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Form 990-PF

Department of the Treasury

Return of Private Foundation

or Section 4947(a)(1) Nonexempt Charitable Trust

Treated as a Private Foundation

2009

OMB No 1545-0052

Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements Internal Revenue Service 1, 2010 APR 2009 MAR 31 For calendar year 2009, or tax year beginning and ending Initial return of a former public charity Final return Initial return G Check all that apply Amended return Address change Name change A Employer identification number Name of foundation Use the IRS label. 02-0499456 SALEM COMMUNITY BENEFITS, INC. Otherwise, Number and street (or P O box number if mail is not delivered to street address) Room/sulte B Telephone number print or type. (603) 898-2153 3 SOUTH BROADWAY See Specific City or town, state, and ZIP code C If exemption application is pending, check here Instructions 03079 SALEM, NH 1. Foreign organizations, check here 2. Foreign organizations meeting the 85% test, check here and attach computation X Section 501(c)(3) exempt private foundation H Check type of organization Section 4947(a)(1) nonexempt charitable trust ____ Other taxable private foundation If private foundation status was terminated Cash X Accrual I Fair market value of all assets at end of year | J Accounting method: under section 507(b)(1)(A), check here Other (specify) (from Part II, col. (c), line 16) F If the foundation is in a 60-month termination 146,962. (Part I, column (d) must be on cash basis.) under section 507(b)(1)(B), check here ▶\$ Part | Analysis of Revenue and Expenses (d) Disbursements (b) Net investment (c) Adjusted net (a) Revenue and (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)) for chantable purposes (cash basis only) expenses per books income income N/A 100,000 Contributions, gifts, grants, etc., received 2 Check I if the foundation is not required to attach Sch B 105 105 Interest on savings and temporary cash investments Dividends and interest from securities 5a Gross rents D Net rental income or (loss) 62 Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a 0. 7 Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain 3083 10 2010 Income modifications q Gross sales less returns 10a and allowances b Less Cost of goods sold c Gross profit or (loss) 11 Other income 100,105 105. 12 Total Add lines 1 through 11 0. 0. Compensation of officers, directors, trustees, etc. 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees b Accounting fees c Other professional fees **Administrative** 17 Interest Stmt 1 4. 0. 18 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 75 0 75. Stmt 2 Other expenses 23 24 Total operating and administrative 75. 0 79 expenses. Add lines 13 through 23 6,000. 6,000 Contributions, gifts, grants paid 26 Total expenses and disbursements. 6,079 0 6,075. Add lines 24 and 25 27 Subtract line 26 from line 12 94,026 2 Excess of revenue over expenses and disbursements 105 b Net investment income (if negative, enter -0-) N/A c Adjusted net income (if negative, enter -0-)

Attached schedules and amounts in the description		Attached schedules and amounts in the description	Beginning of year	End of	year
P	art	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing			
	2	Savings and temporary cash investments .	52,936.	51,962.	51,962.
	3	Accounts receivable			
		Less allowance for doubtful accounts		········· · · · · · · · · · · · · · ·	
	4	Pledges receivable ►			
		Less allowance for doubtful accounts		<u></u>	
	5	Grants receivable		95,000.	95,000.
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons			
	7	Other notes and loans receivable			
		Less allowance for doubtful accounts			
5	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			<u> </u>
ğ		Investments - U.S and state government obligations			
	b	Investments - corporate stock			
	ľ	Investments - corporate bonds			
	11	Investments - land, buildings, and equipment basis			
		Less accumulated depreciation .			
	12	Investments - mortgage loans			
	13	Investments - other			
	14	Land, buildings, and equipment basis			
	ŀ	Less: accumulated depreciation .			
	15	Other assets (describe)			
					4.6.060
	16	Total assets (to be completed by all filers)	52,936.	146,962.	146,962.
	17	Accounts payable and accrued expenses			
	18	Grants payable			
S	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons .			
iab	21	Mortgages and other notes payable .			
_	22	Other liabilities (describe			
				^	
_	23	Total liabilities (add lines 17 through 22)	0.	0.	
		Foundations that follow SFAS 117, check here		:	
s	ŀ	and complete lines 24 through 26 and lines 30 and 31.			
JCe	24	Unrestricted .			
alar	25	Temporarily restricted			
B	26				
Š	ŀ	Foundations that do not follow SFAS 117, check here			
P		and complete lines 27 through 31.	52,936.	146,962.	
ţ	27	Capital stock, trust principal, or current funds	0.	0.	
SSe	28	Paid-in or capital surplus, or land, bldg, and equipment fund	0.	0.	
Net Assets or Fund Balances	29	Retained earnings, accumulated income, endowment, or other funds	52,936.	146,962.	
ž	30	Total net assets or fund balances	32,730.	140/502.	
	24	Total liabilities and net assets/fund balances	52,936.	146,962.	
_					
P	art	Analysis of Changes in Net Assets or Fund E	oaiances 		
1		il net assets or fund balances at beginning of year - Part II, column (a), line	e 30		" 0 000
		st agree with end-of-year figure reported on prior year's return)		1	52,936. 94,026.
2		er amount from Part I, line 27a		2	94,026.
		er increases not included in line 2 (itemize)		3	0.
4	Add	lines 1, 2, and 3		. 4	146,962.
		reases not included in line 2 (itemize)		5	0.
6	Tota	al net assets or fund balances at end of year (line 4 minus line 5) - Part II, o	column (b), line 30	6	146,962.
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Form 990-PF (2009) SALI Part IV Capital Gains a		NITY BENEF				<u> </u>		2-049	9456	Page 3
(a) List and descr	ribe the kind(s) of	property sold (e.g., rea	al estate,		P	low acquired - Purchase - Donation	(c) Date (mo , c	acquired day, yr)	(d) Date (mo , da	
1a										
b NOI	NE									
C										
<u>d</u>					-					
<u>e</u>	(f) Depressi	tion allowed	(n) Cos	st or other basis			(b) (Sain or (loss)		<u> </u>
(e) Gross sales price		owable)	137	expense of sale	-			is (f) minus (
b b										
C										
d				•						
е										
Complete only for assets showin	g gain in column	(h) and owned by the f	oundation	on 12/31/69				Col (h) gain		
(i) F M V as of 12/31/69	\., ·	ted basis 2/31/69		cess of col (i) col. (j), if any				not less than (from col. (f		· · · · <u>-</u> · · ·
3				_	\dashv					
b					\dashv	···		_		
<u>C</u>					\dashv			···		
d e	-		····		\dashv					
	nutal Isaas)	If gain, also enter in F	Part I, line	7	1	2	-			
2 Capital gain net income or (net ca		If (loss), enter -0- in I		/	가	2				
3 Net short-term capital gain or (los if gain, also enter in Part I, line 8, if (loss), enter -0- in Part I, line 8		ections 1222(5) and (6)		}	3				
Part V Qualification U	nder Sectio	n 4940(e) for Re	duced	Tax on Net	Inve	estment In	come			
(For optional use by domestic private	foundations subj	ect to the section 4940	(a) tax on	net investment in	come)				
If section 4940(d)(2) applies, leave th	ue nart blank									
Was the foundation liable for the sect					nod?			-	Yes	X No
If "Yes," the foundation does not qual Enter the appropriate amount in e										
(a)	Jacin Coldinii 101 C	(b)	113 001010	making any one	(c)				(d) ution ratio	
Base periód years Calendar year (or tax year beginnir	ng In) Adju	sted qualifying distribu	tions	Net value of no	nchan	itable-use assets	;	Distribi (col (b) divi	ution ratio ded by col	(c))
2008			996.			72,633	3.			8194
2007			098.			93,71	5.			22387
2006			903.			107,039	₽.	.		8050
2005			575.			120,938		_		70904
2004		24,	575.			131,087	' • 	<u> </u>	. 18	37471
2 Total of line 1, column (d)							2_		1.15	7006
3 Average distribution ratio for the 5 the foundation has been in exister	•		ne 2 by 5,	or by the number	of yea	ars	3		. 23	31401
the journation has been in exister	ice ii iess tiiaii 5)	16013		-	-		-			
4 Enter the net value of noncharitab	le-use assets for t	2009 from Part X, line :	5			-	4		145,	238.
5 Multiply line 4 by line 3							5		33,	608.
6 Enter 1% of net investment incom	ne (1% of Part I, I	ne 27b)					6			1.
7 Add lines 5 and 6							7		33,	609.
8 Enter qualifying distributions from	Part XII, line 4						8_		6,	075.
If line 8 is equal to or greater than See the Part VI instructions		box in Part VI, line 1b,	and comp	lete that part using	g a 1%	6 tax rate				
923521 02.02.10								Fo.	m 990-P	E (2009)

Form		99456		Page 4
	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - se	e instru	ctio	าร)
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1			
	Date of ruling or determination letter (attach copy of letter if necessary-see instructions)			2.
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here 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)			0.
2	2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			
3	Add lines 1 and 2			2.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			0.
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-			2.
6	Credits/Payments			
	2009 estimated tax payments and 2008 overpayment credited to 2009 . 6a			
	Exempt foreign organizations - tax withheld at source			
	Tax paid with application for extension of time to file (Form 8868)			
	Backup withholding erroneously withheld . 6d .			0.
	Total credits and payments Add lines 6a through 6d			<u> </u>
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached			2.
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			<u> </u>
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			
	Enter the amount of line 10 to be Credited to 2010 estimated tax ► Refunded ► 11			
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in		Yes	No
14	any political campaign?	1a		X
	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)?	1b		X
U	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or	'-		
	distributed by the foundation in connection with the activities.			
c	Did the foundation file Form 1120-POL for this year?	10	1	X
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			
·	(1) On the foundation > \$ O . (2) On foundation managers > \$ O .			
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation			
_	managers ▶ \$0.			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		X
	If "Yes," attach a detailed description of the activities.			······
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or			
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X
	If "Yes," attach the statement required by General Instruction T.			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			
	By language in the governing instrument, or			
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law			
	remain in the governing instrument?	6	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year?	7	X	
	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 instructions) NH	_		
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	8b	Х	
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 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If "Yes," complete Part XIV	9	ļ	<u>X</u>
10 Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names and addresses				X
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X

had not been removed from jeopardy before the first day of the tax year beginning in 2009?

All other program-related investments. See instructions

Total. Add lines 1 through 3

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign fou	ndations, s	ee instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
а	Average monthly fair market value of securities	1a	0.
	Average of monthly cash balances	1b	52,450.
C	Fair market value of all other assets	10	95,000.
d	Total (add lines 1a, b, and c)	1d	147,450.
	Reduction claimed for blockage or other factors reported on lines 1a and		<u></u>
	1c (attach detailed explanation) 1e 0 .		
2	Acquisition indebtedness applicable to line 1 assets	2	<u> </u>
3	Subtract line 2 from line 1d	3	147,450.
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	2,212.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	145,238.
6	Minimum investment return. Enter 5% of line 5	6	7,262.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here and do not complete this part.)	nd certain	
1	Minimum investment return from Part X, line 6	1	7,262.
2a	1 - 1		
b	income tax for 2009. (This does not include the tax from Part VI)		
C	Add lines 2a and 2b	2c	2.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	7,260.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	7,260.
6	Deduction from distributable amount (see instructions)	6	0.
7_	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	7,260.
P	art XII Qualifying Distributions (see instructions)	······	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		C 075
a		1a	6,075.
	Program-related investments - total from Part IX-B	16	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
a	Suitability test (prior IRS approval required)	3a	
þ		3b	C 07E
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	6,075.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment	_	^
_	income Enter 1% of Part I, line 27b	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	6,075.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of 4940(e) reduction of tax in those years	qualifies for t	the section

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
1 Distributable amount for 2009 from Part XI,				7,260.
line 7 2 Undistributed income, if any, as of the end of 2009			····· ; \$***************** ; 14 of***** ;	· · · · · · · · · · · · · · · · · · ·
a Enter amount for 2008 only		Ì	0.	
b Total for prior years.		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
B rotal for prior years.		0.		
3 Excess distributions carryover, if any, to 2009	***************************************		1 1 1 1 1 1 1 1 1 1	
a From 2004 18,048.				
b From 2005 2,553.				
c From 2006 26,573.				
d From 2007				
e From 2008 38,372.				
f Total of lines 3a through e	85,546.			
4 Qualifying distributions for 2009 from				
Part XII, line 4 \triangleright \$ 6,075.				
a Applied to 2008, but not more than line 2a	······································		0.	
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.	**********	
c Treated as distributions out of corpus	, 1			
(Election required - see instructions)	0.	<u>, , , , , , , , , , , , , , , , , , , </u>	······································	6,075.
d Applied to 2009 distributable amount	0.			0,073.
e Remaining amount distributed out of corpus	1,185.	······································	······································	1,185.
5 Excess distributions carryover applied to 2009 (If an amount appears in column (d), the same amount must be shown in column (a))	1,163.			1,103.
6 Enter the net total of each column as indicated below:				
2 Corpus Add lines 3f, 4c, and 4e Subtract line 5	84,361.			
b Pnor 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			0	
4a from line 2a Taxable amount - see instr			0.	
f Undistributed income for 2009 Subtract				
lines 4d and 5 from line 1. This amount must	•			0.
be distributed in 2010				
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by	0.			
section 170(b)(1)(F) or 4942(g)(3) 8 Excess distributions carryover from 2004				
not applied on line 5 or line 7	16,863.			
1. 2242	20,000			
9 Excess distributions carryover to 2010. Subtract lines 7 and 8 from line 6a	67,498.			
10 Analysis of line 9				······································
a Excess from 2005 2,553.				
b Excess from 2006 26,573.				
c Excess from 2007				
d Excess from 2008 38,372.				
e Excess from 2009				
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Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9) N/A								
	1 a If the foundation has received a ruling or determination letter that it is a private operating							
foundation, and the ruling is effective fo			▶	· · · · · · · · · · · · · · · · · · ·				
b Check box to indicate whether the found		g foundation described		J 4942(J)(3) or	42(1)(5)			
2 a Enter the lesser of the adjusted net	Tax year	(h) 2008	Prior 3 years (c) 2007	(d) 2006	(e) Total			
income from Part I or the minimum	(a) 2009	(b) 2008	(6) 2007	(8) 2000	(6) 10(2)			
investment return from Part X for								
each year listed		<u> </u>						
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	1							
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			<u> </u>					
shown in Part X, line 6 for each year listed								
c "Support" alternative test - enter								
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section								
512(a)(5)), or royalties) (2) Support from general public and 5 or more exempt								
organizations as provided in section 4942(j)(3)(B)(III) (3) Largest amount of support from								
an exempt organization								
(4) Gross investment income								
Part XV Supplementary Info	rmation (Comple	te this part only	if the foundation	n had \$5,000 or mo	re in assets			
at any time during t	the year-see the i	nstructions.)						
1 Information Regarding Foundation								
a List any managers of the foundation wh year (but only if they have contributed r	no have contributed more more than \$5,000) (See s	than 2% of the total con ection 507(d)(2))	inbutions received by the	e foundation before the clos	e of any tax			
None				 				
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								
None								
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 num								
ANN R. LALLY, (603) 3 SOUTH BROADWAY, SA	898-2153							
b The form in which applications should I LETTER OF REQUEST AN	be submitted and information	ion and materials they s		LL BE USED				
c Any submission deadlines. NONE								
d Any restrictions or limitations on award LIMITED TO ORGANIZAT								
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3 Grants and Contributions Paid During the Yo		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 recipient	Purpose of grant or contribution	Amount
a Paid during the year SILVERTHORNE ADULT MEDICAL DAY CENTER 23 GEREMONTY DR SALEM, NH 03079	NONE	PUBLIC CHARITY	FACILITY IMPROVEMENTS	5,000.
REGION 10 COMMUNITY SUPPORT SERVICES, INC. 8 COMMERCE DR ATKINSON, NH 03811	NONE	PUBLIC CHARITY	13TH ANNUAL KIDS CARNIVAL	1,000.
	L	1	<u> </u>	6 000
Total b Approved for future payment			▶ 3a	6,000.
None				
Total	-		▶ 3b	0.

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Part XVI-A Analysis of Income-Produ

nter gross amounts unless otherwise indicated	Unrelated t	usiness income		y section 512, 513, or 514	(e)
·	(a) Business	(b)	(C) Exclu-	(d)	Related or exempt
Program service revenue	code	Amount	sion	Amount	function income
a					
b			.		
C					
d			<u>. </u>		
e					
f					
g Fees and contracts from government agencies		·			
? Membership dues and assessments		· - · · · · · · · · · · · · · · · · · ·			
Interest on savings and temporary cash	-		1.4	105	
investments			14	105.	
Dividends and interest from securities					
5 Net rental income or (loss) from real estate					
a Debt-financed property	<u> </u>				
b Not debt-financed property			- 		
Net rental income or (loss) from personal					
property	ļ		-		
7 Other investment income			+		
8 Gain or (loss) from sales of assets other					
than inventory 9 Net income or (loss) from special events			1		
O Gross profit or (loss) from sales of inventory					
1 Other revenue					
b					
c			1		
d			- - - - - - - - - - - - - - - 		
e					
2 Subtotal Add columns (b), (d), and (e)		0		105.	0
3 Total. Add line 12, columns (b), (d), and (e)				13	105
See worksheet in line 13 instructions to verify calculations)					
Part XVI-B Relationship of Activities t	o the Accon	plishment of E	xempt P	urposes	
Line No. Explain below how each activity for which inco				<u></u> .	lishment of
the foundation's exempt purposes (other than	by providing fund:	s for such purposes)	- Continuite	amportantly to the accomp	
*	<u> </u>				

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P	art XVII Information Regarding Transfers To Exempt Organizations	and Transactions a	nd Relationships With Noncha	ritable	
1	Did the organization directly or indirectly engage in any of the follow	ing with any other organization	n described in section 501(c) of	Ye	es No
	the Code (other than section 501(c)(3) organizations) or in section 5	527, relating to political organi	zations?		
a Transfers from the reporting foundation to a noncharitable exempt organization of					
	(1) Cash				
	(2) Other assets		·	1a(2)	X
b	Other transactions				
	(1) Sales of assets to a noncharitable exempt organization			1b(1)	X
	(2) Purchases of assets from a noncharitable exempt organization			16(2)	X
	(3) Rental of facilities, equipment, or other assets			1b(3)	X
	(4) Reimbursement arrangements			1b(4)	X
	(5) Loans or loan guarantees			1b(5)	X
	(6) Performance of services or membership or fundraising solicitat	ions		1b(6)	X
C	Sharing of facilities, equipment, mailing lists, other assets, or paid ei	mployees		10	<u> </u>
d					ı
	or services given by the reporting foundation. If the foundation received		e in any transaction or sharing arrangement, s	how in	
	column (d) the value of the goods, other assets, or services received				
(a)	Line no (b) Amount involved (c) Name of noncharitab	le exempt organization	(d) Description of transfers, transactions, and	sharing arrange	ements
	N/A	<u> </u>			
					
			 		
			<u> </u>		
					
					
					
2a	a Is the foundation directly or indirectly affiliated with, or related to, on		ations described	٦., ر	ਯਾ
	in section 501(c) of the Code (other than section 501(c)(3)) or in sec	Ction 5277	·· · · · · ·	Yes L	X No
	o If "Yes," complete the following schedule (a) Name of organization	(b) Type of organization	(c) Description of relations	nin -	
	N/A	(b) type of organization	(c) Description of relations	<u>h</u>	
	N/A				
					
		 			
_					
\neg	Under penalties of penjury, I declare that I have examined this return, including acc	companying schedules and stateme	ents, and to the best of my knowledge and belief it is	rue correct	
- {	and complete Declaration of preparer (other than taxpayer or fiduciary) is based of				
	LA DEXIONAL	14/4/11	Trustee		
9	Signature of officer or trustee	Date	Title		
Sign Here		Date		r's identifying r	number
6	Préparer's S. Drew Chienne		self-	o locatory mg .	
<u>.</u>	BAKED NEWMAN & NOVE				
ļ	Firm's name (or yours BARER NEWIAN & NOTE BOX 507		EIN ►		
	address, and ZIP code PORTLAND, ME 04112		Phone no (207)	879-	2100
	FORTHAMD, PIE 04112			m 990-P l	
			FOI	… フラリーア	(2009)

Schedule B (Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

➤ Attach to Form 990, 990-EZ, or 990-PF.

OMB No 1545-0047

2009

Name of the organization	Employer identification number					
\$	SALEM COMMUNITY BENEFITS, INC.	02-0499456				
Organization type (chec	k 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 foun	ndation				
	527 political organization					
Form 990-PF	X 501(c)(3) exempt private foundation					
	4947(a)(1) nonexempt charitable trust treated as a private foundation	on				
	501(c)(3) taxable private foundation					
•	on is covered by the General Rule or a Special Rule . (c)(7), (8), or (10) organization can check boxes for both the General Rule and	a Special Rule. See instructions.				
General Rule						
	tion filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 on mplete Parts I and II.	or more (in money or property) from any one				
Special Rules						
509(a)(1) and 17	01(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support to 70(b)(1)(A)(vi), and received from any one contributor, during the year, a contributor on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts I an	bution of the greater of (1) \$5,000 or (2) 2%				
aggregate contr	For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use 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 a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000 lf 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 of \$5,000 or more during the year.						
-	n that is not covered by the General Rule and/or the Special Rules does not fil					
	on Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-E filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).	Z, or on line 2 of its Form 990-PF, to certify				
LHA For Privacy Act ar	nd Paperwork Reduction Act Notice, see the Instructions	Schedule B (Form 990, 990-EZ, or 990-PF) (2009)				

for Form 990, 990-EZ, or 990-PF.

Name of organization

Employer identification number

SALEM COMMUNITY BENEFITS, INC.

02-0499456

Part I	Contributors (see instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	SALEM CO-OPERATIVE BANK 3 SOUTH BROADWAY SALEM, NH 03079	\$\$.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)

Form 990-PF	Taxes			Statement 1		
Description	(a) Expenses Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Income	(d) Charitable Purposes		
FEDERAL EXCISE	4.	0.		0.		
To Form 990-PF, Pg 1, ln 18	4.	0.		0.		
Form 990-PF	Other Expenses		Statement 2			
Description	(a) Expenses Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Income	(d) Charitable Purposes		
	75.	0.				
OTHER	75.	0.		75.		

	List of Officers, Directors and Foundation Managers			Statement 3	
Name and Address	Title and Avrg Hrs/Wk	Compen- sation	Employee Ben Plan Contrib	Expense	
NADEMA GEMMELL	CHAIRMAN				
C/O SALEM COMMUNITY BENEFITS, INC. 3 SOUTH BROADWAY SALEM, NH 03079	0.00	0.	0.	0.	
JOHN KORBEY	DIRECTOR				
C/O SALEM COMMUNITY BENEFITS, INC. 3 SOUTH BROADWAY SALEM, NH 03079	0.00	0.	0.	0.	
DAVID BESHARA	DIRECTOR				
C/O SALEM COMMUNITY BENEFITS, INC. 3 SOUTH BROADWAY SALEM, NH 03079	0.00	0.	0.	0.	
JAMES RAUSCH	DIRECTOR				
C/O SALEM COMMUNITY BENEFITS, INC. 3 SOUTH BROADWAY SALEM, NH 03079	0.00	0.	0.	0.	
ANN R. LALLY	SECRETARY				
C/O SALEM COMMUNITY BENEFITS, INC. 3 SOUTH BROADWAY SALEM, NH 03079	0.00	0.	0.	0.	
Totals included on 990-PF, Page 6,	Part VIII	0.	0.	0.	