



See a Social Security Number? Say Something!
Report Privacy Problems to <https://public.resource.org/privacy>
Or call the IRS Identity Theft Hotline at 1-800-908-4490



Return of Private Foundation

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

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

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

OMB No 1545-0052

2014

Open to Public Inspection

For calendar year 2014 or tax year beginning

, 2014, and ending

, 20

Name of foundation MERRILL FAMILY CHARITABLE FOUNDATION, INC.		A Employer identification number 22-3494040
% GOULSTON & STORRS PC		B Telephone number (see instructions) 617-574-4033
Number and street (or P O box number if mail is not delivered to street address) 400 ATLANTIC AVENUE		
Room/suite		
City or town, state or province, country, and ZIP or foreign postal code BOSTON, MA 02110-3333		
G Check all that apply: <input type="checkbox"/> Initial return <input type="checkbox"/> Final return <input checked="" type="checkbox"/> Address change <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Amended return <input type="checkbox"/> Name change		C If exemption application is pending, check here <input type="checkbox"/>
H Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		D 1 Foreign organizations, check here <input type="checkbox"/> 2 Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) ▶ \$ 2,961,832.		E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>
J Accounting method: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____		F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>
(Part I, column (d) must be on cash basis)		

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
1	Contributions, gifts, grants, etc., received (attach schedule)	30,000.			
2	Check <input type="checkbox"/> if the foundation is not required to attach Sch B				
3	Interest on savings and temporary cash investments	3.	3.		STMT 1
4	Dividends and interest from securities	73,429.	73,429.		STMT 2
5a	Gross rents				
b	Net rental income or (loss)				
6a	Net gain or (loss) from sale of assets not on line 10	100,553.			
b	Gross sales price for all assets on line 6a	147,728.			
7	Capital gain net income (from Part IV, line 2)		100,553.		
8	Net short-term capital gain				
9	Income modifications				
10a	Gross sales less returns and allowances				
b	Less: Cost of goods sold				
c	Gross profit or (loss) (attach schedule)				
11	Other income (attach schedule)				
12	Total. Add lines 1 through 11	203,985.	173,985.		
13	Compensation of officers, directors, trustees, etc.				
14	Other employee salaries and wages				
15	Pension plans, employee benefits				
16a	Legal fees (attach schedule)				
b	Accounting fees (attach schedule)	3,049.	1,525.	NONE	1,525.
c	Other professional fees (attach schedule)	27,915.	13,958.		13,958.
17	Interest				
18	Taxes (attach schedule) (see instructions)	4,495.	996.		
19	Depreciation (attach schedule) and depletion				
20	Occupancy				
21	Travel, conferences, and meetings	65.	NONE	NONE	65.
22	Printing and publications		NONE	NONE	
23	Other expenses (attach schedule)				
24	Total operating and administrative expenses. Add lines 13 through 23.	35,524.	16,479.	NONE	15,548.
25	Contributions, gifts, grants paid	211,264.			211,264.
26	Total expenses and disbursements. Add lines 24 and 25.	246,788.	16,479.	NONE	226,812.
27	Subtract line 26 from line 12.				
a	Excess of revenue over expenses and disbursements	-42,803.			
b	Net investment income (if negative, enter -0-)		157,506.		
c	Adjusted net income (if negative, enter -0-)				

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)		Beginning of year	End of year	
				(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1	Cash - non-interest-bearing		200.	475.	475.
	2	Savings and temporary cash investments		58,466.	43,496.	43,496.
	3	Accounts receivable ▶				
		Less: allowance for doubtful accounts ▶				
	4	Pledges receivable ▶				
		Less: allowance for doubtful accounts ▶				
	5	Grants receivable				
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)				
	7	Other notes and loans receivable (attach schedule) ▶				
		Less: allowance for doubtful accounts ▶	NONE			
	8	Inventories for sale or use				
	9	Prepaid expenses and deferred charges				
	10a	Investments - U.S. and state government obligations (attach schedule)	STMT 7	39,089.	38,068.	38,483.
	b	Investments - corporate stock (attach schedule)	STMT 8	1,040,195.	1,013,105.	2,516,874.
	c	Investments - corporate bonds (attach schedule)				
	Liabilities	11	Investments - land, buildings, and equipment basis			
		Less: accumulated depreciation (attach schedule) ▶				
12		Investments - mortgage loans				
13		Investments - other (attach schedule)	STMT 10	454,790.	454,790.	362,504.
14		Land, buildings, and equipment basis				
		Less: accumulated depreciation (attach schedule) ▶				
15		Other assets (describe ▶)				
16		Total assets (to be completed by all filers - see the instructions. Also, see page 1, item I)		1,592,740.	1,549,934.	2,961,832.
Net Assets or Fund Balances	17	Accounts payable and accrued expenses				
	18	Grants payable				
	19	Deferred revenue				
	20	Loans from officers, directors, trustees, and other disqualified persons				
Net Assets or Fund Balances	21	Mortgages and other notes payable (attach schedule)				
	22	Other liabilities (describe ▶)				
	23	Total liabilities (add lines 17 through 22)			NONE	
		Foundations that follow SFAS 117, check here ▶ <input type="checkbox"/> and complete lines 24 through 26 and lines 30 and 31.				
	24	Unrestricted				
	25	Temporarily restricted				
	26	Permanently restricted				
		Foundations that do not follow SFAS 117, . . . ▶ <input checked="" type="checkbox"/> check here and complete lines 27 through 31.				
	27	Capital stock, trust principal, or current funds		1,592,740.	1,549,934.	
	28	Paid-in or capital surplus, or land, bldg, and equipment fund				
Net Assets or Fund Balances	29	Retained earnings, accumulated income, endowment, or other funds				
	30	Total net assets or fund balances (see instructions)		1,592,740.	1,549,934.	
	31	Total liabilities and net assets/fund balances (see instructions)		1,592,740.	1,549,934.	

Part III Analysis of Changes in Net Assets or Fund Balances

1	Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	1,592,740.
2	Enter amount from Part I, line 27a	2	-42,803.
3	Other increases not included in line 2 (itemize) ▶	3	
4	Add lines 1, 2, and 3	4	1,549,937.
5	Decreases not included in line 2 (itemize) ▶ ROUNDING ADJUSTMENT	5	3.
6	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	1,549,934.

Form 990-PF (2014)

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co)			(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo, day, yr)	(d) Date sold (mo, day, yr)
1a PUBLICLY TRADED SECURITIES					
b					
c					
d					
e					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)		
a 147,728.		47,175.	100,553.		
b					
c					
d					
e					
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(i) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))		
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any			
a			100,553.		
b					
c					
d					
e					
2 Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }			2	100,553.	
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c) (see instructions). If (loss), enter -0- in Part I, line 8			3		

Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.)

If section 4940(d)(2) applies, leave this part blank

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?

☐ Yes ☒ No

If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part.

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

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2013	211,552.	2,624,641.	0.080602
2012	197,490.	2,354,508.	0.083877
2011	209,700.	2,432,333.	0.086214
2010	200,645.	2,352,910.	0.085275
2009	173,486.	2,074,208.	0.083640
2 Total of line 1, column (d)			0.419608
3 Average distribution ratio for the 5-year base period - divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years			0.083922
4 Enter the net value of noncharitable-use assets for 2014 from Part X, line 5		2,870,958.	
5 Multiply line 4 by line 3			240,937.
6 Enter 1% of net investment income (1% of Part I, line 27b)			1,575.
7 Add lines 5 and 6			242,512.
8 Enter qualifying distributions from Part XII, line 4 If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions.			226,812.

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

1a Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1		1	3,150.
Date of ruling or determination letter _____ (attach copy of letter if necessary - see instructions)			
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input type="checkbox"/> and enter 1% of Part I, line 27b			
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col (b)			
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		2	
3 Add lines 1 and 2		3	3,150.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		4	NONE
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		5	3,150.
6 Credits/Payments:			
a 2014 estimated tax payments and 2013 overpayment credited to 2014	6a 2,400.		
b Exempt foreign organizations - tax withheld at source	6b NONE		
c Tax paid with application for extension of time to file (Form 8868)	6c NONE		
d Backup withholding erroneously withheld	6d		
7 Total credits and payments. Add lines 6a through 6d		7	2,400.
8 Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached		8	
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		9	750.
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		10	
11 Enter the amount of line 10 to be: Credited to 2015 estimated tax <input type="checkbox"/> NONE Refunded <input type="checkbox"/>		11	

Part VII-A Statements Regarding Activities

	Yes	No
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?		X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the definition)? If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities		X
c Did the foundation file Form 1120-POL for this year?		X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation <input type="checkbox"/> \$ _____ (2) On foundation managers <input type="checkbox"/> \$ _____		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers <input type="checkbox"/> \$ _____		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities.		X
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		X
b If "Yes," has it filed a tax return on Form 990-T for this year?		
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T.		X
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	X	
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	X	
8a Enter the states to which the foundation reports or with which it is registered (see instructions) <input type="checkbox"/> DE		
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation	X	
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "Yes," complete Part XIV		X
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	X	

Form 990-PF (2014)

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		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
Website address <input type="text"/> N/A				
14	The books are in care of <input type="text"/> SEE STATEMENT 11 Telephone no. <input type="text"/>			
	Located at <input type="text"/> ZIP+4 <input type="text"/>			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the year. <input type="text"/> 15			
16	At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for FinCEN Form 114, (formerly TD F 90-22.1) If "Yes," enter the name of the foreign country <input type="text"/>	16	Yes	No X

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.

	Yes	No
1a During the year did the foundation (either directly or indirectly):		
(1) Engage in the sale or exchange, or leasing of property with a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days). <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? <input type="checkbox"/> Organizations relying on a current notice regarding disaster assistance check here <input type="checkbox"/>	1b	X
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? <input type="checkbox"/>	1c	X
2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)).		
a At the end of tax year 2014, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2014? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," list the years <input type="text"/>		
b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement - see instructions.) <input type="checkbox"/>	2b	X
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here <input type="text"/>		
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b If "Yes," did it have excess business holdings in 2014 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2014) <input type="checkbox"/>	3b	
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	X
b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2014? <input type="checkbox"/>	4b	X

Form 990-PF (2014)

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)

5a During the year did the foundation pay or incur any amount to:

(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? ☐ Yes ☒ No

(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive? ☐ Yes ☒ No

(3) Provide a grant to an individual for travel, study, or other similar purposes? ☒ Yes ☐ No

(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? (see instructions). ☒ Yes ☐ No

(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? ☐ Yes ☒ No

b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)? ☐ Yes ☒ No
Organizations relying on a current notice regarding disaster assistance check here ☐

c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? ☒ Yes ☐ No
If "Yes," attach the statement required by Regulations section 53.4945-5(d)

6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? ☐ Yes ☒ No

b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? ☐ Yes ☒ No
If "Yes" to 6b, file Form 8870.

7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? ☐ Yes ☒ No

b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? ☐ Yes ☒ No

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors**1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).**

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (if not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
BRUCE MERRILL P.O. BOX 478, CORNWALL, NY 12518	SECRETARY/TREASU 1	-0-	-0-	-0-
PAUL MERRILL P.O. BOX 478, CORNWALL, NY 12518	PRESIDENT 1	-0-	-0-	-0-
AMY MERRILL P O BOX 478, CORNWALL, NY 12518	VICE-PRESIDENT 1	-0-	-0-	-0-

2 Compensation of five highest-paid employees (other than those included on line 1 - see instructions). If none, enter "NONE."

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE		NONE	NONE	NONE

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

Form 990-PF (2014)

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)**3 Five highest-paid independent contractors for professional services** (see instructions). If none, enter "NONE."

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		NONE
Total number of others receiving over \$50,000 for professional services		NONE

Part IX-A Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1 NONE	
2	
3	
4	

Part IX-B Summary of Program-Related Investments (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 NONE	
2	
All other program-related investments See instructions	
3 NONE	
Total. Add lines 1 through 3	

Form 990-PF (2014)

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities	1a	2,892,174.
b	Average of monthly cash balances	1b	22,504.
c	Fair market value of all other assets (see instructions).	1c	NONE
d	Total (add lines 1a, b, and c)	1d	2,914,678.
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	1e	
2	Acquisition indebtedness applicable to line 1 assets	2	NONE
3	Subtract line 2 from line 1d	3	2,914,678.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	43,720.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	2,870,958.
6	Minimum investment return. Enter 5% of line 5	6	143,548.

Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☐ and do not complete this part.)

1	Minimum investment return from Part X, line 6	1	143,548.
2a	Tax on investment income for 2014 from Part VI, line 5	2a	3,150.
b	Income tax for 2014. (This does not include the tax from Part VI)	2b	
c	Add lines 2a and 2b	2c	3,150.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	140,398.
4	Recoveries of amounts treated as qualifying distributions	4	NONE
5	Add lines 3 and 4	5	140,398.
6	Deduction from distributable amount (see instructions).	6	NONE
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	140,398.

Part XII Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26	1a	226,812.
b	Program-related investments - total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	NONE
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required)	3a	NONE
b	Cash distribution test (attach the required schedule)	3b	NONE
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	226,812.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b (see instructions)	5	N/A
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	226,812.

Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2013	(c) 2013	(d) 2014
1 Distributable amount for 2014 from Part XI, line 7				140,398.
2 Undistributed income, if any, as of the end of 2014				
a Enter amount for 2013 only			NONE	
b Total for prior years 20 12 ,20 ,20		NONE		
3 Excess distributions carryover, if any, to 2014:				
a From 2009	75,660.			
b From 2010	86,091.			
c From 2011	91,466.			
d From 2012	81,159.			
e From 2013	82,708.			
f Total of lines 3a through e	417,084.			
4 Qualifying distributions for 2014 from Part XII, line 4 ▶ \$ 226,812.				
a Applied to 2013, but not more than line 2a			NONE	
b Applied to undistributed income of prior years (Election required - see instructions)		NONE		
c Treated as distributions out of corpus (Election required - see instructions)	NONE			
d Applied to 2014 distributable amount				140,398.
e Remaining amount distributed out of corpus	86,414.			
5 Excess distributions carryover applied to 2014 (If an amount appears in column (d), the same amount must be shown in column (a))	NONE			NONE
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	503,498.			
b Prior years' undistributed income Subtract line 4b from line 2b		NONE		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		NONE		
d Subtract line 6c from line 6b. Taxable amount - see instructions		NONE		
e Undistributed income for 2013. Subtract line 4a from line 2a Taxable amount - see instructions			NONE	
f Undistributed income for 2014 Subtract lines 4d and 5 from line 1. This amount must be distributed in 2015				NONE
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions)	NONE			
8 Excess distributions carryover from 2009 not applied on line 5 or line 7 (see instructions)	75,660.			
9 Excess distributions carryover to 2015. Subtract lines 7 and 8 from line 6a	427,838.			
10 Analysis of line 9.				
a Excess from 2010	86,091.			
b Excess from 2011	91,466.			
c Excess from 2012	81,159.			
d Excess from 2013	82,708.			
e Excess from 2014	86,414.			

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

NOT APPLICABLE

1a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2014, enter the date of the ruling

b Check box to indicate whether the foundation is a private operating foundation described in section 4942(j)(3) or 4942(j)(5)

	Tax year	Prior 3 years			(e) Total
	(a) 2014	(b) 2013	(c) 2012	(d) 2011	
2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed					
b 85% of line 2a					
c Qualifying distributions from Part XII, line 4 for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon					
a "Assets" alternative test - enter					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i).					
b "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties).					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii).					
(3) Largest amount of support from an exempt organization.					
(4) Gross investment income					

Part XV Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year - see instructions.)**1 Information Regarding Foundation Managers:**

a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2).)

N/A

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest.

N/A

2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here ☒ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d.

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

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

c Any submission deadlines:

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

Part XV Supplementary Information (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
SEE STATEMENT 32				211,264.
Total			3a	211,264.
b Approved for future payment				
Total			3b	

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated

Enter gross amounts unless otherwise indicated		Unrelated business income		Excluded by section 512, 513, or 514		(e)
		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions)
1 Program service revenue						
a _____						
b _____						
c _____						
d _____						
e _____						
f _____						
g Fees and contracts from government agencies						
2 Membership dues and assessments						
3 Interest on savings and temporary cash investments				14	3.	
4 Dividends and interest from securities				14	73,429.	
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	100,553.	
9 Net income or (loss) from special events						
10 Gross profit or (loss) from sales of inventory . .						
11 Other revenue. a _____						
b _____						
c _____						
d _____						
e _____						
12 Subtotal. Add columns (b), (d), and (e)					173,985.	
13 Total. Add line 12, columns (b), (d), and (e)					173,985.	173,985.

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

[illegible]

Schedule B(Form 990, 990-EZ,
or 990-PF)Department of the Treasury
Internal Revenue Service**Schedule of Contributors**

OMB No 1545-0047

2014▶ **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.irs.gov/form990

Name of the organization

Employer identification number

MERRILL FAMILY CHARITABLE FOUNDATION, INC.

22-3494040

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

Form 990-PF

☒ 501(c)(3) exempt private foundation☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation☐ 501(c)(3) taxable private foundationCheck 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**

- ☒
- For 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 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), 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 MERRILL FAMILY CHARITABLE FOUNDATION, INC.	Employer identification number 22-3494040
---	---

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	CHARLES E. MERRILL, JR. 5 CHESTNUT STREET BOSTON, MA 02108	\$ 30,000	Person <input checked="checked" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
			Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
			Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
			Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
			Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
			Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
			Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)

FORM 990PF, PART I - INTEREST ON TEMPORARY CASH INVESTMENTS
=====

DESCRIPTION -----	REVENUE AND EXPENSES PER BOOKS -----	NET INVESTMENT INCOME -----
FEDERATED GOVT OBLIGS TX-MGD INSTL	3.	3.
TOTAL	3.	3.
	=====	=====

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

=====

DESCRIPTION	REVENUE AND EXPENSES PER BOOKS	NET INVESTMENT INCOME
-----	-----	-----
ABBOTT LABS COM	1,100.	1,100.
ABBVIE INC	2,075.	2,075.
BAXTER INTERNATIONAL INC	2,374.	2,374.
BRISTOL MYERS SQUIBB CO COM	1,728.	1,728.
CAPITAL ONE FINL CORP COM	342.	342.
CATERPILLAR INC	1,430.	1,430.
CHEVRON CORP	3,889.	3,889.
CISCO SYSTEM INC COM	1,332.	1,332.
DU PONT E I DE NEMOURS & CO COM	2,760.	2,760.
GENERAL ELECTRIC CO	3,520.	3,520.
INTEL CORP	1,980.	1,980.
ISHARES MSCI EAFE (MKT)	11,512.	11,512.
JOHNSON & JOHNSON COM	4,000.	4,000.
MICROSOFT CORP COM	2,760.	2,760.
NEW YORK NY CITY TRAN FIN AUTH SCD BDS 2	802.	802.
NORFOLK SOUTHERN CORP COM	2,720.	2,720.
ORACLE CORP COM	576.	576.
PEPSICO INC COM	3,179.	3,179.
PFIZER INC	1,165.	1,165.
PROCTER & GAMBLE CO COM	3,099.	3,099.
QUALCOMM INC COM	2,415.	2,415.
SCHLUMBERGER LTD COM	2,144.	2,144.
STATE STREET CORP COM	700.	700.
SYSCO CORP COM	1,972.	1,972.
TIME WARNER CABLE INC	2,625.	2,625.
US BANCORP NEW	590.	590.
UNITED TECHNOLOGIES CORP COM	2,124.	2,124.
VANGUARD EMERGING MARKETS STOCK INDEX FU	1,967.	1,967.
VANGUARD EMERGING MARKETS FUND	353.	353.
VERIZON COMMUNICATIONS COM	1,391.	1,391.
WALGREEN CO COM	848.	848.
WELLS FARGO & COMPANY	1,283.	1,283.

8085225707

FCH466 958K 06/25/2015 12:11:43

STATEMENT 2

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

DESCRIPTION	REVENUE AND EXPENSES PER BOOKS	NET INVESTMENT INCOME
-----	-----	-----
XILINX INC COM	1,355.	1,355.
ZOETIS INC COM	102.	102.
ALLEGION PLC	117.	117.
INGERSOLL RAND PLC ADR	1,100.	1,100.
-----	-----	-----
TOTAL	73,429.	73,429.
	=====	=====

FORM 990PF, PART I - ACCOUNTING FEES

=====

DESCRIPTION -----	REVENUE AND EXPENSES PER BOOKS -----	NET INVESTMENT INCOME -----	ADJUSTED NET INCOME -----	CHARITABLE PURPOSES -----
TAX PREPARATION FEE	3,049.	1,525.		1,525.
	-----	-----	-----	-----
TOTALS	3,049.	1,525.	NONE	1,525.
	=====	=====	=====	=====

FORM 990PF, PART I - OTHER PROFESSIONAL FEES
=====

DESCRIPTION -----	REVENUE AND EXPENSES PER BOOKS -----	NET INVESTMENT INCOME -----	CHARITABLE PURPOSES -----
CUSTODIAN & MANAGEMENT FEES	27,915.	13,958.	13,958.
TOTALS	27,915.	13,958.	13,958.
	=====	=====	=====

FORM 990PF, PART I - TAXES

=====

DESCRIPTION	REVENUE AND EXPENSES PER BOOKS	NET INVESTMENT INCOME
-----	-----	-----
FOREIGN TAXES	996.	996.
FEDERAL TAX PAYMENT - PRIOR YE	1,099.	
FEDERAL ESTIMATES - PRINCIPAL	2,400.	
	-----	-----
TOTALS	4,495.	996.
	=====	=====

MERRILL FAMILY CHARITABLE FOUNDATION, INC. .
FORM 990PF, PART II - U.S. AND STATE OBLIGATIONS
=====

22-3494040

DESCRIPTION -----	ENDING BOOK VALUE -----	ENDING FMV ----
35000 NEW YOUR CITY TRAN FIN 2007A, 10/16/06 5.21% 8/1/17	38,068.	38,483.
	-----	-----
TOTALS	38,068.	38,483.
	=====	=====

FORM 990PF, PART II - CORPORATE STOCK

=====

DESCRIPTION	ENDING BOOK VALUE	ENDING FMV
-----	-----	----
1250 ABBOTT LABORATORIES INC C	31,309.	56,275.
1200 BRISTOL MYERS SQUIBB CO.	8,276.	70,836.
550 CATERPILLAR INC. COM	5,405.	50,342.
900 CHEVRON CORP COM	10,294.	100,962.
1500 DUPONT E I DE NEMOURS COM	36,563.	110,910.
4000 GENERAL ELECTRIC COM	10,630.	101,080.
1400 JOHNSON & JOHNSON COM	7,691.	146,398.
1225 NORFOLK SOUTHERN CORP COM	9,126.	134,272.
1120 PFIZER	19,617.	34,888.
1150 PROCTER & GAMBLE COM	71,447.	104,754.
650 VERIZON COMMUNICATIONS IN	5,310.	30,407.
1300 SCHLUMBERGER LTD	10,542.	111,033.
1100 INGERSOLL-RAND CO LTD A	8,263.	69,729.
1175 BAXTER INTL INC COM	65,478.	86,116.
1800 CISCO SYSTEMS INC COM	43,736.	50,067.
2200 INTEL CORP COM	44,964.	79,838.
2400 MICROSOFT CORP COM	63,283.	111,480.
1300 PEPSICO INC COM	85,980.	122,928.
1500 QUALCOMM INC COM	63,132.	111,495.
1700 SYSCO CORP COM	46,900.	67,473.
900 UNITED TECHNOLOGIES COM	59,029.	103,500.
825 TIME WARNER CABLE INC COM	44,347.	125,450.
500 US BANCORP DEL COM NEW	11,495.	22,475.
650 WALGREEN CO. COM	19,530.	49,530.
625 STATE STREET CORP COM	23,562.	49,063.
950 WELLS FARGO & CO	26,380.	52,079.
1210 XILINX INC	42,374.	52,381.
1040 CELGENE CORP	39,036.	116,334.
1200 ORACLE CORP	37,019.	53,964.

MERRILL FAMILY CHARITABLE FOUNDATION, INC.

22-3494040

FORM 990PF, PART II - CORPORATE STOCK

=====

DESCRIPTION	ENDING BOOK VALUE	ENDING FMV
-----	-----	----
1250 ABBVIE INC COM	33,951.	81,800.
353 ZOETIS INC COM	6,247.	15,190.
366 ALLEGION PUB LTD CO ORD SH	2,102.	20,298.
285 CAPITAL ONE FINANCIAL CORP	20,087.	23,527.
	-----	-----
TOTALS	1,013,105.	2,516,874.
	=====	=====

MERRILL FAMILY CHARITABLE FOUNDATION, INC.

22-3494040

FORM 990PF, PART II - OTHER INVESTMENTS

COST/
FMV

C OR F

DESCRIPTION

ENDING

BOOK VALUE

FMV

4750 ISHARES TR MSCI EAFE IND
2210.946 VANGUARD EMERGING MAR
STOCK INDEX ADM

C
C
C

377,625.

288,990.

77,165.

73,514.

TOTALS

454,790.

362,504.

MERRILL FAMILY CHARITABLE FOUNDATION, INC. .

22-3494040

FORM 990PF, PART VII-A, LINE 14 - BOOKS ARE IN THE CARE OF
=====

NAME: ELLEN C PECKHAM
% GOULSTON & STORRS
ADDRESS: 400 ATLANTIC AVENUE
BOSTON, MA 02110

TELEPHONE NUMBER: (617) 574-4033

STATEMENT 11

FORM 990PF, PART VII-B, LN 5(c) EXPENDITURE RESPONSIBILITY STATEMENT
=====

NAME:

THE TURIMIQUIRE FOUNDATION

ADDRESS:

16 CRESCENT ST.

CAMBRIDGE, MA 02138

GRANT DATE: 05/06/2014

GRANT AMOUNT 4,000.

GRANT PURPOSE:

THE TRANT FUNDS ARE TO BE USED FOR GENERAL SUPPORT

ANY DIVERSION BY GRANTEE:

TO OUR KNOWLEDGE, AND BASED ON THE REPORT FURNISHED BY THE GRANTEE,

NO PART HAS BEEN USED FOR OTHER THAN ITS INTENDED PURPOSE.

DATES OF REPORTS BY GRANTEE:

05/08/2015

DATE OF VERIFICATION: 05/08/2015

RESULTS OF VERIFICATION:

WE REVIEWED THE GRANTEE'S REPORT BUT DID NOT UNDERTAKE ANY VERIFICAT-
ION AS THERE HAS NOT BEEN ANY REASON TO DOUBT THEIR ACCURACY.

RECIPIENT NAME:

MONADNOCK MUSIC

ADDRESS:

2A CONCORD STREET

PETERBOROUGH, NH 03458

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

GENERAL

FOUNDATION STATUS OF RECIPIENT:

EXEMPT ORGANIZATION

AMOUNT OF GRANT PAID 4,000.

RECIPIENT NAME:

HISTORIC HARRISVILLE, INC

ADDRESS:

PO BOX 79

HARRISVILLE, NH 03450

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

GENERAL

FOUNDATION STATUS OF RECIPIENT:

EXEMPT ORGANIZATION

AMOUNT OF GRANT PAID 4,000.

RECIPIENT NAME:

BREAD FOR THE JOURNEY, INC

ADDRESS:

9 SANTA GABRIELLA CT.

NOVATO, CA 94945

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

GENERAL

FOUNDATION STATUS OF RECIPIENT:

EXEMPT ORGANIZATION

AMOUNT OF GRANT PAID 1,500.

RECIPIENT NAME:
CENTRAL SQUARE THEATER
ADDRESS:
450 MASSACHUSETTS AVE
CAMBRIDGE, MA 02139
RELATIONSHIP:
NONE
PURPOSE OF GRANT:
GENERAL
FOUNDATION STATUS OF RECIPIENT:
EXEMPT ORGANIZATION
AMOUNT OF GRANT PAID 5,000.

RECIPIENT NAME:
SOUTHERN UTAH WILDERNESS ALLIANCE
ADDRESS:
425 EAST 100 SOUTH
SALT LAKE CITY, UT 84111
RELATIONSHIP:
NONE
PURPOSE OF GRANT:
GENERAL
FOUNDATION STATUS OF RECIPIENT:
EXEMPT ORGANIZATION
AMOUNT OF GRANT PAID 2,000.

RECIPIENT NAME:
PLANNED PARENTHOOD MOHAWK HUDSON
ADDRESS:
1040 STATE STREET
SCHENECTADY, NY 12307
RELATIONSHIP:
NONE
PURPOSE OF GRANT:
FOR USE AT THE COBLESKILL HEALTH CENTER
FOUNDATION STATUS OF RECIPIENT:
EXEMPT ORGANIZATION
AMOUNT OF GRANT PAID 3,000.

RECIPIENT NAME:
WORLD MONUMENTS FUND
ADDRESS:
350 5TH AVE, SUITE 2412
NEW YORK, NY 10118
RELATIONSHIP:
NONE
PURPOSE OF GRANT:
GENERAL
FOUNDATION STATUS OF RECIPIENT:
NONE
AMOUNT OF GRANT PAID 3,000.

RECIPIENT NAME:
DIONONDEHOWA WILDLIFE SANCTUARY
ADDRESS:
148 STANTON RD
SHUSHAN, NY 12873
RELATIONSHIP:
NONE
PURPOSE OF GRANT:
GENERAL
FOUNDATION STATUS OF RECIPIENT:
EXEMPT ORGANIZATION
AMOUNT OF GRANT PAID 1,000.

RECIPIENT NAME:
INSTITUTE ON TAXATION AND ECONOMIC
POLICY
ADDRESS:
1616 P ST. NW, SUITE 200
WASHINGTON, DC 20036
RELATIONSHIP:
NONE
PURPOSE OF GRANT:
GENERAL
FOUNDATION STATUS OF RECIPIENT:
EXEMPT ORGANIZATION
AMOUNT OF GRANT PAID 2,000.

RECIPIENT NAME:
BAY AREA NVC
ADDRESS:
55 SANTA CLARA AVE, #203
OAKLAND, CA 94610-1319
RELATIONSHIP: `
NONE
PURPOSE OF GRANT:
GENERAL
FOUNDATION STATUS OF RECIPIENT:
EXEMPT ORGANIZATION
AMOUNT OF GRANT PAID 1,000.

RECIPIENT NAME:
SUSTAINABLE HARVEST INTERNATIONAL
ADDRESS:
779 N. BEND ROAD
SURRY, ME 04684
RELATIONSHIP:
NONE
PURPOSE OF GRANT:
GENERAL
FOUNDATION STATUS OF RECIPIENT:
EXEMPT ORGANIZATION
AMOUNT OF GRANT PAID 4,000.

RECIPIENT NAME:
CENTER FOR COMMUNITY CHANGE
ADDRESS:
1536 U ST. NW
WASHINGTON, DC 20009
RELATIONSHIP:
NONE
PURPOSE OF GRANT:
GENERAL
FOUNDATION STATUS OF RECIPIENT:
NONE
AMOUNT OF GRANT PAID 1,000.

RECIPIENT NAME:
JOURNEYS IN EDUCATION
ADDRESS:
26 MAIN STREET
PETERBOROUGH, NH 03458
RELATIONSHIP:
NONE
PURPOSE OF GRANT:
GENERAL
FOUNDATION STATUS OF RECIPIENT:
EXEMPT ORGANIZATION
AMOUNT OF GRANT PAID 5,000.

RECIPIENT NAME:
INSTITUTE FOR PUBLIC AFFAIRS
ADDRESS:
2040 N. MILWAUKEE AVE
CHICAGO, IL 60647
RELATIONSHIP:
NONE
PURPOSE OF GRANT:
BENEFIT IN THE TIME
FOUNDATION STATUS OF RECIPIENT:
EXEMPT ORGANIZATION
AMOUNT OF GRANT PAID 3,000.

RECIPIENT NAME:
SOCIAL JUSTICE CENTER
ADDRESS:
33 CENTRAL AVE
ALBANY, NY 12210
RELATIONSHIP:
NONE
PURPOSE OF GRANT:
GENERAL
FOUNDATION STATUS OF RECIPIENT:
EXEMPT ORGANIZATION
AMOUNT OF GRANT PAID 500.

RECIPIENT NAME:
OTSEGO COUNTY CONSERVATION ASSOCIATION
ADDRESS:
PO BOX 931
COOPERSTOWN, NY 13326-9968
RELATIONSHIP:
NONE
PURPOSE OF GRANT:
GENERAL
FOUNDATION STATUS OF RECIPIENT:
EXEMPT ORGANIZATION
AMOUNT OF GRANT PAID 1,000.

RECIPIENT NAME:
BREAST CANCER FUND
ADDRESS:
1388 SUTTER ST., SUITE 400
SAN FRANCISCO, CA 94109
RELATIONSHIP:
NONE
PURPOSE OF GRANT:
IN HONOR OF MERIJANE BLOCK
FOUNDATION STATUS OF RECIPIENT:
EXEMPT ORGANIZATION
AMOUNT OF GRANT PAID 1,000.

RECIPIENT NAME:
HAMPSHIRE COLLEGE
ADDRESS:
893 WEST STREET
AMHERST, MA 01002
RELATIONSHIP:
NONE
PURPOSE OF GRANT:
MERRIL SCHOLAR PROGRAM
FOUNDATION STATUS OF RECIPIENT:
EXEMPT ORGANIZATION
AMOUNT OF GRANT PAID 23,472.

MERRILL FAMILY CHARITABLE FOUNDATION, INC. . 22-3494040
FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID
=====

RECIPIENT NAME:
GOSHEN COLLEGE
ADDRESS:
1700 SOUTH MAIN STREET
GOSHEN, IN 46526
RELATIONSHIP:
NONE
PURPOSE OF GRANT:
MERRILL SCHOLAR PROGRAM
FOUNDATION STATUS OF RECIPIENT:
EXEMPT ORGANIZATION
AMOUNT OF GRANT PAID 18,000.

RECIPIENT NAME:
OTSEGO2000, INC.
ADDRESS:
PO BOX 1130
COOPERSTOWN, NY 13326
RELATIONSHIP:
NONE
PURPOSE OF GRANT:
EDUCATION
FOUNDATION STATUS OF RECIPIENT:
EXEMPT ORGANIZATION
AMOUNT OF GRANT PAID 1,000.

RECIPIENT NAME:
BROOKLYN YOUTH SPORTS CLUB, INC
ADDRESS:
9 WYCKOFF STREET, #1
BROOKLYN, NY 11201
RELATIONSHIP:
NONE
PURPOSE OF GRANT:
GENERAL
FOUNDATION STATUS OF RECIPIENT:
EXEMPT ORGANIZATION
AMOUNT OF GRANT PAID 1,000.

STATEMENT 19

RECIPIENT NAME:
BAYOU PRESERVATION ASSOCIATION
ADDRESS:
2651 COCONUT DR.
SANIBEL, FL 33957
RELATIONSHIP:
NONE
PURPOSE OF GRANT:
GENERAL
FOUNDATION STATUS OF RECIPIENT:
EXEMPT ORGANIZATION
AMOUNT OF GRANT PAID 500.

RECIPIENT NAME:
HUNTINGTON THEATRE COMPANY
ADDRESS:
264 HUNTINGTON AVE
BOSTON, MA 02115
RELATIONSHIP:
NONE
PURPOSE OF GRANT:
FOR EDUCATION PROGRAMS
FOUNDATION STATUS OF RECIPIENT:
EXEMPT ORGANIZATION
AMOUNT OF GRANT PAID 2,250.

RECIPIENT NAME:
COMMUNITY OF PEACE AND SPIRITUALITY
ADDRESS:
5 WEST 86TH STREET, #14C
New York, NY 10024
RELATIONSHIP:
NONE
PURPOSE OF GRANT:
FOR THE COMMUNITY MEDITATION CENTER
FOUNDATION STATUS OF RECIPIENT:
EXEMPT ORGANIZATION
AMOUNT OF GRANT PAID 2,000.

RECIPIENT NAME:
MORAVIAN COLLEGE
ADDRESS:
1200 MAIN STREET
BETHLEHEM, PA 18018
RELATIONSHIP:
NONE
PURPOSE OF GRANT:
TO THE INTERNATIONAL STUDENT AID FUND
FOUNDATION STATUS OF RECIPIENT:
EXEMPT ORGANIZATION
AMOUNT OF GRANT PAID 27,542.

RECIPIENT NAME:
MONADNOCK AREA TRANSITIONAL
SHELTERING, INC.
ADDRESS:
PO BOX 3053
PETERBOROUGH, NH 03458
RELATIONSHIP:
NONE
PURPOSE OF GRANT:
GENERAL
FOUNDATION STATUS OF RECIPIENT:
EXEMPT ORGANIZATION
AMOUNT OF GRANT PAID 500.

RECIPIENT NAME:
UNITED FOR A FAIR ECONOMY
ADDRESS:
ONE MILK STREET, 5TH FLOOR
BOSTON, MA 02109
RELATIONSHIP:
NONE
PURPOSE OF GRANT:
GENERAL
FOUNDATION STATUS OF RECIPIENT:
EXEMPT ORGANIZATION
AMOUNT OF GRANT PAID 1,000.

RECIPIENT NAME:
GUARDIAN ANGELS FOR SOLDIER'S PET
ADDRESS:
9725 FM 1783
GATESWILLE, TX 76528-4739
RELATIONSHIP:
NONE
PURPOSE OF GRANT:
IN RECOGNITION OF THE VOLUNTEER EFFORTS
FOUNDATION STATUS OF RECIPIENT:
EXEMPT ORGANIZATION
AMOUNT OF GRANT PAID 500.

RECIPIENT NAME:
SLOW FOOD USA
ADDRESS:
68 SUMMIT STREET, 2B
BROOKLYN, NY 11231
RELATIONSHIP:
NONE
PURPOSE OF GRANT:
SUPPORT TERRA MADRE CONFERENCE
FOUNDATION STATUS OF RECIPIENT:
EXEMPT ORGANIZATION
AMOUNT OF GRANT PAID 500.

RECIPIENT NAME:
PAVE
ADDRESS:
PO BOX 227
BENNINGTON, VT 05201
RELATIONSHIP:
NONE
PURPOSE OF GRANT:
GENERAL
FOUNDATION STATUS OF RECIPIENT:
EXEMPT ORGANIZATION
AMOUNT OF GRANT PAID 1,000.

RECIPIENT NAME:

SVIA

ADDRESS:

107 WATER STREET

STONINGTON, CT 06378

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

FOR JAMES MERRILL HOUSE PROGRAM

FOUNDATION STATUS OF RECIPIENT:

EXEMPT - ORGANIZATION

AMOUNT OF GRANT PAID 12,000.

RECIPIENT NAME:

WORCESTER FREE LIBRARY

ADDRESS:

PO BOX 461, 168 MAIN STREET

WORCESTER, NY 12197

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

GENERAL

FOUNDATION STATUS OF RECIPIENT:

EXEMPT - ORGANIZATION

AMOUNT OF GRANT PAID 4,500.

RECIPIENT NAME:

MONADNOCK CONSERVANCY

ADDRESS:

PO BOX 337

KEENE, NH 03431

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

GENERAL

FOUNDATION STATUS OF RECIPIENT:

EXEMPT ORGANIZATION

AMOUNT OF GRANT PAID 500.

RECIPIENT NAME:
TWLOHA
ADDRESS:
PO BOX 2203
MELBOURNE, FL 32902
RELATIONSHIP:
NONE
PURPOSE OF GRANT:
GENERAL
FOUNDATION STATUS OF RECIPIENT:
EXEMPT ORGANIZATION
AMOUNT OF GRANT PAID 1,000.

RECIPIENT NAME:
COMMUNITY MUSIC CENTER OF BOSTON
ADDRESS:
34 WARREN AVE
BOSTON, MA 02116
RELATIONSHIP:
NONE
PURPOSE OF GRANT:
GENERAL
FOUNDATION STATUS OF RECIPIENT:
EXEMPT ORGANIZATION
AMOUNT OF GRANT PAID 5,000.

RECIPIENT NAME:
NEW HAMPSHIRE CHARITABLE FOUNDATION
ADDRESS:
37 PLEASANT STREET
CONCORD, NH 03301
RELATIONSHIP:
NONE
PURPOSE OF GRANT:
GENERAL
FOUNDATION STATUS OF RECIPIENT:
EXEMPT ORGANIZATION
AMOUNT OF GRANT PAID 1,000.

RECIPIENT NAME:
NON-EVENT, INC
ADDRESS:
16 ROBERTS ST. #3
BROOKLINE, MA 02445
RELATIONSHIP:
NONE
PURPOSE OF GRANT:
GENERAL
FOUNDATION STATUS OF RECIPIENT:
EXEMPT ORGANIZATION
AMOUNT OF GRANT PAID 750.

RECIPIENT NAME:
THE PARK SCHOOL CORPORATION
ADDRESS:
171 GODDARD AVE
BROOKLINE, MA 02445
RELATIONSHIP:
NONE
PURPOSE OF GRANT:
GENERAL
FOUNDATION STATUS OF RECIPIENT:
EXEMPT ORGANIZATION
AMOUNT OF GRANT PAID 2,000.

RECIPIENT NAME:
TRINITY BOSTON FOUNDATION
ADDRESS:
206 CLARENDON ST
BOSTON, MA 02116
RELATIONSHIP:
NONE
PURPOSE OF GRANT:
GENERAL
FOUNDATION STATUS OF RECIPIENT:
EXEMPT ORGANIZATION
AMOUNT OF GRANT PAID 3,000.

MERRILL FAMILY CHARITABLE FOUNDATION, INC. . 22-3494040
FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID
=====

RECIPIENT NAME:
ACTORS SHAKESPEAR PROJECT
ADDRESS:
191 HIGHLAN AVE
SOMERVILLE, MA 02143
RELATIONSHIP:
NONE
PURPOSE OF GRANT:
GENERAL
FOUNDATION STATUS OF RECIPIENT:
EXEMPT ORGANIZATION
AMOUNT OF GRANT PAID 1,000.

RECIPIENT NAME:
BOSTON LYRIC OPERA COMPANY
ADDRESS:
11 AVENUE DE LAFAYETTE
BOSTON, MA 02111
RELATIONSHIP:
NONE
PURPOSE OF GRANT:
GENERAL
FOUNDATION STATUS OF RECIPIENT:
EXEMPT ORGANIZATION
AMOUNT OF GRANT PAID 1,000.

RECIPIENT NAME:
HANCOCK HISTORICAL SOCIETY
ADDRESS:
PO BOX 138
HANCOCK, NH 03449
RELATIONSHIP:
NONE
PURPOSE OF GRANT:
FOR BUILDING REPAIR
FOUNDATION STATUS OF RECIPIENT:
EXEMPT ORGANIZATION
AMOUNT OF GRANT PAID 2,000.

MERRILL FAMILY CHARITABLE FOUNDATION, INC. . 22-3494040
FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID
=====

RECIPIENT NAME:
COMMUNITY INITIATIVES
ADDRESS:
PO BOX 416
JOSHUA TREE, CA 92252
RELATIONSHIP:
NONE
PURPOSE OF GRANT:
FOR HARRISON HOUSE MUSIC AND ARTS
FOUNDATION STATUS OF RECIPIENT:
EXEMPT ORGANIZATION
AMOUNT OF GRANT PAID 500.

RECIPIENT NAME:
HIMALAYAN EDUCATION FUNDATION
ADDRESS:
PO BOX 268
HARRISVILLE, NH 03450
RELATIONSHIP:
NONE
PURPOSE OF GRANT:
GENERAL
FOUNDATION STATUS OF RECIPIENT:
EXEMPT ORGANIZATION
AMOUNT OF GRANT PAID 2,000.

RECIPIENT NAME:
HUBBARD HALL PROJECTS, INC.
ADDRESS:
25 E. MAIN ST.
CAMBRIDGE, NY 12816
RELATIONSHIP:
NONE
PURPOSE OF GRANT:
GENERAL
FOUNDATION STATUS OF RECIPIENT:
EXEMPT ORGANIZATION
AMOUNT OF GRANT PAID 1,000.

STATEMENT 27

RECIPIENT NAME:
INTERNATIONAL LABOR RIGHTS FORUM
ADDRESS:
1634 I STREET NW, SUITE 1001
WASHINGTON, DC 20006
RELATIONSHIP:
NONE
PURPOSE OF GRANT:
GENERAL
FOUNDATION STATUS OF RECIPIENT:
EXEMPT ORGANIZATION
AMOUNT OF GRANT PAID 2,000.

RECIPIENT NAME:
VOLCANO LOVE, INC.
ADDRESS:
524 BERGEN STREET
BROOKLYN, NY 11217
RELATIONSHIP:
NONE
PURPOSE OF GRANT:
GENERAL
FOUNDATION STATUS OF RECIPIENT:
EXEMPT ORGANIZATION
AMOUNT OF GRANT PAID 500.

RECIPIENT NAME:
GRAPEVINE FAMILY AND COMMUNITY RESOUCCE
ADDRESS:
PO BOX 637
ANTRIM, NH 03440
RELATIONSHIP:
NONE
PURPOSE OF GRANT:
GENERAL
FOUNDATION STATUS OF RECIPIENT:
EXEMPT ORGANIZATION
AMOUNT OF GRANT PAID 500.

RECIPIENT NAME:
AGRICULTURAL STEWARDSHIP
ASSOCIATION
ADDRESS:
2531 STATE ROUTE 40
GREENWICH, NY 12834
RELATIONSHIP:
NONE
PURPOSE OF GRANT:
GENERAL
FOUNDATION STATUS OF RECIPIENT:
EXEMPT ORGANIZATION
AMOUNT OF GRANT PAID 9,000.

RECIPIENT NAME:
UGLY DUCKLING PRESSE
ADDRESS:
232 THIRD ST. E303
BROOKLYN, NY 11215
RELATIONSHIP:
NONE
PURPOSE OF GRANT:
GENERAL
FOUNDATION STATUS OF RECIPIENT:
NONE
AMOUNT OF GRANT PAID 500.

RECIPIENT NAME:
INTERNATIONAL PLANNED PARENTHOOD
FEDERATION
ADDRESS:
125 MAIDEN LANE 9TH FL
New York, NY 10038-4730
RELATIONSHIP:
NONE
PURPOSE OF GRANT:
GENERAL
FOUNDATION STATUS OF RECIPIENT:
NONE
AMOUNT OF GRANT PAID 2,000.

RECIPIENT NAME:
TURIMIQUIRE FOUNDATION
ADDRESS:
16 CRESCENT STREET
CAMBRIDGE, MA 02138
RELATIONSHIP:
NONE
PURPOSE OF GRANT:
GENERAL
FOUNDATION STATUS OF RECIPIENT:
EXEMPT ORGANIZATION
AMOUNT OF GRANT PAID 4,000.

RECIPIENT NAME:
NORTH STAR FUND
ADDRESS:
520 EIGHTH AVE., 22ND FL
NEW YORK, NY 10018-6556
RELATIONSHIP:
NONE
PURPOSE OF GRANT:
GENERAL
FOUNDATION STATUS OF RECIPIENT:
EXEMPT ORGANIZATION
AMOUNT OF GRANT PAID 2,000.

RECIPIENT NAME:
BRANDEIS UNIVERSITY
ADDRESS:
PO BOX 591110
WALTHAM, MA 02454
RELATIONSHIP:
NONE
PURPOSE OF GRANT:
FOR ARTS COUNCIL 2014
FOUNDATION STATUS OF RECIPIENT:
EXEMPT ORGANIZATION
AMOUNT OF GRANT PAID 16,000.

RECIPIENT NAME:
CORPORATE ACCOUNTABILITY INT'L
ADDRESS:
10 MIKE STREET, SUITE 610
BOSTON, MA 02108-4608
RELATIONSHIP:
NONE
PURPOSE OF GRANT:
GENERAL
FOUNDATION STATUS OF RECIPIENT:
EXEMPT ORGANIZATION
AMOUNT OF GRANT PAID 3,000.

RECIPIENT NAME:
PROJECT RIGHT, INC.
ADDRESS:
39 WARREN AVE, #218
ROXBURY, MA 02119
RELATIONSHIP:
NONE
PURPOSE OF GRANT:
OUR PLACE THEATRE PROJECT
FOUNDATION STATUS OF RECIPIENT:
EXEMPT ORGANIZATION
AMOUNT OF GRANT PAID 4,000.

RECIPIENT NAME:
PLIMOTH PLANTATION, INC
ADDRESS:
PO BOX 1620
PLYMOUTH, MA 02360
RELATIONSHIP:
NONE
PURPOSE OF GRANT:
FOR THE MARY MERRILL INTERN SCHOLARSHIP
FOUNDATION STATUS OF RECIPIENT:
EXEMPT ORGANIZATION
AMOUNT OF GRANT PAID 2,500.

RECIPIENT NAME:
DOCTORS WITHOUT BORDERS
USA, INC.
ADDRESS:
333 SEVENTH AVE, 2ND FLOOR
NEW YORK, NY 10001
RELATIONSHIP:
NONE
PURPOSE OF GRANT:
GENERAL
FOUNDATION STATUS OF RECIPIENT:
EXEMPT ORGANIZATION
AMOUNT OF GRANT PAID 5,500.

RECIPIENT NAME:
COMMON CAUSE OF MASSACHUSETTS
ADDRESS:
14 BEACON ST.
BOSTON, MA 02108
RELATIONSHIP:
NONE
PURPOSE OF GRANT:
GENERAL
FOUNDATION STATUS OF RECIPIENT:
EXEMPT ORGANIZATION
AMOUNT OF GRANT PAID 500.

RECIPIENT NAME:
ZING FOUNDATION
ADDRESS:
330 WEST 34TH ST., SUITE 505
NEW YORK, NY 10018
RELATIONSHIP:
NONE
PURPOSE OF GRANT:
FOR THE BOLDER GIVING PROJECT
FOUNDATION STATUS OF RECIPIENT:
EXEMPT ORGANIZATION
AMOUNT OF GRANT PAID 750.

TOTAL GRANTS PAID: 211,264.
=====

**SCHEDULE D
(Form 1041)**Department of the Treasury
Internal Revenue Service**Capital Gains and Losses**

▶ Attach to Form 1041, Form 5227, or Form 990-T.

▶ Use Form 8949 to list your transactions for lines 1b, 2, 3, 8b, 9 and 10.

▶ Information about Schedule D and its separate instructions is at www.irs.gov/form1041

OMB No 1545-0092

2014

Name of estate or trust

MERRILL FAMILY CHARITABLE FOUNDATION, INC.

Employer identification number

22-3494040

Note: Form 5227 filers need to complete only Parts I and II.**Part I Short-Term Capital Gains and Losses - Assets Held One Year or Less**

See instructions for how to figure the amounts to enter on the lines below.

This form may be easier to complete if you round off cents to whole dollars.

	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gain or loss from Form(s) 8949, Part I, line 2, column (g)	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
1a Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b .				
1b Totals for all transactions reported on Form(s) 8949 with Box A checked				
2 Totals for all transactions reported on Form(s) 8949 with Box B checked				
3 Totals for all transactions reported on Form(s) 8949 with Box C checked				
4 Short-term capital gain or (loss) from Forms 4684, 6252, 6781, and 8824				4
5 Net short-term gain or (loss) from partnerships, S corporations, and other estates or trusts				5
6 Short-term capital loss carryover. Enter the amount, if any, from line 9 of the 2013 Capital Loss Carryover Worksheet				6 ()
7 Net short-term capital gain or (loss). Combine lines 1a through 6 in column (h). Enter here and on line 17, column (3) on the back ▶				7

Part II Long-Term Capital Gains and Losses - Assets Held More Than One Year

See instructions for how to figure the amounts to enter on the lines below.

This form may be easier to complete if you round off cents to whole dollars.

	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gain or loss from Form(s) 8949, Part II, line 2, column (g)	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
8a Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b .				
8b Totals for all transactions reported on Form(s) 8949 with Box D checked	52,724.	17,266.		35,458.
9 Totals for all transactions reported on Form(s) 8949 with Box E checked	94,684.	29,909.		64,775.
10 Totals for all transactions reported on Form(s) 8949 with Box F checked	320.			320.
11 Long-term capital gain or (loss) from Forms 2439, 4684, 6252, 6781, and 8824				11
12 Net long-term gain or (loss) from partnerships, S corporations, and other estates or trusts.				12
13 Capital gain distributions.				13
14 Gain from Form 4797, Part I.				14
15 Long-term capital loss carryover. Enter the amount, if any, from line 14 of the 2013 Capital Loss Carryover Worksheet				15 ()
16 Net long-term capital gain or (loss). Combine lines 8a through 15 in column (h). Enter here and on line 18a, column (3) on the back ▶				16 100,553.

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

Schedule D (Form 1041) 2014

JSA
4F1210 1 000

FCH466 958K 06/25/2015 12:11:43

8085225707

50

Part III Summary of Parts I and II**Caution: Read the instructions before completing this part.**

	(1) Beneficiaries' (see instr.)	(2) Estate's or trust's	(3) Total
17 Net short-term gain or (loss)	17		
18 Net long-term gain or (loss):			
a Total for year	18a		100,553.
b Unrecaptured section 1250 gain (see line 18 of the wrksht)	18b		
c 28% rate gain	18c		
19 Total net gain or (loss). Combine lines 17 and 18a. ▶	19		100,553.

Note: If line 19, column (3), is a net gain, enter the gain on Form 1041, line 4 (or Form 990-T, Part I, line 4a). If lines 18a and 19, column (2), are net gains, go to Part V, and do not complete Part IV. If line 19, column (3), is a net loss, complete Part IV and the **Capital Loss Carryover Worksheet**, as necessary.

Part IV Capital Loss Limitation

20 Enter here and enter as a (loss) on Form 1041, line 4 (or Form 990-T, Part I, line 4c, if a trust), the smaller of:	20	()
a The loss on line 19, column (3) or b \$3,000		

Note: If the loss on line 19, column (3), is more than \$3,000, or if Form 1041, page 1, line 22 (or Form 990-T, line 34), is a loss, complete the **Capital Loss Carryover Worksheet** in the instructions to figure your capital loss carryover.

Part V Tax Computation Using Maximum Capital Gains Rates

Form 1041 filers. Complete this part only if both lines 18a and 19 in column (2) are gains, or an amount is entered in Part I or Part II and there is an entry on Form 1041, line 2b(2), and Form 1041, line 22, is more than zero.

Caution: Skip this part and complete the **Schedule D Tax Worksheet** in the instructions if

- Either line 18b, col. (2) or line 18c, col. (2) is more than zero, or
- Both Form 1041, line 2b(1), and Form 4952, line 4g are more than zero.

Form 990-T trusts. Complete this part only if both lines 18a and 19 are gains, or qualified dividends are included in income in Part I of Form 990-T, and Form 990-T, line 34, is more than zero. Skip this part and complete the **Schedule D Tax Worksheet** in the instructions if either line 18b, col. (2) or line 18c, col. (2) is more than zero.

21 Enter taxable income from Form 1041, line 22 (or Form 990-T, line 34). . .	21		
22 Enter the smaller of line 18a or 19 in column (2) but not less than zero.	22		
23 Enter the estate's or trust's qualified dividends from Form 1041, line 2b(2) (or enter the qualified dividends included in income in Part I of Form 990-T) . .	23		
24 Add lines 22 and 23	24		
25 If the estate or trust is filing Form 4952, enter the amount from line 4g; otherwise, enter -0- . . . ▶	25		
26 Subtract line 25 from line 24. If zero or less, enter -0-	26		
27 Subtract line 26 from line 21. If zero or less, enter -0-	27		
28 Enter the smaller of the amount on line 21 or \$2,500	28		
29 Enter the smaller of the amount on line 27 or line 28	29		
30 Subtract line 29 from line 28. If zero or less, enter -0-. This amount is taxed at 0% ▶	30		
31 Enter the smaller of line 21 or line 26	31		
32 Subtract line 30 from line 26	32		
33 Enter the smaller of line 21 or \$12,150	33		
34 Add lines 27 and 30	34		
35 Subtract line 34 from line 33. If zero or less, enter -0-	35		
36 Enter the smaller of line 32 or line 35	36		
37 Multiply line 36 by 15% ▶	37		
38 Enter the amount from line 31	38		
39 Add lines 30 and 36	39		
40 Subtract line 39 from line 38. If zero or less, enter -0-	40		
41 Multiply line 40 by 20% ▶	41		
42 Figure the tax on the amount on line 27. Use the 2014 Tax Rate Schedule for Estates and Trusts (see the Schedule G instructions in the instructions for Form 1041)	42		
43 Add lines 37, 41, and 42	43		
44 Figure the tax on the amount on line 21. Use the 2014 Tax Rate Schedule for Estates and Trusts (see the Schedule G instructions in the instructions for Form 1041)	44		
45 Tax on all taxable income. Enter the smaller of line 43 or line 44 here and on Form 1041, Schedule G, line 1a (or Form 990-T, line 36) ▶	45		

Schedule D (Form 1041) 2014

Name(s) shown on return Name and SSN or taxpayer identification no not required if shown on other side

Social security number or taxpayer identification number

MERRILL FAMILY CHARITABLE FOUNDATION, INC.

22-3494040

Before you check Box D, E, or F below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either may show your basis (usually your cost) even if your broker did not report it to the IRS. Brokers must report basis to the IRS for most stock you bought in 2011 or later (and for certain debt instruments you bought in 2014 or later).

Part II Long-Term. Transactions involving capital assets you held more than 1 year are long term. For short-term transactions, see page 1.

Note. You may aggregate all long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the total directly on Schedule D, line 8a; you are not required to report these transactions on Form 8949 (see instructions).

You must check Box D, E, or F below. Check only one box. If more than one box applies for your long-term transactions, complete a separate Form 8949, page 2, for each applicable box. If you have more long-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

- ☒ (D) Long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see Note above)
☐ (E) Long-term transactions reported on Form(s) 1099-B showing basis was not reported to the IRS
☐ (F) Long-term transactions not reported to you on Form 1099-B

1	(a) Description of property (Example 100 sh XYZ Co)	(b) Date acquired (Mo, day, yr)	(c) Date sold or disposed (Mo, day, yr)	(d) Proceeds (sales price) (see instructions)	(e) Cost or other basis See the Note below and see Column (e) in the separate instructions	Adjustment, if any, to gain or loss If you enter an amount in column (g), enter a code in column (f) See the separate instructions		(h) Gain or (loss). Subtract column (e) from column (d) and combine the result with column (g)
						(f) Code(s) from instructions	(g) Amount of adjustment	
	460. CELGENE CORP	03/09/2012	12/22/2014	52,724.00	17,266.00			35,458.00
2 Totals. Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts). Enter each total here and include on your Schedule D, line 8b (if Box D above is checked), line 9 (if Box E above is checked), or line 10 (if Box F above is checked) ►				52,724.	17,266.			35,458.

Note. If you checked Box D above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See Column (g) in the separate instructions for how to figure the amount of the adjustment.

Name(s) shown on return Name and SSN or taxpayer identification no not required if shown on other side

Social security number or taxpayer identification number

MERRILL FAMILY CHARITABLE FOUNDATION, INC.

22-3494040

Before you check Box D, E, or F below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either may show your basis (usually your cost) even if your broker did not report it to the IRS. Brokers must report basis to the IRS for most stock you bought in 2011 or later (and for certain debt instruments you bought in 2014 or later).

Part II **Long-Term.** Transactions involving capital assets you held more than 1 year are long term. For short-term transactions, see page 1.

Note. You may aggregate all long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the total directly on Schedule D, line 8a; you are not required to report these transactions on Form 8949 (see instructions).

You must check Box D, E, or F below. Check only one box. If more than one box applies for your long-term transactions, complete a separate Form 8949, page 2, for each applicable box. If you have more long-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

☐ (D) Long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see Note above)

<input checked="" type="checkbox"/>	(E) Long-term transactions reported on Form(s) 1099-B showing basis was not reported to the IRS
-------------------------------------	--

(F) Long-term transactions not reported to you on Form 1099-B

1	(a) Description of property (Example 100 sh XYZ Co)	(b) Date acquired (Mo , day, yr)	(c) Date sold or disposed (Mo , day, yr)	(d) Proceeds (sales price) (see instructions)	(e) Cost or other basis See the Note below and see Column (e) in the separate instructions	Adjustment, if any, to gain or loss If you enter an amount in column (g), enter a code in column (f) See the separate instructions.		(h) Gain or (loss). Subtract column (e) from column (d) and combine the result with column (g)
						(f) Code(s) from instructions	(g) Amount of adjustment	
	500. US BANCORP NEW	06/15/2010	01/31/2014	19,950.00	11,495.00			8,455.00
	100. CHEVRON CORP	10/10/2001	04/24/2014	12,441.00	1,144.00			11,297.00
	150. PROCTER & GAMBLE CO C	06/13/2007	04/24/2014	12,046.00	9,319.00			2,727.00
	250 SCHLUMBERGER LTD COM	04/04/1997	04/24/2014	25,469.00	2,027.00			23,442.00
	100. JOHNSON & JOHNSON COM	04/04/1997	08/11/2014	10,128.00	549.00			9,579.00
	100. TIME WARNER CABLE INC	04/05/2010	08/11/2014	14,650.00	5,375.00			9,275.00
2 Totals. Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts) Enter each total here and include on your Schedule D, line 8b (if Box D above is checked), line 9 (if Box E above is checked), or line 10 (if Box F above is checked) ▶				94,684.	29,909.			64,775.

Note. If you checked Box D above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See *Column (g)* in the separate instructions for how to figure the amount of the adjustment.

Form **8949** (2014)

Name(s) shown on return Name and SSN or taxpayer identification no. not required if shown on other side

Social security number or taxpayer identification number

MERRILL FAMILY CHARITABLE FOUNDATION, INC.

22-3494040

Before you check Box D, E, or F below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either may show your basis (usually your cost) even if your broker did not report it to the IRS. Brokers must report basis to the IRS for most stock you bought in 2011 or later (and for certain debt instruments you bought in 2014 or later).

Part II Long-Term. Transactions involving capital assets you held more than 1 year are long term. For short-term transactions, see page 1.

Note. You may aggregate all long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the total directly on Schedule D, line 8a; you are not required to report these transactions on Form 8949 (see instructions).

You must check Box D, E, or F below. Check only one box. If more than one box applies for your long-term transactions, complete a separate Form 8949, page 2, for each applicable box. If you have more long-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

- ☐ (D) Long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see Note above)
- ☐ (E) Long-term transactions reported on Form(s) 1099-B showing basis was not reported to the IRS
- ☒ (F) Long-term transactions not reported to you on Form 1099-B

1	(a) Description of property (Example 100 sh XYZ Co)	(b) Date acquired (Mo, day, yr)	(c) Date sold or disposed (Mo, day, yr)	(d) Proceeds (sales price) (see instructions)	(e) Cost or other basis. See the Note below and see Column (e) in the separate instructions	Adjustment, if any, to gain or loss If you enter an amount in column (g), enter a code in column (f). See the separate instructions.		(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
						(f) Code(s) from instructions	(g) Amount of adjustment	
	AMERICAN INTERNATIONAL G LITIGATION		01/07/2014	320.00				320.00
2 Totals. Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts). Enter each total here and include on your Schedule D, line 8b (if Box D above is checked), line 9 (if Box E above is checked), or line 10 (if Box F above is checked) ▶				320.				320.

Note. If you checked Box D above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See Column (g) in the separate instructions for how to figure the amount of the adjustment.

Form **8868**

(Rev. 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.irs.gov/form8868.

OMB No 1545-1709

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box ☒ **X**
- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form).

Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.

Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of 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 www.irs.gov/efile and click on *e-file for Charities & Nonprofits*.

Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed).

A corporation required to file Form 990-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 income tax returns

Enter filer's identifying number, see instructions

**Type or
print**File by the
due date for
filing your
return. See
instructions

Name of exempt organization or other filer, see instructions

MERRILL FAMILY CHARITABLE FOUNDATION,
INC. % LOCKE LORD LLP

Number, street, and room or suite no. If a P.O. box, see instructions

P.O. BOX 990129

City, town or post office, state, and ZIP code. For a foreign address, see instructions.

BOSTON, MA 02199-0129

Employer identification number (EIN) or

22-3494040

Social security number (SSN)

Enter the Return code for the return that this application is for (file a separate application for each return) 0 4

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 4720 (individual)	03	Form 4720 (other than individual)	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

- The books are in the care of ► ELLEN C. PECKHAM

Telephone No. ► (617) 239-0195

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 it 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 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until 08/17, 20 15, to file the exempt organization return for the organization named above. The extension is for the organization's return for:
- ☒ calendar year 2014 or
- ☐ tax year beginning _____, 20____, and ending _____, 20____.

- 2 If the tax 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 Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a \$	1,575.
b If this application is for Form 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 \$	2,400.
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 \$	

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 instructions.

For Privacy Act and Paperwork Reduction Act Notice, see instructions.

Form **8868** (Rev. 1-2014)

JSA

4F8054 1 000

BWR275 6260 04/21/2015 11:35:23

8085225707

1 +