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# SCANNED MAY 20 2010

Form **990-PF** 

# **Return of Private Foundation**

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

2009

OMB No 1545-0052

		t of the Treasury venue Service	N	lote. The found		Freated as a Priva be able to use a copy of the			orting requirements	2009
For	calen	dar year 2009	, or tax yea	r beginning			, and e	ending		
G	heck	all that apply		Initial return Amended reti	ıın	Initial return of a	•	charity	Final return Name change	1
	the	ino	foundation		-				A Employer identification	number
Oth	label. Ierwi:	<sub>se,</sub> Jewet				ank Foundat	ion Inc	<del></del>	13-4242396	
	print r type			o box number if	mail is not de	elivered to street address)		Room/suite	860-376-44	44
	Spec ructio	are I city or to		nd ZIP code					C If exemption application is p	_
		pewet		y, CT	0635				D 1. Foreign organizations 2. Foreign organizations me check here and attach co	s, check here
H	_	type of organi: ction 4947(a)(1				empt private foundation Other taxable private four	ndation			
l Fa		rket value of al			Accounti	<u>,                                    </u>		rual	E If private foundation sta under section 507(b)(1)	
		Part II, col (c)		,		ther (specify)			F If the foundation is in a	
_	\$				Part I, colu	mn (d) must be on cas	h basis.)		under section 507(b)(1)	
Pa	art I	Analysis of F (The total of am necessanly equ	iounts in colu	<b>1d Expenses</b> Imns (b), (c), and ( nts in column (a))	d) may not	(a) Revenue and expenses per books		nvestment come	(c) Adjusted net income	(d) Disbursements for chantable purposes (cash basis only)
	1	Contributions						******************************	N/A	
	2	Check X	if the foundation	on is not required to a	tach Sch B	422		A 7 7		
	3	Interest on savin				38,227		477. 38,227.		Statement 1 Statement 2
	4 50	Dividends and	interest fro	om securities		30,221	•	00,221	•	Statement 2
	b	Gross rents Net rental incom	e or (loss)						-	
_		Net gain or (loss)	· · · -	assets not on line	e 10		···		· · · · · · · · · · · · · · · · · · ·	***************************************
Revenue	b	Gross sales processets on line 6a	e for all							
leve	7	Capital gain net	income (from	Part IV, line 2)				0	•	
ш	8	Net short-tern		ın		**************************************	- <b>,  </b>			,,
	9	Income modif Gross sales less		I						
	10a h	and allowances Less Cost of go	ode sold			· · · · · · · · · · · · · · · · · · ·	<del>                                     </del>	<del>:.</del>	,	
	1	Gross profit o		L						
	11	Other income								
_	12	Total. Add lin	es 1 throug	ıh 11		38,704	+	38,704		
	13	•		ectors, trustees, o	etc	0	•	0	•	0.
	14	Other employe		•			<del>                                     </del>		RECEIVED	<del>h · · · · · · · · · · · · · · · · · · ·</del>
es	15	Pension plans Legal fees	, employee	Denents					RECEIVED	<del>} </del>
ens	h	Accounting te	es				<del>                                     </del>	-  -		<u> </u>
Š	C	Other professi						4	MAY 1 7 2010	<b>1</b> 1
. <u>.</u>	17	Interest							D D	
trat	18	Taxes		Stm	ıt 3	340	•	0(	OGDEN UT	0.
inis	19	Depreciation a	ind depletio	on						
E	20	Occupancy		•					<del> </del> -	
δĀ	21	Travel, conference Printing and p		•			<del></del>		<del></del>	
gar	23	Other expense			it 4	50		50		0.
Operating and Administrative Expenses	24	Total operatir			- <del>-</del>					
per				through 23		390		50	•	0.
0	25	Contributions				48,150	•			48,150.
	26	Total expense		oursements.		40 540		F 0		40 150
_	27	Add lines 24 a		. 10		48,540	<del>-</del>	50	•	48,150.
	1	Subtract line 2			amon*-	-9,836				
	1	Net investme	•					38,654	•	
	C	Adjusted net							N/A	
9235	01				_					

Jewett City Savings Bank Foundation Inc. Form 990-PF (2009) Balance Sheets Attached schedules and amounts in the description Beginning of year (a) Book Value (b) Book Value 6,478. 5,018. 1 Cash - non-interest-bearing 16,331. 46,408. 2 Savings and temporary cash investments 3 Accounts receivable ► Less allowance for doubtful accounts 4 Pledges receivable Less allowance for doubtful accounts 5 Grants receivable 6 Receivables due from officers, directors, trustees, and other disqualified persons 7 Other notes and loans receivable Less allowance for doubtful accounts 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Investments - U.S. and state government obligations Stmt 5 458,400. 513,988. 526,818. **b** Investments - corporate stock 222,632. 223,787. 232,332. Stmt 6 c Investments - corporate bonds 11 Investments - land, buildings, and equipment basis Less accumulated depreciation 12 Investments - mortgage loans Stmt 7 292,000. 196,000. 200,690. 13 Investments - other 14 Land, buildings, and equipment basis Less accumulated depreciation Statement 8) 12,628. 10,512. 10,512. 15 Other assets (describe 1,007,009. 997,173. 1,023,238. 16 Total assets (to be completed by all filers) 17 Accounts payable and accrued expenses 10,000. 5,000. 18 Grants payable 19 Deferred revenue 20 Loans from officers, directors, trustees, and other disqualified persons 21 Mortgages and other notes payable 22 Other liabilities (describe 10,000. 5,000. 23 Total liabilities (add lines 17 through 22) **▶** X Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31. **Assets or Fund Balances** 997,009. 992,173. 24 Unrestricted 25 Temporarily restricted 26 Permanently restricted Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. 27 Capital stock, trust principal, or current funds 28 Paid-in or capital surplus, or land, bldg, and equipment fund 29 Retained earnings, accumulated income, endowment, or other funds 997,009. 992,173. 30 Total net assets or fund balances 1,007,009. 997,173

### Part III Analysis of Changes in Net Assets or Fund Balances

31 Total liabilities and net assets/fund balances

1	Total net assets or fund balances at beginning of year - Part II, column (a), line 30	$\Box$	
·	(must agree with end-of-year figure reported on prior year's return)	1	997,009.
2	Enter amount from Part I, line 27a	2	-9,836.
3	Other increases not included in line 2 (itemize)   Change in grants payable	3	5,000.
4	Add lines 1, 2, and 3	4	992,173.
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	992,173.

Jewett City Savings Bank Foundation Inc. 13-4242396 Form 990-PE (2009) **Capital Gains and Losses for Tax on Investment Income** Part IV (b) How acquired P - Purchase D - Donation (a) List and describe the kind(s) of property sold (e.g., real estate, (c) Date acquired (d) Date sold 2-story brick warehouse, or common stock, 200 shs. MLC Co ) (mo , day, yr ) (mo , day, yr ) 1a NONE b đ e (h) Gain or (loss) (f) Depreciation allowed (g) Cost or other basis (e) Gross sales price (or allowable) (e) plus (f) minus (g) plus expense of sale d 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 (i) 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 (i), if any b 6

If gain, also enter in Part I, line 7 2 Capital gain net income or (net capital loss) If (loss), enter -0- in Part I, line 7 3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6)

If gain, also enter in Part I, line 8, column (c) If (loss), enter -0- in Part I, line 8

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?

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 instructions before making any entries

(d)
Distribution ratio
(col (b) divided by col (c)) (a)
Base period years (c) Net value of noncharitable-use assets Adjusted qualifying distributions Calendar year (or tax year beginning in) 1,007,778. .049343 49,727. 2008 1,006,075. 51,393. .051083 2007 832,248. .050396 41,942. 2006 634,428. .062155 39,433. 2005 .031709 16,800. 529,823. 2004

2

2 Total of line 1, column (d) 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

Enter the net value of noncharitable-use assets for 2009 from Part X, line 5

6 Enter 1% of net investment income (1% of Part I, line 27b)

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

2		2	4	4	6	8	6

.048937

Yes X No

1,017,571. 4

3

49,797. 5

387 6

U	3071
7	50,184.

48,150.

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7 Add lines 5 and 6

Multiply line 4 by line 3

See the Part VI instructions

	990-PF(2009) Jewett City Savings Bank Found				24239		Page 4
	Excise Tax Based on Investment Income (Section 494)		1940(e), or 4	948 -	see instr	<u>uctio</u>	ns)
1a	Exempt operating foundations described in section 4940(d)(2), check here 🕨 🔙 and ei	nter "N/A" on line 1.	)	ł			
	Date of ruling or determination letter (attach copy of letter if nec	essary-see instructi	ons)				
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here			1		7	73.
	of Part I, line 27b	•••		`	w.		
C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4%	of Part I, line 12, co	ı (b) 📗				
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Of	thers enter -0-)		2			0.
3	Add lines 1 and 2			3		7	73.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only O	thers enter -0-)		4			0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	·		5		7	73.
6	Credits/Payments				***************************************		
_	2009 estimated tax payments and 2008 overpayment credited to 2009	6a	440.				
	Exempt foreign organizations - tax withheld at source	6b					
	Tax paid with application for extension of time to file (Form 8868)	6c					
	Backup withholding erroneously withheld	6d					
7	Total credits and payments Add lines 6a through 6d		-	7		4	40.
_	Enter any <b>penalty</b> for underpayment of estimated tax. Check here if Form 2220 is atta	chad		8			
8	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	Cited		9		3	33.
9 10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			10			33.
10			Refunded >	11			
	Enter the amount of line 10 to be Credited to 2010 estimated tax  **t VII-A Statements Regarding Activities		neighber				
	During the tax year, did the foundation attempt to influence any national, state, or local legis	lation or did it nartic	nate or intervene	ın		Yes	No
ıa	any political campaign?	siation of the it partic	ipate of intervene	""	1a	1.03	X
_	, · · · · · ·	ana (ann instructions	for definition\2		1b	+	X
D	Did it spend more than \$100 during the year (either directly or indirectly) for political purpos				10	<del> </del>	
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and	a copies of any ma	nenais publishe	a or			
	distributed by the foundation in connection with the activities.						X
	Did the foundation file Form 1120-POL for this year?				10	+	1
a	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the	•	0.				
	(1) On the foundation > \$ (2) On foundation managers						1
е	Enter the reimbursement (if any) paid by the foundation during the year for political expending	iture tax imposed on	Touridation				
_	managers ▶\$	200					x
2	Has the foundation engaged in any activities that have not previously been reported to the II	H97			2	+-	
_	If "Yes," attach a detailed description of the activities						
3	Has the foundation made any changes, not previously reported to the IRS, in its governing		of incorporation, o	or	_	İ	U
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the change				3	<del> </del>	X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year	ary		N/	/ n   4a	-	
	If "Yes," has it filed a tax return on Form 990-T for this year?	_		14 /		-	<del> </del>
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	?			5		X
	If "Yes," attach the statement required by General Instruction T						
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied e	ither					
	By language in the governing instrument, or						
	ullet By state legislation that effectively amends the governing instrument so that no mandator	ry directions that con	flict with the state	law			1
	remain in the governing instrument?				6_	<b>_</b>	<u>X</u>
7	Did the foundation have at least \$5,000 in assets at any time during the year?				7	X	<b>↓</b>
	If "Yes," complete Part II, col. (c), and Part XV	_					
8a	Enter the states to which the foundation reports or with which it is registered (see instruction	ons) 🕨					
	CT						
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the A	Attorney General (or o	designate)				
	of each state as required by General Instruction G? If "No," attach explanation				. 8b	X	<u> </u>
9	Is the foundation claiming status as a private operating foundation within the meaning of se	ection 4942(j)(3) or 4	1942(j)(5) for cale	ndar	ļ.		
	year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If "Yes," of	complete Part XIV			9		X
10	Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedu	ule listing their names ar	d addresses		10		X

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Part VII-B Statements Regarding Activities for Which F			13-42423	96 Page 6
<u> </u>	UTITI 41 ZU IVIAY DE F	required (contin	<del>000)</del>	
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\\2	┌ va	s X No	
(2) Influence the outcome of any specific public election (see section 4955), or				
any voter registration drive?	to carry on, encour, or mane		s X No	
(3) Provide a grant to an individual for travel, study, or other similar purposes?	,		s X No	
(4) Provide a grant to an organization other than a charitable, etc., organization				
509(a)(1), (2), or (3), or section 4940(d)(2)?		. 🔲 Ye	s X No	
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or f	or	•	
the prevention of cruelty to children or animals?		Ye	s X No	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	er the exceptions described i	n Regulations	. [	
section 53 4945 or in a current notice regarding disaster assistance (see instru	ctions)?		N/A	5b
Organizations relying on a current notice regarding disaster assistance check he	ere		▶□ ∤	
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr				
expenditure responsibility for the grant?	N	I/A Ye	s 🔲 No	
If "Yes," attach the statement required by Regulations section 53.4945	5-5(d)			
6a Did the foundation, during the year, receive any funds, directly or indirectly, to p	pay premiums on			
a personal benefit contract?		Ye	s X No	
<b>b</b> Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?		. [,	6b X
If "Yes" to 6b, file Form 8870				
7a At any time during the tax year, was the foundation a party to a prohibited tax s	helter transaction?	Ye	s X No	
b If yes, did the foundation receive any proceeds or have any net income attributa				7b
Part VIII Information About Officers, Directors, Trusto	ees, Foundation Ma	nagers, Highly	<i>(</i>	
Paid Employees, and Contractors  1 List all officers, directors, trustees, foundation managers and their				<del></del>
List all Officers, directors, trustees, foundation managers and their	(b) Title, and average	(c) Compensation	(d) Contributions to	(a) Evnansa
(a) Name and address	hours per week devoted	(If not paid,	(d) Contributions to employee benefit plans and deterred	(e) Expense account, other
	to position	enter -0-)	compensation	allowances
See Statement 9		0.	0.	0.
Dec Beacement 7				
		1		
				•
2 Compensation of five highest-paid employees (other than those inc	·	enter "NONE."	7.5	
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average	(c) Compensation	(d) Contributions to employee benefit plans	(e) Expense account, other
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) compensation	and deferred compensation	allowances
NONE				
				1)
Total number of other employees paid over \$50,000	<u> </u>		. ▶	0

Form 990-PE (2009) Jewett City Savings Bank Foundation		4242396 Page 7
Part VIII Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)		
3 Five highest-paid independent contractors for professional services. If none, enter "NO	NE."	
(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		<u>▶</u> 0
Part IX-A Summary of Direct Charitable Activities		<u></u>
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical in number of organizations and other beneficiaries served, conferences convened, research papers produced,	formation such as the etc	Expenses
1 N/A	<del></del>	
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	I and 2	Amount
1 N/A		
	<u></u>	_
2		
All other program-related investments See instructions  3		
		_
Total. Add lines 1 through 3	<b>&gt;</b>	0.

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Form 990-PE (2009) Page 8 Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.) Part X Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes 906,886. a Average monthly fair market value of securities 1a 126,181. b Average of monthly cash balances 1b c Fair market value of all other assets 1c 1,033,067. 1d Total (add lines 1a, b, and c) Reduction claimed for blockage or other factors reported on lines 1a and 0. 1c (attach detailed explanation) 1e Acquisition indebtedness applicable to line 1 assets 1,033,067. 3 Subtract line 2 from line 1d 3 15,496. Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions) 4 1,017,571. Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4. 5 5 50,879. Minimum investment return. Enter 5% of line 5 Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain Part XI foreign organizations check here and do not complete this part ) 50,879. Minimum investment return from Part X, line 6 773. Tax on investment income for 2009 from Part VI, line 5 b Income tax for 2009 (This does not include the tax from Part VI) 2c c Add lines 2a and 2b 3 Distributable amount before adjustments Subtract line 2c from line 1 Recoveries of amounts treated as qualifying distributions 4 5 Add lines 3 and 4 6 Deduction from distributable amount (see instructions) 7 50,106 Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1 Part XII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes 48,150. a Expenses, contributions, gifts, etc - total from Part I, column (d), line 26 1a 1b b Program-related investments - total from Part IX-B 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 3a a Suitability test (prior IRS approval required) 3b **b** Cash distribution test (attach the required schedule) 48,150. 4 Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment

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

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5

income Enter 1% of Part I, line 27b

Adjusted qualifying distributions. Subtract line 5 from line 4

4940(e) reduction of tax in those years

# Part XIII Undistributed Income (see instructions)

<del></del>			····.	
	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
4. Distributable amount for 2000 from Dark VI	Colhas	rears prior to 2000	2000	2003
1 Distributable amount for 2009 from Part XI, line 7				50,106.
2 Undistributed income, if any, as of the end of 2009		***************************************	. '	
a Enter amount for 2008 only			0.	
b Total for prior years		***************************************		<del>«************************************</del>
y total tel pilot years		0.		
3 Excess distributions carryover, if any, to 2009		······································		**************************************
a From 2004				
<b>b</b> From 2005				
<b>c</b> From 2006				
d From 2007 1,304.				
e From 2008 184.				
f Total of lines 3a through e	1,488.			
4 Qualifying distributions for 2009 from				
Part XII, line 4 ► \$ 48,150.				
a Applied to 2008, but not more than line 2a			0.	
b Applied to undistributed income of prior				., 1-1-11
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2009 distributable amount		11111		48,150.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2009 (If an amount appears in column (d), the same amount must be shown in column (a) )	1,488.			1,488.
6 Enter the net total of each column as indicated below				
	0.			
a Corpus Add lines 31, 4c, and 4e Subtract line 5 b Prior years' undistributed income Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years'				
undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b Taxable				
amount - see instructions		0.		
e Undistributed income for 2008. Subtract line				
4a from line 2a Taxable amount - see instr			0.	
1 Undistributed income for 2009 Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2010				468.
7 Amounts treated as distributions out of			•	
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2004				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2010.				
Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9				
a Excess from 2005				
b Excess from 2006				
c Excess from 2007				
d Excess from 2008				
e Excess from 2009			<u> </u>	

	City Saving				42396 Page 10
Part XIV Private Operating F			-A, question 9)	N/A	
1 a If the foundation has received a ruling					
foundation, and the ruling is effective for		•	. •	1	
b Check box to indicate whether the foun		ig foundation described i		J 4942(j)(3) or 49	)42(J)(5)
2 a Enter the lesser of the adjusted net	Tax year (a) 2009	(b) 2008	Prior 3 years (c) 2007	(d) 2006	(e) Total
income from Part I or the minimum	(a) 2009	(D) 2000	(6) 2007	(4) 2000	(6) 10(3)
investment return from Part X for					
each year listed					
<b>b</b> 85% of line 2a				<del> </del>	
<ul> <li>Qualifying distributions from Part XII,</li> </ul>					
line 4 for each year listed				<del></del>	
d Amounts included in line 2c not					
used directly for active conduct of exempt activities					
e Qualifying distributions made directly					
for active conduct of exempt activities					
Subtract line 2d from line 2c  Complete 3a, b, or c for the alternative test relied upon a "Assets" alternative test - enter (1) Value of all assets					
(2) Value of assets qualifying under section 4942(i)(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	<u> </u>	<u> </u>			<u> </u>
Part XV Supplementary Info			if the foundation	n had \$5,000 or mo	ore in assets
1 Information Regarding Foundati	on Managers:		<del></del>		
a List any managers of the foundation w year (but only if they have contributed			ributions received by the	e foundation before the clo	se of any tax
None		<del></del>			
b List any managers of the foundation w other entity) of which the foundation h			or an equally large port)	ion of the ownership of a p	artnership or
None					
2 Information Regarding Contribu Check here  ☐ if the foundation the foundation makes gifts, grants, etc.	only makes contributions	to preselected charitable	organizations and does	•	
a The name, address, and telephone nur	<u> </u>			,	
	inder of the person to whole	n applications should be	ad0103300		
See Statement 10  b The form in which applications should	be submitted and informa	tion and materials they st	nould include:		
c Any submission deadlines:			<del></del>		
d Any restrictions or limitations on award	is, such as by geographic	al areas, charitable fields,	kinds of institutions, or	other factors:	

Page 11

Part XV Supplementary Informatio				<del></del>
3 'Grants and Contributions Paid During the	Year or Approved for Future	Payment_	-	
Recipient  Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
a Paid during the year	or substantial contributor	recipient		
a Paid during the year				
				İ
See Statement 11				40.150
Total	Т	<u> </u>	<b>▶</b> 3a	48,150
b Approved for future payment				
<b>&gt;</b>				
None				
Total			<b>▶</b> 3h	0

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

inter gross amounts unless otherwise indicated  1 Program service revenue:	(a) Business code	(b) Amount	(C) Exclu- sion code	(d) Amount	(e) Related or exempt function income
_	Code		+		
b	-	<del></del>	+		
			+-1	-	
d	l l				<del></del>
e			1		
1			11		<del></del>
g Fees and contracts from government agencies		-			
2 Membership dues and assessments					
Interest on savings and temporary cash					
investments			14	477.	
Dividends and interest from securities			14	477. 38,227.	
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					<u>.</u> .
property					
7 Other investment income					
8 Gain or (loss) from sales of assets other					
than inventory					
9 Net income or (loss) from special events					<del> </del>
O Gross profit or (loss) from sales of inventory					
1 Other revenue					· <del></del>
a					
			Ĭ		
b	_				
b	_				
C	_				
c d	_	0		38,704.	0.
c d e Subtotal Add columns (b), (d), and (e)	_	0	•	38,704.	20 524
c d e 2 Subtotal Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e)	_	0	•		20 524
c d e 2 Subtotal Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations )				13	20 524
c d e 2 Subtotal Add columns (b), (d), and (e) 3 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 the Acc	omplishment of E	Exemp	t Purposes	38,704.
c d e 2 Subtotal Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations ) Part XVI-B Relationship of Activities Line No. Explain below how each activity for which inc	to the Accome is reported	omplishment of E	Exemp	t Purposes	38,704.
c d e 2 Subtotal Add columns (b), (d), and (e) 3 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 the Accome is reported	omplishment of E	Exemp	t Purposes	38,704.
c d e 2 Subtotal Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations ) Part XVI-B Relationship of Activities Line No. Explain below how each activity for which inc	to the Accome is reported	omplishment of E	Exemp	t Purposes	38,704.
c d e 2 Subtotal Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations ) Part XVI-B Relationship of Activities Line No. Explain below how each activity for which inc	to the Accome is reported	omplishment of E	Exemp	t Purposes	38,704.
c d e 2 Subtotal Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations ) Part XVI-B Relationship of Activities Line No. Explain below how each activity for which inc	to the Accome is reported	omplishment of E	Exemp	t Purposes	38,704.
c d e 2 Subtotal Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations ) Part XVI-B Relationship of Activities Line No. Explain below how each activity for which inc	to the Accome is reported	omplishment of E	Exemp	t Purposes	38,704.
c d e 2 Subtotal Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations ) Part XVI-B Relationship of Activities Line No. Explain below how each activity for which inc	to the Accome is reported	omplishment of E	Exemp	t Purposes	38,704.
c d e 2 Subtotal Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations ) Part XVI-B Relationship of Activities Line No. Explain below how each activity for which inc	to the Accome is reported	omplishment of E	Exemp	t Purposes	38,704.
c d e 2 Subtotal Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations ) Part XVI-B Relationship of Activities Line No. Explain below how each activity for which inc	to the Accome is reported	omplishment of E	Exemp	t Purposes	38,704.
c d e 2 Subtotal Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations ) Part XVI-B Relationship of Activities Line No. Explain below how each activity for which inc	to the Accome is reported	omplishment of E	Exemp	t Purposes	38,704.
c d e 2 Subtotal Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations ) Part XVI-B Relationship of Activities Line No. Explain below how each activity for which inc	to the Accome is reported	omplishment of E	Exemp	t Purposes	38,704.
c d e 2 Subtotal Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations ) Part XVI-B Relationship of Activities Line No. Explain below how each activity for which inc	to the Accome is reported	omplishment of E	Exemp	t Purposes	38,704.
c d e 2 Subtotal Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations ) Part XVI-B Relationship of Activities Line No. Explain below how each activity for which inc	to the Accome is reported	omplishment of E	Exemp	t Purposes	38,704.
c d e 2 Subtotal Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations ) Part XVI-B Relationship of Activities Line No. Explain below how each activity for which inc	to the Accome is reported	omplishment of E	Exemp	t Purposes	38,704.
c d e 2 Subtotal Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations ) Part XVI-B Relationship of Activities Line No. Explain below how each activity for which inc	to the Accome is reported	omplishment of E	Exemp	t Purposes	38,704.
c d e 2 Subtotal Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations ) Part XVI-B Relationship of Activities Line No. Explain below how each activity for which inc	to the Accome is reported	omplishment of E	Exemp	t Purposes	38,704.
c d e 2 Subtotal Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations ) Part XVI-B Relationship of Activities Line No. Explain below how each activity for which inc	to the Accome is reported	omplishment of E	Exemp	t Purposes	38,704.
c d e 2 Subtotal Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations ) Part XVI-B Relationship of Activities Line No. Explain below how each activity for which inc	to the Accome is reported	omplishment of E	Exemp	t Purposes	38,704.
c d e 2 Subtotal Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations ) Part XVI-B Relationship of Activities Line No. Explain below how each activity for which inc	to the Accome is reported	omplishment of E	Exemp	t Purposes	38,704.

Form 990-PF (2009) Jewett City Savings Bank Foundation Inc. 13-4242396 Page 13

Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable **Exempt Organizations** 

1		e organization directly or indirectly engage in any of the		-		ection 501(c) of		Yes	No
		ode (other than section 501(c)(3) organizations) or in s			izations?				:
а	Trans	fers from the reporting foundation to a noncharitable e	xempt or	ganization of					
	(1) (	Cash		•			1a(1)		<u>X</u>
	(2)	Other assets .					1a(2)		X
t	Other	transactions							
	(1) S	cales of assets to a noncharitable exempt organization					1b(1)		<u>X</u>
	(2) F	Purchases of assets from a noncharitable exempt organ	nization				1b(2)		X
	(3) F	Rental of facilities, equipment, or other assets					1b(3)		<u>X</u>
	(4) F	Reimbursement arrangements					1b(4)		X
	( <b>5</b> ) L	oans or loan guarantees					1b(5)		X
	(6) F	Performance of services or membership or fundraising	solicitatio	ns			1b(6)		<u>X</u>
C		ng of facilities, equipment, mailing lists, other assets, o					10		<u>X</u>
C	I If the	answer to any of the above is "Yes," complete the follow	wing sche	dule Column (b) should alv	ways show the fa	ır market value of the goods,	other ass	ets,	
	01 Sei	rvices given by the reporting foundation. If the foundati	on receiv	ed less than fair market valu	ie in any transact	tion or sharing arrangement,	show in		
	colun	on (d) the value of the goods, other assets, or services	received						
a)	Line no		_	exempt organization	(d) Descrip	tion of transfers, transactions, and	shanng an	angeme	nts
			N/A						
				•					
				· · ·		.=			
			_	•	<del>-</del>				
2:	ls the	foundation directly or indirectly affiliated with, or relate	ed to one	or more tax-exempt organi	zations described	_ <del></del>			
		ction 501(c) of the Code (other than section 501(c)(3))				- Γ	Yes	ГХ	] No
		s." complete the following schedule							J 140
_	,	(a) Name of organization		(b) Type of organization		(c) Description of relations	hip		
		N/A		(.,, .,,,					
						<del></del>			
	-	· · · · · · · · · · · · · · · · · · ·							
		<del></del>				<del></del>			<del></del>
		· · · · · · · · · · · · · · · · · · ·			_				
	Under p	enalties of perjury, I declare that I have examined this return, incl	luding acco	I	ents, and to the be	st of my knowledge and belief, it is	true, corre	ct,	
		nplete Declaration of preparer (other than taxpayer or fiduciary) is					• . = •	-	
				15/6/10	· TI	casuled			
פ	$\frac{1}{S_1}$	gnature of officer or trustee		/	Title				
ב ב	F 31			Date I n	Date .	Check If Prepar	er's identify	ring nun	nber
5	ح ئ	Preparer's	$\sim$	Pn 1	1 .1 . 1	self-	1 4		
5	Se id	signature This to the signature	dley	- H 11	129/10	employed P	1A		
	Paid Preparer's Use Only					EIN P			
	ي ۾	rt settemployed) 147 Charter Oak				1960	1522	2.1	1 1
		address, and ZiP code Hartford, CT 06	100-	2100			)522		
						Fo	rm <b>990</b>	- <b>Y</b> F (	2009)

Form 990-PF Interest on Savi	ings a	nd Tem	porary Ca	ash In	vestments	State	ement	1
Source						Ar	nount	
Cash and Money Market Funds							4	77.
Total to Form 990-PF, Part I,	, line	3, Co	lumn A				4	77.
Form 990-PF Dividence	ds and	Inter	est from	Secur	rities	State	ement	2
Source		Gross	Amount		ital Gains ividends		umn (A nount	)
Investment Securities			38,227.		0.	-	38,2	27.
Total to Fm 990-PF, Part I,	ln 4		38,227.		0.		38,2	27.
Form 990-PF	- "-	Taxe	es			State	ement	3
Description	Expe	a) enses Books	(b) Net Invo		(c) Adjusted Net Incom		(d) narital Purpose	
Excise Tax		340.		0.				0.
To Form 990-PF, Pg 1, ln 18	:=	340.		0.				0.
Form 990-PF	0	ther E	xpenses			State	ement	4
Description	Expe	a) enses Books	(b) Net Inverse Inc		(c) Adjusted Net Incom		(d) narita Purpos	
Other Expenses		50.		50.				0.
To Form 990-PF, Pg 1, ln 23		50.		50.				0.

Form 990-PF U.S. and Stat	te/Cit	y Gov	ernment	Obligations	Statement	
Description		U.S. ov't	Other Gov't	Book Value	Fair Market Value	:
FHLMC Note 5.0% 10-18-10		Х		70,000.	72,34	11.
FNMA Note 3.75% 6-10-11		Х		0.		0.
FHLMC Bond 3.75% 2-15-13		Х		70,395.	72,18	
CHFA 5.22% 11-08		v	X	75,000.	78,26	
FFCB 5.3% 2-18-14 FNMA (255039)		X X		103,685. 55,620.	110,71 55,18	
FNMA (257192)		X		139,288.	138,12	
Total U.S. Government Obligation	ns		-	438,988.	448,55	3.
Total State and Municipal Govern	nment	Oblig	ations	75,000.	78,26	55.
Total to Form 990-PF, Part II,	line 1	0a	-	513,988.	526,81	8.
			<del></del>			
Form 990-PF	Corpo	rate	Bonds		Statement	-6
Description				Book Value	Fair Market Value	=
Wells Fargo Bond 4.20%			-	100,000.	100,08	37
GE Bond 5.00%				123,787.	132,24	
Total to Form 990-PF, Part II,	line 1	0c	-	223,787.	232,33	32.
Form 990-PF (	Other	Inves	tments		Statement	<del></del>
	Other	Valu	ation		Fair Market	
Form 990-PF O	Other	Valu		Book Value	<del>,</del>	
		Valu Met	ation	Book Value	Fair Market	;
Description  CD Carolina First Bk 5.0% 3-30-0 CD Discover Bank 3.6% 3-28-11		Valu Met	ation hod	0. 98,000.	Fair Market Value	0.54.
Description  CD Carolina First Bk 5.0% 3-30-6		Valu Met CO	ation hod	0.	Fair Market Value	0.54.

Jewett City, CT 06351

Form · 990-PF	Other Assets		State	ement 8
Description	Beginning of Yr Book Value	End of Year Book Value		Market alue
Accrued Income Rec Other Assets	12,563. 65.	10,447 65		10,447. 65.
To Form 990-PF, Part II, line 15	12,628.	10,512		10,512.
	st of Officers, E d Foundation Mana		State	ement 9
Name and Address	Title and Avrg Hrs/Wk	Compen- B		Expense Account
Lewis J Demicco 111 Main Street Jewett City, CT 06351	Chairman 0.00	0.	0.	0.
Kevin C Merchant 111 Main Street Jewett City, CT 06351	President 0.00	0.	0.	0.
James A McDonald 111 Main Street Jewett City, CT 06351	Treasurer 0.00	0.	0.	0.
Shirley M Pierce 111 Main Street Jewett City, CT 06351	Secretary 0.00	. 0.	0.	0.
John E Burke 111 Main Street Jewett City, CT 06351	Director 0.00	0.	0.	0.
Gary W. Peloquin 111 Main Street Jewett City, CT 06351	Director 0.00	0.	0.	0.
Eric L Moore 111 Main Street Lovett City CT 06351	Director 0.00	0.	0.	0.

Jewett City Savings Bank F	oundation Inc.	•	13-4	242396
Gail Rooke-Norman 111 Main Street Jewett City, CT 06351	Director 0.00	0.	0.	0.
Phillip E Tetreault 111 Main Street Jewett City, CT 06351	Director 0.00	0.	0.	0.
R Avery Tillinghast 111 Main Street Jewett City, CT 06351	Director 0.00	0.	0.	0.
Diane L Manning 111 Main Street Jewett City, CT 06351	Director 0.00	0.	0.	0.
Totals included on 990-PF, F	Page 6, Part VIII	0.	0.	0.

Form  $\cdot 990-PF$ 

Grant Application Submission Information Part XV, Lines 2a through 2d

Statement

10

Name and Address of Person to Whom Applications Should be Submitted

Kevin C Merchant Pres. Jewett City Savings Bank Foundation Inc. 111 Main Street Jewett City, CT 06351

Telephone Number

860-376-4444

Form and Content of Applications

Written

Any Submission Deadlines

August 31st

Restrictions and Limitations on Awards

Geographic area of Eastern Connecticut

	and Contributions During the Year	State	ement 11
Recipient Name and Address	Recipient Relationship and Purpose of Grant	Recipient Status	Amount
Aldrich Free Public Library 299 Main Street Moosup, CT 06354	None Babygarten Project	501	1,100.
American Legion Ambulance Fund PO Box 785 Moosup, CT 06354	None Annual Support	501	700.
Attawaugan Fire Department 20 Country Club Road Dayville, CT 06241	None Annual Support	501	600.
Atwood Hose Fire Company 24 Wauregan Rd, PO Box 14 Wauregan, CT 06387	None Acquire gas detector	170	1,000.
Backus Hospital Foundation, Inc. 326 Washington Street Norwich, CT 06360	None Annual Support	501	1,000.
Community Prevention and Addiction Services, Inc. 1491 West Main Street Willimantic, CT 06226	None Facilitate workshops at family shelter	501	800.
Canterbury Volunteer Fire Co and Ambulance PO Box 293 Canterbury, CT 06331	None Annual Support	501	1,100.
Connecticut Audubon Society Center at Pomfret 189 Pomfret Street PO Box 11 Pomfret Center, CT 06259	None Purchase field sampling equipment	501	900.

Jewett City Savings Bank Founda	tion Inc.	•	. 13-4242396
Danielson Fire Department 47 Academy Street Danielson, CT 06239	None Annual Support	501	600.
Day Kimball Hospital PO Box 632 Putnam, CT 06260	None Annual Support	501	1,000.
Dayville Fire Company 465 Hartford Pike Dayville, CT 06241	None Annual Support	501	600.
East Brooklyn Fire Department 15 South Main Street Brooklyn, CT 06234	None Purchase emergency rescue equipment	170	1,000.
Friends of Assisi Food Pantry 77 Water Street Danielson, CT 06239	None Purchase a dairy cooler	501	4,000.
Griswold Community Ambulance PO Box 282 Jewett City, CT 06351	None Annual Support	501	700.
East Killingly Fire Department 1395 Hartford Pike East Killingly, CT 06243	None Annual Support	501	600.
Habitat for Humanity of NECT 66 Main Street PO Box 409 Putnam, CT 06260	None Purchase tools	501	650.
Hospice of Southeastern Connecticut 227 Dunham Street Norwich, CT 06360	None Annual Support	501	500.
K.B. Ambulance Corps 294 Westcott Road PO Box 209 Danielson, CT 06239	None Purchase CPR device	501	1,000.

Jewett City Savings Bank Founda	tion Inc.	• •	13-4242396
Killingly/Brooklyn Ambulance Corps 294 Westcott Road PO Box 209 Danielson, CT 06239	None Annual Support	501	500.
Oneco Fire Company 1146 Plainfield Pike Oneco, CT 06373	None Purchase safety and rescue gear	170	1,000.
Mortlake Fire Co. & Ambulance Service P.O. Box 301 Brooklyn, CT 06234	None Annual Support	501	1,000.
Natchaug Hospital, Inc. 189 Storrs Road Mansfield, CT 06250	None Annual Support	501	1,000.
Performing Arts of Northeast CT PO Box 75 Pomfret, CT 06258	None Annual Support	501	1,000.
Plainfield Fire Co #1. Inc 620 Norwich Rd Plainfield, CT 06374	None Purchase rescue and fire supression tools	170	1,000.
Poquetanuck Fire Department EMS 87 Route 2A Preston, CT 06365	None Annual Support	501	600.
Preston City Volunteer Fire Department 412 Route 165 Preston, CT 06365	None Annual Support	501	600.
Preston Public Library 389 Route 2 Preston, CT 06365	None Provide access to an internet-based learning center	501	1,200.
Preston City Congregational Church 321 Route 164 Preston, CT 06365	None Support for the Food Pantry program	501	1,200.

	Jewett City Savings Bank Founda	tion Inc.	•	13-4242396
	Slater Library Corporation 26 Main Street Jewett City, CT 06351	None Replace library management computer system	501	1,000.
	Slater Library Corporation 26 Main Street Jewett City, CT 06351	None Annual Support	501	1,000.
	South Killingly Fire Department PO Box 31 Danielson, CT 06239	None Annual Support	501	600.
	Special Olympics CT 401 West Thames Street, Suite 107 Norwich, CT 06360	None Fund the 2010 CT Eastern Region Bowling Qualifier	501	1,000.
	St. Mary Food Pantry 34 N. Main Street Jewett City, CT 06351	None Purchase food for distribution	501	5,000.
	United Community & Family Service 47 Town Street Norwich, CT 06360	None Provide health and dental services	501	1,000.
	Windham Hospital Foundation, Inc 112 Mansfield Avenue Willimantic, CT 06226	None Purchase automated external defibrillator	501	1,500.
	Voluntown Public Library 107 Main Street PO Box 26 Voluntown, CT 06384	None Replace the circulation/cataloging computer system	170	1,000.
1	Williamsville Fire Engine Company 126 State Avenue Rogers, CT 06263	None Annual Support	501	600.
	Windham Hospital Foundation, Inc 112 Mansfield Avenue Willimantic, CT 06226	None Annual Support	501	1,000.

Jewett City Savings Bank Foundation Inc.		4.5	13-4242396	
American Cancer Society 106 Route 32 Franklin, CT 06254	None Relay for Lie of Eastern CT sponsor	501	2,500.	
Backus Hospital Foundation, Inc. 326 Washington Street Norwich, CT 06360	None Campaign Pledge	501	5,000.	
Total to Form 990-PF, Part XV, li	ne 3a		48,150.	