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Form 990-PF

EXTENDED TO NOVEMBER 16 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. OMB No 1545-0052

Department of the Treasury Internal Revenue Service ▶ Information about Form 990-PF and its separate instructions is at www.lrs.gov/form990pf. and ending For calendar year 2014 or tax year beginning A Employer identification number Name of foundation LINDA K MARINO CHARITABLE TRUST 20-7286250 C/O ARGENT WEALTH MANAGEMENT, Room/suite Number and street (or P O box number if mail is not delivered to street address) B Telephone number 404 WYMAN STREET 781-894-1117 City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here 02451 WALTHAM, MA D 1. Foreign organizations, check here G Check all that apply: Initial return Initial return of a former public charity Final return Amended return 2 Foreign organizations meeting the 85% test, check here and attach computation Name change Address change H Check type of organization: Section 501(c)(3) exempt private foundation E If private foundation status was terminated Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation under section 507(b)(1)(A), check here J Accounting method: X Cash Accrual I Fair market value of all assets at end of year F If the foundation is in a 60-month termination Other (specify) under section 507(b)(1)(B), check here (from Part II, col (c), line 16) 1,250,414. (Part I, column (d) must be on cash basis) ▶\$ Part I Analysis of Revenue and Expenses (d) Disbursements (a) Revenue and (b) Net investment (c) Adjusted net (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)) for charitable purposes (cash basis only) expenses per books income income 330,125 N/A Contributions, gifts, grants, etc., received if the foundation is not required to attach Sch. B. Interest on savings and temporary cash investments 3 28,273. 27,263 STATEMENT Dividends and interest from securities 5a Gross rents b Net rental income or (loss) 23,854 STATEMENT 6a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a 110,154. 33,352 7 Capital gain net income (from Part IV, line 2) Net short-term capital gain Income modifications 9 Gross sales less returns 10a and allowances b Less Cost of goods sold c Gross profit or (loss) RECEIVED STATEMENT <u>,267</u> 11 Other income 383,519 60,615. 12 Total Add lines 1 through 11 RS-OSQ rs, direction Virugite 8, 2015 50,000 25,000. 25,000. Compensation of office 13 Other employee salaries and wages 14 Pension plans, employee benefits OGDEN. UT 16a Legal fees **b** Accounting fees 0. 3,000 3,000. STMT 4 c Other professional fees Administrative 17 Interest 4,444 0. 4,444 STMT 5 18 Taxes 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 7,647 7,647 0. 23 Other expenses STMT 6 24 Total operating and administrative <u>25,000.</u> 65,091 40,091 expenses Add lines 13 through 23 47,000 47,000. 25 Contributions, gifts, grants paid Total expenses and disbursements. 72,000. 112,091 40,091 Add lines 24 and 25 27 Subtract line 26 from line 12: 271,428 a Excess of revenue over expenses and disbursements

20,524

423501 11-24-14 LHA For Paperwork Reduction Act Notice, see instructions

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

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

N/A Eorm **990-PF** (2014

, LINDA K MARINO CHARITABLE TRUST

C/O ARGENT WEALTH MANAGEMENT, LLC.

20-7286250 Page 2

Cash - non-interest-bearing	Б	2rt	Balance Sheets Attached schedules and amounts in the description	Beginning of year	End of	year
2 Samps and temporary cash investments 3 Accounts reconshile ▶ 4 Pregare reconshile ▶ 5 Grants reconshile ▶ 6 Researches dire to obtain accounts ▶ 6 Researches dire to not obtain accounts ▶ 7 Researches dire to not obtain accounts ▶ 8 Inventment of sale or use 9 Pregare operators and obtained accounts ▶ 1 Investments of sale or use 1 Investments - Comporate stock 1 Investments - Comporate stock 1 Investments - Comporate stock 2 Investments - Comporate stock 3 Investments - Comporate stock 1 Investments - Comporate stock 2 Investments - Comporate stock 3 Investments - Comporate stock 2 Investments - Comporate stock 3 Investments - Comporate stock 2 Investments - Comporate stock 3 Investments - Comporate stock 2 Investments - Comporate stock 3 Investments - Comporate stock 2 Investments - Comporate stock 3 Investments - Comporate stock 3 Investments - Comporate stock 4 Investments - Comporate stock 5 Investments - Comporate stock 5 Investments - Comporate stock 6 Investments - Comporate stock 6 Investments - Comporate stock 7 Investments - Comporate stock 8 Investments - Comporate stock 8 Investments - Comporate stock 9 Investments -	드	ai t	column should be for end-of-year amounts only	(a) Book Value		
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31 Total liabilities and net assets/fund balances 966,970. 1,238,398. Part III Analysis of Changes in Net Assets or Fund Balances Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) 1	ě	30	Total net assets or fund balances	966,970.	1,238,398.	
Part III Analysis of Changes in Net Assets or Fund Balances 1 Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) 2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) ▶ 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) ▶ 5 Oo. 6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30 6 1, 238, 398.	_					
Part III Analysis of Changes in Net Assets or Fund Balances 1 Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) 2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) ▶ 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) ▶ 5 Oo. 6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30 6 1, 238, 398.		31	Total liabilities and net assets/fund balances	966,970.	1,238,398.	
1 Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) 2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) ► 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) ► 5 O. 6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30						······································
(must agree with end-of-year figure reported on prior year's return)1966,970.2Enter amount from Part I, line 27a2271,428.3Other increases not included in line 2 (itemize)30.4Add lines 1, 2, and 341,238,398.5Decreases not included in line 2 (itemize)50.6Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 3061,238,398.	L	aπ	Analysis of Changes in Net Assets of Fund B	alances		
(must agree with end-of-year figure reported on prior year's return)1966,970.2Enter amount from Part I, line 27a2271,428.3Other increases not included in line 2 (itemize)30.4Add lines 1, 2, and 341,238,398.5Decreases not included in line 2 (itemize)50.6Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 3061,238,398.	1	Tota	I net assets or fund balances at beginning of year - Part II, column (a), line	30		
2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) ► 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) ► 5 Oc. 6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30					1	966.970.
3 Other increases not included in line 2 (itemize) ► 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) ► 5 Oc. 6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	2	•			2	
4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) ► 6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30 4 1,238,398. 5 0. 6 1,238,398.					1	
5 Decreases not included in line 2 (itemize) ► 5 0. 6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30 6 1, 238, 398.						
6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30 6 1, 238, 398.					h 	
				oluma (h) line 20		
	0	1018	Thet assets of junu balances at end of year (line 4 fillings line 5) - Part II, CC	ոսուու (Մ), IIIIԵ 30		

423511 11-24-14

LINDA K MARINO CHARITABLE TRUST

20-7286250 Form 990-Pf (2014) C/O ARGENT WEALTH MANAGEMENT Page 3 Part IV Capital Gains and Losses for Tax on Investment Income (b) How acquired P - Purchase D - Donation (c) Date acquired (a) List and describe the kind(s) of property sold (e.g., real estate, (d) Date sold 2-story brick warehouse; or common stock, 200 shs. MLC Co.) (mo., day, yr.) (mo., day, yr.) 1a FIDELITY P 01/01/00 12/31/14 P 04/29/14 08/19/14 b EATON VANCE TAX MANAGED GLOBAL P 01/01/14 08/20/14 c RS GLOBAL NATURAL RESOURCES d EATON VANCE TAX MANAGED GLOBAL P 07/13/12 08/18/14 P 01/01/00 08/20/14 e RS GLOBAL NATURAL RESOURCES (g) Cost or other basis (f) Depreciation allowed (h) Gain or (loss) (e) Gross sales price (e) plus (f) minus (g) (or allowable) plus expense of sale 25,031 25,031. а 31,098 30,308 790. b 5,077. 5,237 160. C 20,017. 13,528 6,489. ď 28,771. 27,889 882. 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 25,031. 790. b 160. C 6,489. d 882. е If gain, also enter in Part I, line 7 2 Capital gain net income or (net capital loss) 33,352. If (loss), enter -0- in Part I, line 7 2 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). N/A If (loss), enter -0- in Part I, line 8 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 Calendar year (or tax year beginning in) (c) Adjusted qualifying distributions Net value of noncharitable-use assets 66,750 936,976 .071240 2013 247,500 844,966. .292911 2012 .198212 2011 51,000 257,300. 27,595. 20,113 .728864 2010 24,558 53,443 .459518 2009 1.750745 2 Total of line 1, column (d) 2 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 .350149 3 1,246,649. Enter the net value of noncharitable-use assets for 2014 from Part X, line 5 4 436,513. Multiply line 4 by line 3 5 205. Enter 1% of net investment income (1% of Part I, line 27b) 6 436,718. Add lines 5 and 6 7 72,000. 8 Enter qualifying distributions from Part XII, line 4 8 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.

423521 11-24-14

Form 990-PF (2014)

_	, LINDA K MARINO CHARITABLE TRUST	0 700	COE 0		
	(0 :: 4040() 4040() 4040()	<u>0-728</u> 48 - see	6250	ctio	Page 4
		-0 - 566	ะการเกิน		13)
	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)			1	10.
	Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1%	1		- 4	<u> 10.</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).	1			
	Fax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2			0.
	Add lines 1 and 2	3		4	10.
-	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4			0.
	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5		4	10.
	Credits/Payments:	_			
	2014 estimated tax payments and 2013 overpayment credited to 2014 6a 377.				
	Exempt foreign organizations - tax withheld at source 6b				
	Tax paid with application for extension of time to file (Form 8868) 6c 1,000.				
	Backup withholding erroneously withheld 6d				
	Total credits and payments. Add lines 6a through 6d	7		1.3	77.
	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8			
	Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed	9			
		10		9	67.
	Enter the amount of line 10 to be: Credited to 2015 estimated tax ▶ 967. Refunded ▶	11			0.
	t VII-A Statements Regarding Activities				
1a	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
	any political campaign?		1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)?		1b		X
	If the answer is "Yes" to 1a or 1b , attach a detailed description of the activities and copies of any materials published	or			
	distributed by the foundation in connection with the activities				
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
	(1) On the foundation. ► \$ 0 . (2) On foundation managers. ► \$ 0 .				l
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation				
	managers. ► \$O.		-		l
	Has the foundation engaged in any activities that have not previously been reported to the IRS?		2		X
	If "Yes," attach a detailed description of the activities				
	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
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	3T / 3	4a		X
	If "Yes," has it filed a tax return on Form 990-T for this year?	N/A	4b	<u> </u>	37
	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 legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state legislation.	aw	_	x	
	remain in the governing instrument?		7	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				
0.	Enter the states to which the foundation reports or with which it is registered (see instructions)				
08	MA		-		
h	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)		-		
U	of each state as required by General Instruction G? If "No," attach explanation		8ъ	х	
q	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendary	dar		- <u>-</u>	
J	year 2014 or the tayable year beginning in 2014 (see instructions for Part XIV)? If "Ves." complete Part XIV		9	İ	l x

10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses

, LINDA K MARINO CHARITABLE TRUST

	1990-PF (2014) C/O ARGENT WEALTH MANAGEMENT, LLC. 20-728	<u>6250</u>		Page 5
Pa	art 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			İ
	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		Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
	Website address ► N/A			
14	The books are in care of ▶ DAVID M DUCHESNEAU Telephone no. ▶ 781-2	90-4	900	
	Located at ► 404 WYMAN STREET, WALTHAM, MA ZIP+4 ►0			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here			$\overline{\Box}$
	and enter the amount of tax-exempt interest received or accrued during the year	N	/A	
16	At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
	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			
Pa	art VII-B Statements Regarding Activities for Which Form 4720 May Be Required			<u> </u>
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year did the foundation (either directly or indirectly):			
-	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available			
	for the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No"			
	If the foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, if terminating within 90 days.) Yes X No			
h	o 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)? N/A	1b		
	Organizations relying on a current notice regarding disaster assistance check here	10	-	
	E Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected			
٠	before the first day of the tax year beginning in 2014?	1c		х
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation	10-	_	
_	defined in section 4942(j)(3) or 4942(j)(5)):			
9	that the end of tax year 2014, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning			
٠	before 2014?			
	If "Yes," list the years \blacktriangleright ,,,,,			
ŀ	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect			
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach			
	statement - see instructions.) N/A	2b		
c	to the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
	b			
3 a	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
	during the year?			
Ł	of f"Yes," did it have excess business holdings in 2014 as a result of (1) any purchase by the foundation or disqualified persons after			
	May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose			
	of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,			
	Form 4720, to determine if the foundation had excess business holdings in 2014) N/A	3b		
42	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that	, u		
	had not been removed from jeopardy before the first day of the tax year beginning in 2014?	4b		Х
_				

LINDA K MARINO CHARITABLE TRUST C/O ARGENT WEALTH MANAGEMENT 20-7286250 Form 990-PF (2014) Page 6 Part VII-B | Statements Regarding Activities for Which Form 4720 May Be Required (continued) 5a During the year did the foundation pay or incur any amount to: Yes X No (1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? (2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, Yes X No any voter registration drive? Yes X No (3) Provide a grant to an individual for travel, study, or other similar purposes? (4) Provide a grant to an organization other than a charitable, etc., organization described in section Yes X No 4945(d)(4)(A)? (see instructions) (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for Yes X No the prevention of cruelty to children or animals? b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations N/A section 53.4945 or in a current notice regarding disaster assistance (see instructions)? 5b Organizations relying on a current notice regarding disaster assistance check here c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained Yes No expenditure responsibility for the grant? N/A If "Yes," attach the statement required by Regulations section 53 4945-5(d) 6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on Yes X No a personal benefit contract? 6b Х b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If "Yes" to 6b, file Form 8870 Yes X No 7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? 7b Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors 1 List all officers, directors, trustees, foundation managers and their compensation. (d) Contributions to employee benefit plans and deferred compensation (c) Compensation (e) Expense account, other allowances (b) Title, and average hours per week devoted to position (If not paid, enter -0-) (a) Name and address LINDA K MARINO TRUSTEE SNOWS HILL LANE 0 50,000 0. DOVER, MA 02030 5.00 ROGER M MARINO TRUSTEE 254 WESTFIELD STREET 0. 0.00 0. 0. DEDHAM, MA 02026

2 Compensation of five highest-paid employees (other than those	included on line 1). If none	, enter "NONE."		
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				
Total number of other employees paid over \$50,000				(

. LINDA K MARINO CHARITABLE TRUST

Form 990-PF (2014) C/O ARGENT WEALTH MANAGEMENT, LLC.	20-728	6250 Page 7
Part VIII Information About Officers, Directors, Trustees, Foundation M Paid Employees, and Contractors (continued)	anagers, Highly	
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 service	(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 relevant statistical informumber of organizations and other beneficiaries served, conferences convened, research papers produced, etc.		Expenses
1 <u>N/A</u>		
2		
3		
4		
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	d 2.	Amount
1 N/A		
2		
All other program-related investments. See instructions.		
3		
Total. Add lines 1 through 3	>	0.

C/O ARGENT WEALTH MANAGEMENT, LLC.

Page 8

P	Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations	s, see instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		<u>-</u>
	Average monthly fair market value of securities	1a	427,600.
	Average of monthly cash balances	1b	838,033.
	Fair market value of all other assets	1c	
đ	Total (add lines 1a, b, and c)	1d	1,265,633.
	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	1,265,633.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	18,984.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	1,246,649.
6	Minimum investment return Enter 5% of line 5	6	62,332.
Р	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and foreign organizations check here in and do not complete this part.)	d certain	
1	Minimum investment return from Part X, line 6	1	62,332.
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	410.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	61,922.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	61,922.
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	61,922.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	72,000.
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	72,000.
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	0.
6	Adjusted qualifying distributions Subtract line 5 from line 4	6	72,000.
	Note The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of	qualifies t	for the section

4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

	-	(a) Corpus	(b) Years prior to 2013	(c) 2013	(d) 2014
1 Distributable amount fo	r 2014 from Part XI,	` ` `			
line 7	·				61,922.
2 Undistributed income, if any	y, as of the end of 2014				<u> </u>
a Enter amount for 2013	only			0.	
b Total for prior years:					
	,		0.		
3 Excess distributions can	rryover, if any, to 2014:				
a From 2009					
b From 2010					
c From 2011	9,680.				
d From 2012	247,500.				
e From 2013	66,750.				
f Total of lines 3a throug	h e	323,930.			
4 Qualifying distributions	for 2014 from				
Part XII, line 4; ► \$	72,000.				
a Applied to 2013, but no	t more than line 2a			0.	
b Applied to undistributed	d income of prior				
years (Election required	·		0.		
c Treated as distributions	· 1				
(Election required - see	·	72,000.			
d Applied to 2014 distribi	′ h	/	•		0.
e Remaining amount dist	F	0.		·	
5 Excess distributions carryo	· F	61,922.			61,922.
(If an amount appears in col must be shown in column (a	umn (d), the same amount	02/3220			01,522.
6 Enter the net total of ea	··				
a Corpus Add lines 3f, 4c, an	nd 4e. Subtract line 5	334,008.			
b Prior years' undistribute	F	331,0001			
line 4b from line 2b	od mooma. Cabii dot		0.		
c Enter the amount of pri	or years'				
undistributed income for deficiency has been iss the section 4942(a) tax assessed	or which a notice of ued, or on which		0.		
d Subtract line 6c from li	an 6h Tavahla				
amount - see instructio			0.		
e Undistributed income for	- T		<u></u>		
4a from line 2a Taxable	I			0.	
f Undistributed income for					·
lines 4d and 5 from line					
be distributed in 2015	: 1. This amount must				0.
7 Amounts treated as dis	tributions out of				<u>U.</u>
corpus to satisfy requir					
section 170(b)(1)(F) or	' '				
may be required - see ii		0.			
	· · · · · · · · · · · · · · · · · · ·	<u>U•</u>			· · · · · · · · · · · · · · · · · · ·
8 Excess distributions can	-	0.			
not applied on line 5 or		<u> </u>			
9 Excess distributions ca	-	224 000			
Subtract lines 7 and 8 f	rom line ba	334,008.			
10 Analysis of line 9:					
a Excess from 2010					
b Excess from 2011	105 250				
c Excess from 2012	195,258.				
d Excess from 2013	66,750.				
e Excess from 2014 423581 11-24-14	72,000.	** SEE STATEN	AENT O		Form 990-PF (2014)
1 1-64" IT		OUT OTAICE	TELLI 2		FULLI 3390°FF (70)14)

LINDA K MARINO CHARITABLE TRUST

Form 990-PF (2014) C/O ARGENT WEALTH MANAGEMENT, LLC. 20-7286250 Page 10

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

Part XIV Private Operating F	oundations (see in	structions and Part VII	-A, question 9)	N/A	
1 a If the foundation has received a ruling of	or determination letter that	it is a private operating	·		
foundation, and the ruling is effective for	or 2014, enter the date of t	he ruling	•		
b Check box to indicate whether the foun	dation is a private operatir	ng foundation described i	n section	4942(J)(3) or 49	42(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years	W/ /	- W// /
income from Part I or the minimum	(a) 2014	(b) 2013	(c) 2012	(d) 2011	(e) Total
investment return from Part X for			-		***
each year listed					
b 85% of line 2a					
c Qualifying distributions from Part XII.					
line 4 for each year listed					
d Amounts included in line 2c not			-		· · · · · · · · · · · · · · · · · · ·
used directly for active conduct of					
exempt activities					
e Qualifying distributions made directly					
for active conduct of exempt activities.					
Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the					
alternative test relied upon:					
a "Assets" alternative test - enter:(1) Value of all assets					
` '					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter					
2/3 of minimum investment return shown in Part X, line 6 for each year					
listed					
c "Support" alternative test - enter:					
(1) Total support other than gross					
investment income (interest,					
dividends, rents, payments on securities loans (section					
512(a)(5)), or royalties)					
(2) Support from general public					
and 5 or more exempt					
organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from					
an exempt organization					
(4) Gross investment income					
Part XV Supplementary Info	ormation (Comple	te this part only	if the foundation	had \$5,000 or mo	re in assets
at any time during	the year-see instr	ructions.)			
1 Information Regarding Foundation	on Managers:				
a List any managers of the foundation wi			ributions received by the	foundation before the clos	se of any tax
year (but only if they have contributed	more than \$5,000). (See s	ection 507(d)(2).)			
ROGER M MARINO					
b List any managers of the foundation w			or an equally large portion	on of the ownership of a pa	artnership or
other entity) of which the foundation ha	as a 10% or greater interes	SI.			
NONE		<u> </u>			
2 Information Regarding Contribution					
Check here X if the foundation the foundation makes gifts, grants, etc.					
	· · · · · · · · · · · · · · · · · · ·		•		u
a The name, address, and telephone nun	noer or e-mail address of t	ne herzon to auom abbii	canons snould be addres	55cu,	
b The form in which applications should	be submitted and informa	tion and materials they st	nould include:		
c Any submission deadlines:					
d Any restrictions or limitations on award	te cuch as hy goographic	al areae charitable fields	kinds of institutions or a	other factore:	
a with restrictions of illitiations on award	is, such as by geographic	ai ai cas, ciidi ilabic iiciUS,	kinus or institutions, or (טוויטו ומטוטוא.	

, LINDA K MARINO CHARITABLE TRUST

Form 990-PF (2014) C/O ARGENT WEALTH MANAGEMENT, LLC. 20-7286250 Page 11 Part XV Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Foundation status of recipient Purpose of grant or contribution show any relationship to Amount any foundation manager Name and address (home or business) or substantial contributor a Paid during the year CROSS ROADS FOR KIDS NONE EXEMPT TO SUPPORT THE COMMUNITY 119 MYTLE STREET 47,000. DUXBURY, MA 02332 **▶** 3a 47 000. Total **b** Approved for future payment NONE **▶** 3b Total

Form **990-PF** (2014)

Part XVI-A **Analysis of Income-Producing Activities**

Form 990-PF (2014)

423621 11-24-14

Enter gross amounts unless otherwise indicated.	Unrelate	ed business income	Exclu	ided by section 512, 513, or 514	(e)
	(a) Business code	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income
1 Program service revenue:	code		2008		
a	-	· · ·			1 /
b					<u></u>
C					
d		·			
e					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments					
4 Dividends and interest from securities			14	28,273.	··
5 Net rental income or (loss) from real estate:				•	
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal					
property	-				
7 Other investment income					
8 Gain or (loss) from sales of assets other					
than inventory			18	23,854.	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
a NON DIVIDEND			<u> </u>		
b DISTRIBUTION			01	1,267.	
C					
d			 		
de		0.		53.394.	0.
e		0.		53,394.	
d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total Add line 12, columns (b), (d), and (e)		0.			0. 53,394.
d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.)				13	
d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total Add line 12, columns (b), (d), and (e)	o the Acce			13	
d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.)		omplishment of Ex	kemp	13 ot Purposes	53,394.
d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to	ne is reported	omplishment of Ex	kemp	13 ot Purposes	53,394.
d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to Line No. Explain below how each activity for which incor	ne is reported	omplishment of Ex	kemp	13 ot Purposes	53,394.
d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to Line No. Explain below how each activity for which incor	ne is reported	omplishment of Ex	kemp	13 ot Purposes	53,394.
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orm 99	90-P F (20			HARITABLE TRUST H_MANAGEMENT, LLC	20-72	86250	Pa	ige 13
Part		Information Re Exempt Organ	garding Transfe	rs To and Transactions an	nd Relationships With Nonc			-
1 Di	d the orga			e following with any other organization	described in section 501(c) of		Yes	No
				ection 527, relating to political organiz				
			ation to a noncharitable e					
(1) Cash			, ,		1a(1)		Х
-) Other a	issets				1a(2)		Х
	her trans:							
(1) Sales c	of assets to a noncharita	ble exempt organization			1b(1)		Х
(2) Purcha	ses of assets from a no	ncharitable exempt organ	ization		1b(2)		X
(3) Rental	of facilities, equipment,	or other assets			1b(3)		X
(4) Reimbi	ursement arrangements				1b(4)		X
(5) Loans	or loan guarantees				1b(5)		X
(6) Perform	mance of services or me	mbership or fundraising	solicitations		1b(6)		X
c St	naring of t	facilities, equipment, ma	iling lists, other assets, o	r paid employees		10	<u> </u>	X
					ays show the fair market value of the good		ets,	
					in any transaction or sharing arrangemen	nt, show in		
		<u>_</u>	other assets, or services		T			
a) Line	no (b) Amount involved	· · ·	charitable exempt organization	(d) Description of transfers, transactions,	and sharing ar	rangeme	ents
				N/A				
								
	-							
								
	~		- · - · · · · · · · · · · · · · · · · ·	-				
				···-				
						,		
			-					
2a Is	the found	dation directly or indirec	tly affiliated with, or relate	ed to, one or more tax-exempt organiza	ations described			
ın	section 5	01(c) of the Code (othe	r than section 501(c)(3))	or in section 527?		Yes	X] No
		nplete the following sch						
		(a) Name of org	janization	(b) Type of organization	(c) Description of relati	onship		
		N/A						
								
		_						
Sign	and hel			irn, including accompanying schedules and si ir (other than taxpayer) is based on all informa		May the IRS return with th shown below	e prepar	er

Sign Here	and I	belief		complete Declaration	ined this return, including on of preparer (other than				r has any knowled		May the IRS discuss to return with the preparation shown below (see instance) X Yes	er
Paid Prepa Use C		F	Print/Type preparer's DAVID M. irm's name ► AI	DUCHESN		That	LLC	Date 11/09/15	Self- employe	d j	TIN P00955846 -5972245	
		F	irm's address 🕨 🗸	104 WYMA VALTHAM,	N STREET, MA 02451	SUITE	375		Phone no.	781	-290-4900	_
											Form 990-PF	(201

ichedule B (Form 990, 990-EZ,

or 990-PF)

Department of the Treasury

Internal Revenue Service

Schedule of Contributors

► Attach to Form 990, Form 990-EZ, or Form 990-PF. Information about Schedule B (Form 990, 990-EZ, or 990-PF) and

its instructions is at www.lrs.gov/form990

OMB No 1545-0047

Name of the organization

LINDA K MARINO CHARITABLE TRUST

C/O ARGENT WEALTH MANAGEMENT, LLC

Employer identification number

20-7286250

Organization type (check one). Filers of: Section: Form 990 or 990-EZ 501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization X 501(c)(3) exempt private foundation Form 990-PF 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions General Rule Sor an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions Special Rules For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals Complete Parts I, II, and III For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc, contributions totaling \$5,000 or more during the year Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF),

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2014)

but it must answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to

certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Name of organization
LINDA K MARINO CHARITABLE TRUST
C/O ARGENT WEALTH MANAGEMENT, LLC.

Employer identification number

20-7286250

Part I	Contributors	(see instructions).	. Use duplicate copies	s of Part I if additional	space is needed.
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	, , , , , , , , , , , , , , , , , , ,	<u> </u>	· · · · · · · · · · · · · · · · · · ·
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	ROGER M MARINO 254 WESTFIELD STREET DEDHAM, MA 02026	\$330,000.	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization

Employer identification number

LINDA K MARINO CHARITABLE TRUST C/O ARGENT WEALTH MANAGEMENT, LLC.

20-7286250

Part II Noncash Property (see instructions) Use duplicate copies of Part II if additional space is needed

	· -		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	

Schedule B (Form 990, 990-EZ, or 990-PF) (2014) Employer identification number LINDA K MARINO CHARITABLE TRUST 20-7286250 C/O ARGENT WEALTH MANAGEMENT LLC. Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations Part III completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year (Enter this info once) Use duplicate copies of Part III if additional space is needed (a) No. from (d) Description of how gift is held (b) Purpose of gift (c) Use of gift Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (d) Description of how gift is held (b) Purpose of gift (c) Use of gift (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (c) Use of gift (d) Description of how gift is held (b) Purpose of gift Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (d) Description of how gift is held (b) Purpose of gift (c) Use of gift Part I (e) Transfer of gift

Relationship of transferor to transferee

Transferee's name, address, and ZIP + 4