Net Assets	18	Excess or (deficit) for the year (Subtract line 17 from line 9)	18	152,146.24
	19	Net assets or fund balances at beginning of year (from line 27 (column (A))) (must agree with end-of-year figure reported on prior year's return)	19	164,796.07
	20	Other changes in net assets or fund balances (explain in Schedule O)	20	
	21	Net assets or fund balances at end of year. Combine lines 18 through 20	21	308,301.74

For Paperwork Reduction Act Notice, see the separate instructions.

Cat No 106421

Form **990-EZ** (2014)

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Part V Other Information (Note the Schedule A and personal benefit contract statement requirements in the instructions for Part V) Check if the organization used Schedule O to respond to any question in this Part V ☐

	Yes	No
33 Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O	33	<input checked="" type="checkbox"/>
34 Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O (see instructions)	34	<input checked="" type="checkbox"/>
35a Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)?	35a	<input checked="" type="checkbox"/>
b If "Yes," to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O	35b	<input checked="" type="checkbox"/>
c Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III	35c	<input checked="" type="checkbox"/>
36 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N	36	<input checked="" type="checkbox"/>
37a Enter amount of political expenditures, direct or indirect, as described in the instructions ► 37a	37b	<input checked="" type="checkbox"/>
b Did the organization file Form 1120-POL for this year?	37b	<input checked="" type="checkbox"/>
38a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?	38a	<input checked="" type="checkbox"/>
b If "Yes," complete Schedule L, Part II and enter the total amount involved	38b	
39 Section 501(c)(7) organizations. Enter:	39a	
a Initiation fees and capital contributions included on line 9	39b	
b Gross receipts, included on line 9, for public use of club facilities		
40a Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ► ; section 4912 ► ; section 4955 ►		
b Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	40b	<input checked="" type="checkbox"/>
c Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 ►		
d Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 40c reimbursed by the organization ►		
e All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T	40e	<input checked="" type="checkbox"/>
41 List the states with which a copy of this return is filed ►		
42a The organization's books are in care of ► Telephone no. ► Located at ► ZIP + 4 ►		
b At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country: ► See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).	42b	<input type="checkbox"/>
c At any time during the calendar year, did the organization maintain an office outside the U.S.? If "Yes," enter the name of the foreign country: ►	42c	<input type="checkbox"/>
43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 —Check here and enter the amount of tax-exempt interest received or accrued during the tax year ► 43		<input type="checkbox"/>
44a Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44a	<input checked="" type="checkbox"/>
b Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44b	<input checked="" type="checkbox"/>
c Did the organization receive any payments for indoor tanning services during the year?	44c	<input checked="" type="checkbox"/>
d If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	44d	
45a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	45a	<input checked="" type="checkbox"/>
b Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of Form 990-EZ (see instructions)	45b	<input checked="" type="checkbox"/>

	Yes	No
46 Did the organization engage, directly or indirectly, in political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	46	

Part VI Section 501(c)(3) organizations only

All section 501(c)(3) organizations must answer questions 47–49b and 52, and complete the tables for lines 50 and 51.

Check if the organization used Schedule O to respond to any question in this Part VI ☐

	Yes	No
47 Did the organization engage in lobbying activities or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	47	
48 Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	48	
49a Did the organization make any transfers to an exempt non-charitable related organization?	49a	
b If "Yes," was the related organization a section 527 organization?	49b	

50 Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and title of each employee	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation
NONE				

f Total number of other employees paid over \$100,000 ▶

51 Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and business address of each independent contractor	(b) Type of service	(c) Compensation
NONE		

d Total number of other independent contractors each receiving over \$100,000 ▶

52 Did the organization complete Schedule A? **Note.** All section 501(c)(3) organizations must attach a completed Schedule A ☒ Yes ☐ No

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 officer) is based on all information of which preparer has any knowledge.

Sign Here	Signature of officer <i>John P. Durfee</i>	Date <i>4/1/2015</i>
	Type or print name and title <i>JOHN P. DURFEE</i>	

Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
	Firm's name ▶	Firm's EIN ▶			
	Firm's address ▶	Phone no			

May the IRS discuss this return with the preparer shown above? See instructions ☐ Yes ☐ No

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

▶ Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2014

**Open to Public
Inspection**

Name of the organization

EVERGREEN WOODS EMPLOYEE SCHOLARSHIP FUND

Employer identification number

06162-7929

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.)

- 1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2 ☐ A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E.)
- 3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state: _____
- 5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
- 6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7 ☐ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8 ☐ A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9 ☒ An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete Part III.)
- 10 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 11 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**. See **section 509(a)(3)**. Check the box in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g.
- a ☐ **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
- b ☐ **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
- c ☐ **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
- d ☐ **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
- e ☐ Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
- f Enter the number of supported organizations
- g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–9 above or IRC section (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
(A)						
(B)						
(C)						
(D)						
(E)						
Total						

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public support. Subtract line 5 from line 4.						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11 Total support. Add lines 7 through 10						
12 Gross receipts from related activities, etc. (see instructions)					12	
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ► <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

14 Public support percentage for 2014 (line 6, column (f) divided by line 11, column (f))	14	%
15 Public support percentage from 2013 Schedule A, Part II, line 14	15	%
16a 33¹/₃% support test—2014. If the organization did not check the box on line 13, and line 14 is 33 ¹ / ₃ % or more, check this box and stop here. The organization qualifies as a publicly supported organization ► <input type="checkbox"/>		
b 33¹/₃% support test—2013. If the organization did not check a box on line 13 or 16a, and line 15 is 33 ¹ / ₃ % or more, check this box and stop here. The organization qualifies as a publicly supported organization ► <input type="checkbox"/>		
17a 10%-facts-and-circumstances test—2014. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ► <input type="checkbox"/>		
b 10%-facts-and-circumstances test—2013. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ► <input type="checkbox"/>		
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ► <input type="checkbox"/>		

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II.

If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	28,867	44,164	52,139	40,057	226,224	391,451
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5	28,867	44,164	52,139	40,057	226,224	391,451
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6.)						391,451

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
9 Amounts from line 6	28,867	44,164	52,139	40,057	226,224	391,451
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	3,755	5,552	4,559	3,795	4,439	22,100
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b	3,755	5,552	4,559	3,795	4,439	22,100
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)	32,622	49,721	56,698	43,852	230,663	413,551
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ► <input checked="" type="checkbox"/>						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2014 (line 8, column (f) divided by line 13, column (f))	15	94.7 %
16 Public support percentage from 2013 Schedule A, Part III, line 15	16	90 %

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2014 (line 10c, column (f) divided by line 13, column (f))	17	5.3 %
18 Investment income percentage from 2013 Schedule A, Part III, line 17	18	9.8 %

- 19a 33 1/3% support tests—2014.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ► ☐
- b 33 1/3% support tests—2013.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ► ☐
- 20 Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ► ☐

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on
Form 990 or 990-EZ or to provide any additional information.

▶ Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047

2014

**Open to Public
Inspection**

Name of the organization

EVERGREEN WOODS EMPLOYEE SCHOLARSHIP FUND

Employer identification number

06162-7929

SEE ATTACHED FOR STUDENTS THAT RECEIVED
SCHOLARSHIPS THAT TOTALLED \$88,580.00

PART I LINE 16 FIDUCIARY FEE \$111.79

PART I LINE 8 LONG TERM CAPITAL GAIN \$1,504.64

269-000 WITHDRAWAL

ADDIE SANDERS

5/27/2014	WITHDRAWAL MAY 2014 SCHOLARSHIP AWARD	4509	0.0000	(\$2,500.00)	\$0.00	\$0.00	\$0.00
				ADDIE SANDERS			
11/17/2014	WITHDRAWAL "NOVEMBER 2014 SCHOLARSHIP AWARD"	4883	0.0000	(\$2,000.00)	\$0.00	\$0.00	\$0.00
				ADDIE SANDERS			
	Totals for ADDIE SANDERS			(\$4,500.00)	\$0.00	\$0.00	\$0.00

ALICIA LAURIA

5/27/2014	WITHDRAWAL MAY 2014 SCHOLARSHIP AWARD	4501	0.0000	(\$2,500.00)	\$0.00	\$0.00	\$0.00
				ALICIA LAURIA			
	Totals for ALICIA LAURIA			(\$2,500.00)	\$0.00	\$0.00	\$0.00

DANIELLE DURAZZO

5/27/2014	WITHDRAWAL MAY 2014 SCHOLARSHIP AWARD	4498	0.0000	(\$2,500.00)	\$0.00	\$0.00	\$0.00
				DANIELLE DURAZZO			
11/17/2014	WITHDRAWAL NOVEMBER 2014 SCHOLARSHIP AWARD	4874	0.0000	(\$2,500.00)	\$0.00	\$0.00	\$0.00
				DANIELLE DURAZZO			
	Totals for DANIELLE DURAZZO			(\$5,000.00)	\$0.00	\$0.00	\$0.00

ERICA ALBRECHT

5/27/2014	WITHDRAWAL MAY 2014 SCHOLARSHIP AWARD	4493	0.0000	(\$2,500.00)	\$0.00	\$0.00	\$0.00
				ERICA ALBRECHT			

* All or part of value is unknown.

Tax Worksheet

Account: IM100510

EVERGREEN WOODS EMPLOYEE SCHOLARSHIP FUND INVESTMENT MANAGEMENT

Tax Year 2014

Tax ID: XX-XXX7929

Fees

Settle Date	Transaction Description	Cash Change Principal	Income	Investment Change Principal	Income
401-000	ADMINISTRATION FEE				
1/14/2014	ADMINISTRATION FEE DECEMBER 2013	(\$263.39)	\$0 00		
4/11/2014	ADMINISTRATION FEE MARCH 2014	(\$250.39)	\$0 00		
7/10/2014	ADMINISTRATION FEE JUNE 2014	(\$276.37)	\$0 00		
10/10/2014	ADMINISTRATION FEE SEPTEMBER 2014	(\$321.64)	\$0 00		
	Total for ADMINISTRATION FEE	(\$1,111.79)	\$0.00		
	Total for Fees	(\$1,111.79)	\$0.00		

Withdrawal

Settle Date	Transaction Description	Reg Code Check Number	Units Payee	Cash Change Principal	Income	Investment Change Principal	Income
269-000	WITHDRAWAL						
	ADDIE SANDERS						
5/27/2014	WITHDRAWAL MAY 2014 SCHOLARSHIP AWARD	4509	0 0000 ADDIE SANDERS	(\$2,500.00)	\$0 00	\$0.00	\$0.00
11/17/2014	WITHDRAWAL "NOVEMBER 2014 SCHOLARSHIP AWARD"	4883	0 0000 ADDIE SANDERS	(\$2,000.00)	\$0 00	\$0.00	\$0.00
	Totals for ADDIE SANDERS			(\$4,500.00)	\$0 00	\$0 00	\$0.00
	ALICIA LAURIA						
5/27/2014	WITHDRAWAL MAY 2014 SCHOLARSHIP AWARD	4501	0.0000 ALICIA LAURIA	(\$2,500.00)	\$0 00	\$0.00	\$0 00
	Totals for ALICIA LAURIA			(\$2,500.00)	\$0 00	\$0.00	\$0.00
	DANIELLE DURAZZO						
5/27/2014	WITHDRAWAL MAY 2014 SCHOLARSHIP AWARD	4498	0 0000 DANIELLE DURAZZO	(\$2,500.00)	\$0 00	\$0.00	\$0 00
11/17/2014	WITHDRAWAL NOVEMBER 2014 SCHOLARSHIP AWARD	4874	0.0000 DANIELLE DURAZZO	(\$2,500.00)	\$0 00	\$0 00	\$0.00
	Totals for DANIELLE DURAZZO			(\$5,000.00)	\$0 00	\$0.00	\$0.00
	ERICA ALBRECHT						
5/27/2014	WITHDRAWAL MAY 2014 SCHOLARSHIP AWARD	4493	0.0000 ERICA ALBRECHT	(\$2,500.00)	\$0 00	\$0.00	\$0.00

* All or part of value is unknown.

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Account: IM100510

EVERGREEN WOODS EMPLOYEE SCHOLARSHIP FUND INVESTMENT MANAGEMENT

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Withdrawal

Settle Date	Transaction Description	Reg Code Check Number	Units Payee	Cash Change Principal	Income	Investment Change Principal	Income
269-000	WITHDRAWAL						
11/17/2014	WITHDRAWAL NOVEMBER 2014 SCHOLARSHIP AWARD	4871	0.0000 ERICA ALBRECHT	(\$2,500.00)	\$0.00	\$0 00	\$0.00
	Totals for ERICA ALBRECHT			(\$5,000.00)	\$0 00	\$0.00	\$0.00
	ERICA MCLEAN						
5/27/2014	WITHDRAWAL MAY 2014 SCHOLARSHIP AWARD	4506	0.0000 ERICA MCLEAN	(\$2,500 00)	\$0.00	\$0 00	\$0 00
	Totals for ERICA MCLEAN			(\$2,500.00)	\$0 00	\$0.00	\$0.00
	ERICA STONE						
5/27/2014	WITHDRAWAL MAY 2014 SCHOLARSHIP AWARD	4511	0.0000 ERICA STONE	(\$2,500.00)	\$0 00	\$0.00	\$0.00
11/17/2014	WITHDRAWAL NOVEMBER 2014 SCHOLARSHIP AWARD	4885	0 0000 ERICA STONE	(\$2,500.00)	\$0 00	\$0.00	\$0.00
	Totals for ERICA STONE			(\$5,000.00)	\$0 00	\$0.00	\$0.00
	ERIN MCGOWAN						
5/27/2014	WITHDRAWAL MAY 2014 SCHOLARSHIP AWARD	4505	0.0000 ERIN MCGOWAN	(\$2,500 00)	\$0 00	\$0 00	\$0.00
11/17/2014	WITHDRAWAL NOVEMBER 2014 SCHOLARSHIP AWARD	4880	0 0000 ERIN MCGOWAN	(\$2,500.00)	\$0.00	\$0.00	\$0.00
	Totals for ERIN MCGOWAN			(\$5,000 00)	\$0 00	\$0.00	\$0.00
	HEATHER FALANGA						
5/27/2014	WITHDRAWAL MAY 2014 SCHOLARSHIP AWARD	4499	0.0000 HEATHER FALANGA	(\$2,500 00)	\$0.00	\$0.00	\$0.00
11/17/2014	WITHDRAWAL NOVEMBER 2014 SCHOLARSHIP AWARD	4875	0.0000 HEATHER FALANGA	(\$2,500.00)	\$0.00	\$0 00	\$0.00
	Totals for HEATHER FALANGA			(\$5,000.00)	\$0.00	\$0.00	\$0.00
	HOLLIE SABETTA						
11/17/2014	WITHDRAWAL NOVEMBER 2014 SCHOLARSHIP AWARD	4882	0.0000 HOLLIE SABETTA	(\$900 00)	\$0 00	\$0.00	\$0 00
	Totals for HOLLIE SABETTA			(\$900 00)	\$0 00	\$0.00	\$0.00
	JAVIER LOPEZ						
5/27/2014	WITHDRAWAL MAY 2014 SCHOLARSHIP AWARD	4502	0 0000 JAVIER LOPEZ	(\$2,500.00)	\$0 00	\$0.00	\$0.00
11/17/2014	WITHDRAWAL NOVEMBER 2014 SCHOLARSHIP AWARD	4877	0.0000 JAVIER LOPEZ	(\$2,500 00)	\$0 00	\$0 00	\$0 00
	Totals for JAVIER LOPEZ			(\$5,000 00)	\$0 00	\$0 00	\$0.00
	JENNY SABETTA						

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Settle Date	Transaction Description	Reg Code Check Number	Units Payee	Cash Change Principal	Income	Investment Change Principal	Income
269-000	WITHDRAWAL						
5/27/2014	WITHDRAWAL MAY 2014 SCHOLARSHIP AWARD	4508	0.0000 JENNY SABETTA	(\$1,500.00)	\$0 00	\$0.00	\$0.00
	Totals for JENNY SABETTA			(\$1,500.00)	\$0 00	\$0 00	\$0.00
	JOSE ZABALA						
11/17/2014	WITHDRAWAL NOVEMBER 2014 SCHOLARSHIP AWARD	4888	0.0000 JOSE ZABALA	(\$2,000.00)	\$0 00	\$0.00	\$0.00
	Totals for JOSE ZABALA			(\$2,000.00)	\$0 00	\$0.00	\$0.00
	JUSTIN MANZI						
11/17/2014	WITHDRAWAL NOVEMBER 2014 SCHOLARSHIP AWARD	4879	0.0000 JUSTIN MANZI	(\$2,000.00)	\$0 00	\$0 00	\$0.00
	Totals for JUSTIN MANZI			(\$2,000.00)	\$0 00	\$0.00	\$0.00
	KATHERINI KAMVAKOS						
11/17/2014	WITHDRAWAL NOVEMBER 2014 SCHOLARSHIP AWARD	4886	0.0000 KATHERINI KAMVAKOS	(\$2,500.00)	\$0 00	\$0.00	\$0.00
	Totals for KATHERINI KAMVAKOS			(\$2,500.00)	\$0 00	\$0.00	\$0.00
	KATHY VANUAKAS						
5/27/2014	WITHDRAWAL MAY 2014 SCHOLARSHIP AWARD	4512	0.0000 KATHY VANUAKAS	(\$2,500.00)	\$0 00	\$0.00	\$0.00
	Totals for KATHY VANUAKAS			(\$2,500.00)	\$0 00	\$0.00	\$0.00
	KIERNAN KELLEY						
5/27/2014	WITHDRAWAL MAY 2014 SCHOLARSHIP AWARD	4500	0.0000 KIERNAN KELLEY	(\$2,500.00)	\$0 00	\$0.00	\$0.00
11/17/2014	WITHDRAWAL NOVEMBER 2014 SCHOLARSHIP AWARD	4876	0.0000 KIERNAN KELLEY	(\$2,500.00)	\$0 00	\$0.00	\$0.00
	Totals for KIERNAN KELLEY			(\$5,000.00)	\$0.00	\$0.00	\$0.00
	LAURA BERGER						
5/27/2014	WITHDRAWAL MAY 2014 SCHOLARSHIP AWARD	4494	0.0000 LAURA BERGER	(\$2,500.00)	\$0 00	\$0.00	\$0.00
	Totals for LAURA BERGER			(\$2,500.00)	\$0 00	\$0 00	\$0.00
	LINSEY OCHENKOWSKI						
5/27/2014	WITHDRAWAL MAY 2014 SCHOLARSHIP AWARD	4507	0.0000 LINSEY OCHENKOWSKI	(\$2,000.00)	\$0 00	\$0 00	\$0.00
11/17/2014	WITHDRAWAL "NOVEMBER 2014 SCHOLARSHIP AWARD"	4887	0.0000 LINSEY OCHENKOWSKI	(\$1,000.00)	\$0 00	\$0.00	\$0.00
	Totals for LINSEY OCHENKOWSKI			(\$3,000.00)	\$0 00	\$0.00	\$0.00
	MAJDA HODZIC						

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Withdrawal

Settle Date	Transaction Description	Reg Code Check Number	Units Payee	Cash Change Principal	Income	Investment Change Principal	Income
269-000	WITHDRAWAL						
11/17/2014	WITHDRAWAL NOVEMBER 2014 SCHOLARSHIP AWARD	4878	0.0000 MAJDA HODZIC	(\$180.00)	\$0 00	\$0.00	\$0.00
	Totals for MAJDA HODZIC			(\$180.00)	\$0 00	\$0.00	\$0.00
	MALLORY SANDERS						
5/27/2014	WITHDRAWAL MAY 2014 SCHOLARSHIP AWARD	4510	0.0000 MALLORY SANDERS	(\$2,500.00)	\$0 00	\$0.00	\$0.00
11/17/2014	WITHDRAWAL NOVEMBER 2014 SCHOLARSHIP AWARD	4884	0.0000 MALLORY SANDERS	(\$2,500.00)	\$0 00	\$0.00	\$0.00
	Totals for MALLORY SANDERS			(\$5,000.00)	\$0 00	\$0.00	\$0.00
	MELISSA CONWAY						
5/27/2014	WITHDRAWAL MAY 2014 SCHOLARSHIP AWARD	4496	0.0000 MELISSA CONWAY	(\$2,500.00)	\$0 00	\$0.00	\$0.00
	Totals for MELISSA CONWAY			(\$2,500.00)	\$0 00	\$0.00	\$0.00
	MICHAEL WILSON						
5/27/2014	WITHDRAWAL MAY 2014 SCHOLARSHIP AWARD	4513	0.0000 MICHAEL WILSON	(\$2,500.00)	\$0 00	\$0.00	\$0.00
	Totals for MICHAEL WILSON			(\$2,500.00)	\$0 00	\$0.00	\$0.00
	MICHELLE COX						
5/27/2014	WITHDRAWAL MAY 2014 SCHOLARSHIP AWARD	4497	0.0000 MICHELLE COX	(\$2,500.00)	\$0.00	\$0.00	\$0.00
11/17/2014	WITHDRAWAL NOVEMBER 2014 SCHOLARSHIP AWARD	4872	0.0000 MICHELLE COX	(\$2,000.00)	\$0 00	\$0.00	\$0.00
	Totals for MICHELLE COX			(\$4,500.00)	\$0 00	\$0.00	\$0.00
	NICOLE BURKE						
5/27/2014	WITHDRAWAL MAY 2014 SCHOLARSHIP AWARD	4495	0.0000 NICOLE BURKE	(\$2,500.00)	\$0 00	\$0.00	\$0.00
11/17/2014	WITHDRAWAL NOVEMBER 2014 SCHOLARSHIP AWARD	4873	0.0000 NICOLE BURKE	(\$2,500.00)	\$0 00	\$0.00	\$0.00
	Totals for NICOLE BURKE			(\$5,000.00)	\$0 00	\$0.00	\$0.00
	SARAH MCDONALD						
5/27/2014	WITHDRAWAL MAY 2014 SCHOLARSHIP AWARD	4504	0.0000 SARAH MCDONALD	(\$2,500.00)	\$0 00	\$0.00	\$0.00
11/17/2014	WITHDRAWAL NOVEMBER 2014 SCHOLARSHIP AWARD	4881	0.0000 SARAH MCDONALD	(\$2,500.00)	\$0.00	\$0.00	\$0.00
	Totals for SARAH MCDONALD			(\$5,000.00)	\$0 00	\$0.00	\$0.00
	VANESSA LUGO						

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EVERGREEN WOODS EMPLOYEE SCHOLARSHIP FUND INVESTMENT
MANAGEMENT

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Withdrawal

Settle Date	Transaction Description	Reg Code Check Number	Units Payee	Cash Change Principal	Income	Investment Change Principal	Income
269-000	WITHDRAWAL						
5/27/2014	WITHDRAWAL MAY 2014 SCHOLARSHIP AWARD	4503	0.0000 VANESSA LUGO	(\$2,500.00)	\$0.00	\$0.00	\$0.00
	Totals for VANESSA LUGO			(\$2,500.00)	\$0.00	\$0.00	\$0.00
	Total for WITHDRAWAL		0.0000	(\$88,580.00)	\$0.00	\$0.00	\$0.00
	Total for Withdrawal		0.0000	(\$88,580.00)	\$0.00	\$0.00	\$0.00