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Form **990-PF**

Department of the Treasury Internal Revenue Service

Return of Private Foundation

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

Treated as a Private Foundation Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements 2010

OMB No 1545-0052

| For calendar year 2010, or tax year beginning OCT | <u>1, 2010</u> | , and ending | SEP 30, 2011 | |
|--|--------------------------------|--|---|---|
| G Check all that apply Initial return | Initial return of a fo | rmer public charity | Final return | |
| Amended return | Address chang | je 🔲 | Name change | |
| Name of foundation | | | A Employer identification | number |
| BRIDGEWATER SAVINGS C | HARITABLE | | | |
| FOUNDATION, INC. | | | 11-3689271 | |
| Number and street (or P O box number if mail is not delivered to street | address) | Room/suite | B Telephone number | |
| 753 ORCHARD STREET | | | 508-884-33 | 12 |
| City or town, state, and ZIP code | · · · · · · | | C If exemption application is pe | ending, check here |
| RAYNHAM, MA 02767 | | | D 1. Foreign organizations | |
| H Check type of organization: X Section 501(c)(3) ex | empt private foundation | · | Foreign organizations me check here and attach co | eting the 85% test, |
| | Other taxable private foundate | tion | | |
| Fair market value of all assets at end of year J Accounting | Trans. | Accrual | E If private foundation stat under section 507(b)(1) | (A), check here |
| · — | her (specify) | | F If the foundation is in a 6 | |
| ▶\$ 196,471. (Part I, colu | | asis.) | under section 507(b)(1) | |
| Dart t Analysis of Revenue and Expenses | (a) Revenue and | (b) Net investment | (c) Adjusted net | (d) Disbursements |
| (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)) | expenses per books | income | income | for chantable purposes (cash basis only) |
| 1 Contributions, gifts, grants, etc., received | 0. | 1100 110000000 110000000 | · · · · · · · · · · · · · · · · · · · | · · · · · · · · · · · · · · · · · · · |
| 2 Check X If the foundation is not required to attach Sch B | | | | |
| 3 Interest on savings and temporary cash investments | 1,919. | 1,919. | | STATEMENT 1 |
| 4 Dividends and interest from securities | 2,206. | 2,206. | | STATEMENT 2 |
| 5a Gross rents | 2,200 | | | n |
| b Net rental income or (loss) | | | | |
| b recrema modifie of (1933) | 277. | | | |
| 54 Net gain or (loss) from sale of assets not on line 10 Gross sales price for all 63,116. | | ······································ | | |
| 6a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a 63, 116. 7 Capital gain net income (from Part IV, line 2) | | 277. | *************************************** | ···· |
| | | | | |
| 9 Income modifications | | ···· ··· ·· · · · · · · · · · · · · · | | ····· |
| Gross sales less returns | | | | |
| | | | ···· | |
| b Less Cost organization EVED | | | <u> </u> | |
| 11 Other income | 48,477. | 0. | 48,477. | STATEMENT 3 |
| 11 Other Income | 52,879. | 4,402. | 48,477. | |
| 13 Compensation of officers, directors, trustees, etc. | 0. | 0. | 0. | 0. |
| 1 | | | | |
| 14 Other employee-salaries and wages . 15 Pension plans employee benefits | | | | : |
| 15 Fellston praiss in provide bellstas | | | | |
| El CIDMID A | 2,200. | 0. | 0. | 2,200. |
| C Other professional fees | | | | |
| c Other professional fees 17 Interest 18 Taxes STMT 5 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses STMT 6 24 Total operating and administrative expenses. Add lines 13 through 23 | | | | |
| 18 Taxes STMT 5 | 35. | 0. | 0. | 0. |
| 19 Depreciation and depletion | | | | |
| 20 Occupancy | | | | |
| 21 Travel, conferences, and meetings | | | | |
| 22 Printing and publications | | · · · - · · · · · · · · · · · · · · · · | | |
| 22 Printing and publications 29 23 Other expenses STMT 6 | 20,453. | 75. | 20,076. | 302. |
| 24 Total operating and administrative | | | | |
| expenses. Add lines 13 through 23 | 22,688. | 75. | 20,076. | 2,502. |
| 25 Contributions, gifts, grants paid | 22,915. | | | 2,502. 22,915. |
| 26 Total expenses and disbursements. | | | | |
| Add lines 24 and 25 . | 45,603. | 75. | 20,076. | 25,417. |
| 27 Subtract line 26 from line 12. | 23,000 | | | |
| | 7,276. | | | |
| 8 Excess of revenue over expenses and disbursements | | 4,327. | • • • • • • • • • • • • • • • • • • • | 73 |
| b Net investment income (if negative, enter -0-) | | | 28,401. | 0 |
| c Adjusted net income (if negative, enter-0-) | the instructions | | | Form 990-PF (2010) |

Form 990-PF (2010)

FOUNDATION, INC.

11-3689271 Page 2

| Attached schedules and amounts in the description | Beginning of year | End of | year |
|--|--|---------------------------------------|---------------------------|
| Part II 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 | 41,536. | 34,410. | 34,410. |
| 2 Savings and temporary cash investments | | | |
| 3 Accounts receivable ► | | | |
| Less allowance for doubtful accounts | | | |
| 4 Pledges receivable ► | | | |
| Less: allowance for doubtful accounts ▶ | Ì | | |
| 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 ▶ | ĺ | | |
| | | | |
| 9 Prepaid expenses and deferred charges | | | |
| 10a Investments - U.S and state government obligations | | | |
| b Investments - corporate stock STMT 7 | 152,716. | 162,061. | 162,061. |
| c Investments - corporate bonds | | | |
| 11 Investments - land, buildings, and equipment basis | | | |
| Less accumulated depreciation | İ | | |
| 12 investments - mortgage loans | | | |
| 13 Investments - other | | | |
| 14 Land, buildings, and equipment basis | -1 11 11 11 11 11 11 11 11 11 11 11 11 1 | | a v manna a man and mar |
| Less accumulated depreciation | | | |
| 15 Other assets (describe | | | |
| 19 Offiel 9226/2 (describe | | | |
| 16. Tatal assets (to be completed by all filers) | 194,252. | 196,471. | 196,471. |
| 16 Total assets (to be completed by all filers) | 19172320 | 25072.20 | |
| 17 Accounts payable and accrued expenses | | | |
| 18 Grants payable | | | |
| 19 Deferred revenue 20 Loans from officers, directors, trustees, and other disqualified persons 21 Mortgages and other notes payable | | | |
| 20 Loans from officers, directors, trustees, and other disqualified persons | | | |
| 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 | | · · · · · · · · · · · · · · · · · · · | |
| and complete lines 24 through 26 and lines 30 and 31. | | | |
| and complete lines 24 through 20 and times 30 and 31. | | | |
| 24 Unrestricted | | | |
| 25 Temporarily restricted | | | |
| 26 Permanently restricted Foundations that do not follow SFAS 117, check here | | | |
| 3 , , , , , , , , , , , , , , , , , , | | | |
| and complete lines 27 through 31. | 0. | 0. | |
| 27 Capital stock, trust principal, or current funds | 0. | 0. | |
| 28 Paid-in or capital surplus, or land, bldg, and equipment fund | 194,252. | 196,471. | |
| Retained earnings, accumulated income, endowment, or other funds | 194,252. | 196,471. | |
| 30 Total net assets or fund balances | 174,252. | 150/4/10 | |
| C4 T-t-1 lish !!!!iss and ask assets three between | 194,252. | 196,471. | |
| 31 Total liabilities and net assets/fund balances | | 130/1/10 | |
| Part III Analysis of Changes in Net Assets or Fund B | alances | | |
| 1 Total net assets or fund balances at beginning of year - Part II, column (a), line | 30 | | |
| | VV | 1 | 194,252. |
| (must agree with end-of-year figure reported on prior year's return) | | 2 | 7,276. |
| 2 Enter amount from Part I, line 27a | • | 3 | 0. |
| 3 Other increases not included in line 2 (itemize) | <u> </u> | 4 | 201,528. |
| 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) ► MARKET VALUE C | HANGE IN NET A | | 5,057. |
| | | 6 | 196,471. |
| 6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, c | viurini (u), iiile 30 | | Form 990-PF (2010) |

| | Part IV Capital Gains | and Losses for Tax on Ir | vestment | Income | | | | | |
|------|--|---|--------------------------------|-------------------------------------|--|-----------------------------------|---------------------|--------------------------------|--|
| | (a) List and desc 2-story brick wa | ribe the kind(s) of property sold (e.g rehouse, or common stock, 200 shs | ., real estate, s. MLC Co) | | (b) Hov P - P D - D | v acquired urchase lonation | (c) Date (mo., d | acquired ay, yr) | (d) Date sold (mo., day, yr) |
| 18 | 494.423 SHS VA | NGUARD ST INVEST | GR-IN | 7 | | P | 01/2 | 0/10 | 12/08/10 |
| | | IO INTERNATIONAL | | | | P | 01/1 | | 01/27/11 |
| | 541.045 SHS CG | | | | | P | 01/1 | | 08/18/11 |
| _ | SEI DAILY INCO | ME TR GOV PT A | | | | P | VARI | ous | VARIOUS |
| | CAPITAL GAINS | DIVIDENDS | | | | | | | |
| | (e) Gross sales price | (f) Depreciation allowed (or allowable) | | t or other basis xpense of sale | | | | ain or (loss) s (f) minus (| |
| - | 5,340. | | | 5,28 | 0. | | - | | 60. |
| t | 7,539. | | | 7,40 | 0. | | | | 139. |
| _ | 13,624. | | | 14,50 | 0. | | | | <876. |
| _0 | | | | <u>35,65</u> | 9. | | | | 0. |
| _6 | | | | | | | | | 954. |
| _ | Complete only for assets showin | g gain in column (h) and owned by t | he foundation | on 12/31/69 | | | | ol. (h) gain | |
| | (i) F.M.V. as of 12/31/69 | (I) Adjusted basis as of 12/31/69 | | cess of col. (1) col (j), if any | | COI | | ot less thar (from col. (| |
| a | | | | <u></u> | | | | | 60. |
| t |) | | | | | | | | 139. |
| _ | | | | | | | | | <876. |
| | 1 | | | | | | - | | 0. |
| | | | | | | | | | 954. |
| 2 | Capital gain net income or (net ca | If gain, also enter | | | } _2 | ! | | | 277. |
| 3 | Net short-term capital gain or (los | s) as defined in sections 1222(5) an | | | | | | | |
| • | If gain, also enter in Part 1, line 8, | | - (0) | | | | | _ | |
| _ | If (loss), enter -0- in Part I, line 8 | · · · · · · · · · · · · · · · · · · · | | | <u> </u> | | | N/A | |
| I | Part V Qualification U | nder Section 4940(e) for | Reduced | Tax on Net | Inves | tment Inc | ome | | |
| (F | or optional use by domestic private | foundations subject to the section 4 | 1940(a) tax on | net investment in | come.) | | | | |
| If s | section 4940(d)(2) applies, leave th | is nart blank | | | | | | | |
| | | | | | | | | | |
| | | ion 4942 tax on the distributable am | | • | iod? | | | | Yes X No |
| | | ify under section 4940(e). Do not co | | | | - | | | · |
| 1 | (a) | each column for each year; see instru | ICTIONS DETOTE | making any entrie | | | 7 | | (6) |
| | Base period vears | ng in) Adjusted qualifying dist | Inhutions | Net value of no | (C) ncharital | nle-use assets | | Distrib | (d) oution ratio ided by col. (c)) |
| _ | Calendar year (or tax year beginning | | 0,935. | 1101 10100 01 1101 | | 79,235 | | (COI. (D) GIV | •116802 |
| _ | 2009 | | 8,464. | | | 58,772 | | | .179276 |
| _ | 2008 | | 9,586. | | | 86,537 | | | .158607 |
| - | 2007 2006 | | 4,058. | | | 78,131 | | | .135058 |
| - | 2005 | | 1,697. | | | 67,994 | | | .129153 |
| _ | 2005 | <u>-</u> | 270314 | - | | , , , , , , | 7 | | <u> </u> |
| 2 | Total of line 1, column (d) | | | | | | 2 | | .718896 |
| | | 5-year base period - divide the total o | n line 2 by 5 | or by the number | of years | | - | - | |
| ٠ | the foundation has been in exister | | ,,, illio 2 by 0, | or by the named | o. youro | | 3 | | .143779 |
| | the roundation has been in exister | ice ii less tilali 5 years. | | | | | | | |
| 4 | Enter the net value of noncharitab | le-use assets for 2010 from Part X, | line 5 | | | | 4 | | 195,780. |
| _ | | | | | | | _ | | 20 140 |
| 5 | Multiply line 4 by line 3 | | | | | | 5 | | 28,149. |
| 6 | Enter 19/ of not investment incom | on (19) of Part Linn 27h) | | | | | 6 | | 43. |
| 0 | Enter 1% of net investment incom | le (1% UI Fait I, IIIIe 2/0) . | • | | | | J J | | 43. |
| | | | | | | | 1 1 | | |
| 7 | Add lines 5 and 6 | | | | | | 7 | | 28,192. |
| 7 | Add lines 5 and 6 | | • | | | | 7 | | 28,192. |
| | Enter qualifying distributions from | n Part XII, line 4 line 7, check the box in Part VI, line | | | | | 8 | | 28,192. 25,417. |

BRIDGEWATER SAVINGS CHARTTABLE

| Form | 11-368: DRIDGEWATER DAVINGS CHARTIABLE 11-368: | 9271 | | Page 4 |
|------|--|-------------|-----|-----------|
| | ert VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see | | | |
| | Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1 | | | |
| 10 | Date of ruling or determination letter. (attach copy of letter if necessary-see instructions) | | | |
| h | Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1% | | | 87. |
| | 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) | | | |
| | Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-). | | | 0. |
| 3 | Add lines 1 and 2 | | | 87. |
| Δ | 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- | | | 87. |
| 6 | Credits/Payments | | | ********* |
| | 2010 estimated tax payments and 2009 overpayment credited to 2010 6a 234. | | | |
| | Exempt foreign organizations - tax withheld at source | | | |
| | Tax paid with application for extension of time to file (Form 8868) 6c 6c | | | |
| | Backup withholding erroneously withheld 6d 6d | | | |
| | Total credits and payments. Add lines 6a through 6d | | 2 | 34. |
| R | Enter any penalty for underpayment of estimated tax. Check here 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 | | | |
| 10 | Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid | | 1 | 47. |
| | Enter the amount of line 10 to be Credited to 2011 estimated tax ▶ 147. Refunded ▶ 11 | | - | 0. |
| | rt VII-A Statements Regarding Activities | | | |
| | 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 |
| | any political campaign? | 1a | | X |
| b | Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)? | 1b | | X |
| - | If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or | | | , |
| | distributed by the foundation in connection with the activities. | | | |
| C | Did the foundation file Form 1120-POL for this year? | 10 | | Х |
| | Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year | | | |
| • | (1) On the foundation. > \$ 0 . (2) On foundation managers > \$ | | | |
| e | Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation | | | |
| Ĭ | managers. ▶ \$ 0. | | | |
| 2 | Has the foundation engaged in any activities that have not previously been reported to the IRS? | 2 | | <u>X</u> |
| | 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) | | | |
| | MA | | | |
| 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 | X | <u></u> |
| 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 2010 or the taxable year beginning in 2010 (see instructions for Part XIV)? If "Yes," complete Part XIV | 9 | ļ | X |
| 10 | Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses | 10 | | X |

| Pa | rt VII-A Statements Regarding Activities (continued) | | | |
|----|---|----------------|---------------|--|
| _ | 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 acquire a direct or indirect interest in any applicable insurance contract before | | | |
| | August 17, 2008? | 12 | | <u>X</u> |
| 13 | Did the foundation comply with the public inspection requirements for its annual returns and exemption application? | 13 | X | |
| | Website address ► NOT APPLICABLE | | | |
| 14 | The books are in care of ► SUZANNE M. BLOM Telephone no ► 508-88 | 4 - 3 | <u> 311</u> | |
| | Located at ▶ 756 ORCHARD STREET, RAYNHAM, MA ZIP+4 ▶02 | 767 | <u>-10</u> | <u>28</u> |
| 15 | Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here | | , > | · |
| | and enter the amount of tax-exempt interest received or accrued during the year | | /A | |
| 16 | At any time during calendar year 2010, did the foundation have an interest in or a signature or other authority over a bank, | , | Yes | No |
| | securities, or other financial account in a foreign country? | 16 | | X |
| | See page 20 of the instructions for exceptions and filing requirements for Form TD F 90-22.1 If "Yes," enter the name of | | | |
| | the foreign country | <u> </u> | | L |
| Pe | rt VII-B Statements Regarding Activities for Which Form 4720 May Be Required | r | V | NI. |
| | File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. | | res | No |
| 1a | During the year did the foundation (either directly or indirectly) (1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No | | | |
| | (1) Engage in the error of eventuals of territory with a restaurant territory | | | |
| | (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? Yes X No | | | |
| | u dioqualition portion | | | |
| | (b) Tallinoi goods, sorvioss, or issuinos to (s. assept men men) a single production of the second control of | | | |
| | (4) Tay compensation to, or pay or followed the expenses of a sequence process. | | | |
| | (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)? | | | |
| | for the benefit or use of a disqualified person)? | | | |
| | 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) If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations | | | |
| U | section 53.4941(d)-3 or in a current notice regarding disaster assistance (see page 22 of the instructions)? N/A | 16 | | |
| | Organizations relying on a current notice regarding disaster assistance check here | 711. | | *************************************** |
| | Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected | | | |
| ٠ | before the first day of the tax year beginning in 2010? | 10 | | 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)). | | | |
| а | At the end of tax year 2010, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning | İ | | |
| | before 2010? Yes X No | | | |
| | If "Yes," list the years | | | |
| t | 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) | 2b | ļ | ļ |
| C | : If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. | | | |
| | > | | | |
| 38 | Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time | | | |
| | during the year? | | | |
| ŧ | o If "Yes," did it have excess business holdings in 2010 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, | 25 | 1 | |
| | 7 Offit 4720, to determine it the foundation had access beamers including in 2000. | 3b | | X |
| 4; | a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? | 4a | | |
| ı | b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that | 46 | | X |
| | had not been removed from jeopardy before the first day of the tax year beginning in 2010? | rm 99 0 | -PF | |

| _ | | ┪ | 1 | [| ĺ |
|---|--|---|------------------|--|---|
| 2 | Compensation of five highest-paid employees (other than those in | cluded on line 1). If none | , enter "NONE." | <u> </u> | <u></u> |
| | (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 | | | | |
| _ | | | | | |
| _ | | | | | |
| _ | | | | | |
| _ | | | | | |
| _ | | | <u> </u> | | |
| T | otal number of other employees paid over \$50,000 | | | . ▶ | |

023551

| Part VIII Information About Officers, Directors, Trustees, Foundation I Paid Employees, and Contractors (continued) | Managers, Highly | |
|--|---------------------------------------|--------------------|
| 3 Five highest-paid independent contractors for professional services. If none, enter "NON | E." | |
| (a) Name and address of each person paid more than \$50,000 | (b) Type of service | (c) Compensation |
| NONE | | |
| | | |
| | | - |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| Total number of others receiving over \$50,000 for professional services | | ▶ 0 |
| Part IX-A Summary of Direct Charitable Activities | | |
| List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical info | rmation such as the | Expenses |
| number of organizations and other beneficiaries served, conferences convened, research papers produced, e | C | |
| 1 <u>N/A</u> | | |
| | | |
| | | |
| 2 | | |
| | | |
| | | |
| 3 | | |
| | | |
| | | |
| 4 | | |
| | | |
| Post IV B. C of Drawers Deleted Investments | | |
| Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 1 | nd 2 | Amount |
| 1 N/A | | |
| N/A | | |
| | | |
| 2 | | |
| 2 | | |
| | | |
| All other program-related investments. See instructions. | | |
| 3 | | |
| U | | |
| | · · · · · · · · · · · · · · · · · · · | |
| Total. Add lines 1 through 3 | . • | 0. |
| Total. And liles I tillough o | | Form 000 DE (2010) |

| For | m 990-PF (2010) FOUNDATION, INC. | 11-3689271 | Page 8 |
|-----|--|----------------------------|-----------------|
| P | art X Minimum Investment Return (All domestic foundations must complete this part. Foreign fou | ndations, see 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 170 | ,551. 3,210. |
| b | Average of monthly cash balances | 1b 28 | 3,210. |
| C | Fair market value of all other assets | 10 | |
| d | Total (add lines 1a, b, and c) | 10 198 | 761. |
| 8 | Reduction claimed for blockage or other factors reported on lines 1a and | | |
| | 1c (attach detailed explanation) 1e 0 • | | |
| 2 | Acquisition indebtedness applicable to line 1 assets | | 0. |
| 3 | Subtract line 2 from line 1d | 3 198 | 761. |
| 4 | Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions) | 4 2 | ,981. |
| 5 | Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4. | | ,780. |
| 6 | Minimum investment return. Enter 5% of line 5 | 6 9 | ,789. |
| P | Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are XI foreign organizations check here and do not complete this part.) | nd certain | |
| 1 | Minimum investment return from Part X, line 6 | 1 9 | ,789. |
| 2a | Tax on investment income for 2010 from Part VI, line 5 | | -/ |
| b | Income tax for 2010 (This does not include the tax from Part VI.) | | |
| | Add lines 2a and 2b | 20 | 87. |
| 3 | Distributable amount before adjustments Subtract line 2c from line 1 | | ,702. |
| 4 | Recoveries of amounts treated as qualifying distributions | 4 | 0. |
| 5 | Add lines 3 and 4 | 5 9 | ,702. |
| 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 | | ,702. |
| | art XII Qualifying Distributions (see instructions) | · · · | |
| 1 | Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes | | |
| а | Expenses, contributions, gifts, etc - total from Part I, column (d), line 26 | 1a 25 | ,417. |
| b | Program-related investments - total from Part IX-B | 10 | 0. |
| 2 | Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes | 2 | |
| 3 | Amounts set aside for specific charitable projects that satisfy the | | |
| а | Suitability test (prior IRS approval required) | 3a | <u> </u> |
| b | Cash distribution test (attach the required schedule) | 3b | |
| 4 | Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4 | 4 25 | ,417. |
| 5 | Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment | | 0. |
| • | income Enter 1% of Part I, line 27b | 6 25 | ,417. |
| 6 | Adjusted qualifying distributions. Subtract line 5 from line 4 | [0] 23 | / T T / • |

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

Form **990-PF** (2010)

6 Adjusted qualifying distributions. Subtract line 5 from line 4

4940(e) reduction of tax in those years

Part XIII Undistributed Income (see instructions)

| | (a) Corpus | (b) Years prior to 2009 | (c) 2009 | (d) 2010 |
|---|---------------|----------------------------|--|--|
| 1 Distributable amount for 2010 from Part XI, | - Corpus | Tours prior to 2000 | | |
| line 7 | | | | 9,702. |
| 2 Undistributed Income, if any, as of the end of 2010 | | | | |
| a Enter amount for 2009 only | | | 0. | |
| ь Total for prior years: | | | | |
| <u>2009, 2008, 2007</u> | | 0. | | ····· |
| 3 Excess distributions carryover, if any, to 2010: | | | | |
| a From 2005 13,421. | | | | |
| b From 2006 15, 151. | | | | |
| c From 2007 20,423. | | | | |
| d From 2008 20,617. | | | | |
| e From 2009 12,280. | | | | |
| f Total of lines 3a through e | 81,892. | | | |
| 4 Qualifying distributions for 2010 from | | | | |
| Part XII, line $4 \triangleright \$$ 25, 417 . | | | | |
| a Applied to 2009, 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 | | | | |
| (Election required - see instructions) | 0. | | ······································ | 0.700 |
| d Applied to 2010 distributable amount | 15 515 | | | 9,702. |
| e Remaining amount distributed out of corpus | 15,715. | | ··· | 0. |
| 5 Excess distributions carryover applied to 2010 (If an amount appears in column (d), the same amount must be shown in column (a)) | 0. | | | |
| 6 Enter the net total of each column as indicated below: | | | | |
| 2 Corpus Add lines 3f, 4c, and 4e Subtract line 5 | 97,607. | | | |
| 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 2009 Subtract line | | | | |
| 4a from line 2a. Taxable amount - see instr. | | | 0. | |
| f Undistributed income for 2010 Subtract | | | | |
| lines 4d and 5 from line 1. This amount must | | | | |
| be distributed in 2011 | | | | 0. |
| 7 Amounts treated as distributions out of | | 777. | | |
| corpus to satisfy requirements imposed by | | | | |
| section 170(b)(1)(F) or 4942(g)(3) | 0. | | | |
| 8 Excess distributions carryover from 2005 | | | | |
| not applied on line 5 or line 7 | 13,421. | | | |
| 9 Excess distributions carryover to 2011. | | | | |
| Subtract lines 7 and 8 from line 6a | 84,186. | | | |
| 10 Analysis of line 9 | | | | |
| a Excess from 2006 15, 151. | | | | |
| b Excess from 2007 20, 423. | | | | |
| c Excess from 2008 20,617. | | | | |
| d Excess from 2009 12, 280. | | | | |
| e Excess from 2010 15,715. | | | | Form 000 PE (2010) |

FOUNDATION, INC.

11-3689271

Page 11 Part XV Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, show any relationship to any foundation manager or substantial contributor Recipient Purpose of grant or contribution Foundation **Amount** status of Name and address (home or business) recipient a Paid during the year SEE STATEMENT 10 **▶** 3a 22,915. Total **b** Approved for future payment NONE 0.

Total 023611 12-07-10

| Part XVI-A | Analysis of | Income-Producing | Activities |
|------------|-------------|------------------|-------------------|
| Part AVI-A | Analysis of | income-Producing | ACTIVITIE |

| Enter gross amounts unless otherwise indicated | Unrelated | business income | | by section 512, 513, or 514 | (e) |
|--|--|-----------------|-----------------------|-----------------------------|-----------------------------------|
| • | (a) Business | (b) Amount | (C) Exclu- sion | (d) | Related or exempt function income |
| 1 Program service revenue | code | Amount | code | Amount | Function income |
| 8 | | | | | |
| b | - | - | - | | |
| C | | | | | |
| d | | | | | |
| f | | | | | |
| g Fees and contracts from government agencies | | | | | |
| 2 Membership dues and assessments | | | | | |
| 3 Interest on savings and temporary cash | | | | | |
| investments | | | 14 | 1,919. 2,206. | |
| 4 Dividends and interest from securities | | | 14 | 2,206. | |
| 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 | 277. | 00.106 |
| 9 Net income or (loss) from special events | | | | | 29,136 |
| IO Gross profit or (loss) from sales of inventory | | | | | |
| 11 Other revenue | | | | | |
| a | | | | | |
| b | | | | | |
| <u> </u> | | | | | |
| | - | | | | |
| E | | |). | 4,402. | 29,136 |
| 2 Subtotal Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) | <u> </u> | | · •1l | 13 | 33,538 |
| (See worksheet in line 13 instructions to verify calculations.) | | • | | | |

| Line No. | Explain be | low how ea | ch activity fo | or whic | h income is r | eported i | n column | (e) of Part XVI- | A contribut | ed importantly to the accomp | lishment of |
|--------------------|--------------|------------|----------------|---------|---------------|-----------|----------|------------------|-------------|------------------------------|---------------------------------------|
| ▼ | | | | | | | | ich purposes). | | | |
| 9 | INCOME | FROM | GOLF | JOT | JRNAME | T F | OR F | UNDRAIS | ING A | CTIVITIES | |
| 9 | INCOME | FROM | CHARI | [TY | SHRED | DAY | FOR | FUNDRA | ISING | ACTIVITIES | |
| | | | | | | | | | | | |
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| 023621 | <u> </u> | | | | _ | | | | | - ,, | Form 990-PF (2010) |
| 023621 12-07-10 | | | | | | | | 10 | | | FOIII 230-FT (2010) |

Page 13

| Part XVII | Information Re Exempt Organ | | sfers To a | and Transactions | and Relation | ships With No | ncharitabl | е | منته |
|---|--|---------------------------------------|-----------------------|--|-----------------------|----------------------------|------------------------|-----------|-------|
| 1 Did the or | rganization directly or indi | rectly engage in any | of the following | ig with any other organizati | ion described in se | ction 501(c) of | | Yes | No |
| | | | | 27, relating to political orga | | | | | |
| | from the reporting found | | | • • • | | | İ | | |
| (1) Cash | | | | • | | | . 1a(1) | | Х |
| (2) Other | r assets | | • | · | • | • | 1a(2) | | Х |
| b Other tran | | • | | | | • | | | |
| (1) Sales | of assets to a noncharita | ible exempt organiza | tion | | | | 1b(1) | | X |
| | hases of assets from a no | - | | • | • | • | 1b(2) | | X |
| | al of facilities, equipment, | • | | | • | • | 1b(3) | | Х |
| | bursement arrangements | | | • | | | 1b(4) | | Х |
| | s or loan guarantees . | • • | • | • | | | 1b(5) | | Х |
| | rmance of services or me | embershin or fundrai | isino solicitatio | ns. | | | 1b(6) | | Х |
| | f facilities, equipment, ma | | | | | | 16 | | Х |
| = | | - | = | dule. Column (b) should a | lwavs show the fair | market value of the | goods, other as: | sets. | |
| or service | = | oundation. If the fou | ndation receive | ed less than fair market val | - | | - | • | |
| (a) Line no | (b) Amount involved | | | exempt organization | (d) Descripti | on of transfers, transacti | ons. and shanna a | тапаете | nts |
| (0, = | (2) / | (0) 141110 0 | N/A | | (4) 5333.54 | 011 01 1121010101 11210202 | -110, 4110 01141119 01 | | |
| | | | 21/ 22 | | | | - | | |
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| | | | | | | | | | |
| ın section | 501(c) of the Code (othe omplete the following sch | r than section 501(c edule. | | | izations described | | Yes | X |] No |
| (a) Name of organization (b) Type of organization | | | | | <u> </u> | (c) Description of r | elationship | | |
| | N/A | | | | | | | | |
| | | | | | 1 | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | arer (other than taxpayer | | ing accompanying schedules are ased on all information of which 2-2- | preparer has any know | | | ue, corre | ct, |
| | Print/Type preparer's na | | Preparer's s | | Date | Check If | PTIN | | |
| Paid | DAVID A. S | | Name | la Supm | 1-25-12 | self- employed | | | |
| Preparer Use Only | Firm's name ► PARENT, MCLAUGHLIN & NANGLE | | | | | Firm's EIN | | | |
| | Firm's address ▶ 16 | 0 FEDERAL | STREE | T, 6TH FL. | | | | | |
| | ВО | STON, MA | 02110 | | | Phone no 6 | 17-426- | 944 | 0 |
| | | | | <u> </u> | | | Form 990 | -PF | 2010) |

| FORM 990-PF INTEREST ON SAVI | INGS A | ND TEM | PORARY C | ASH : | INVESTMENTS | STATEMENT | 1 |
|---|--------|---------------------|-----------------------------|-------------|-----------------------------------|-----------|------------|
| SOURCE | | | | | | AMOUNT | |
| STATE STREET BANK | | | | | , | 1,9 | 19. |
| TOTAL TO FORM 990-PF, PART I, | LINE | 3, CO | LUMN A | | | 1,9 | 19. |
| FORM 990-PF DIVIDEND | S AND | INTER | EST FROM | SEC | JRITIES | STATEMENT | 2 |
| SOURCE | | GROSS | AMOUNT | | PITAL GAINS DIVIDENDS | COLUMN (A | .) |
| STATE STREET BANK | _ | | 3,160. | | 954. | 2,2 | 06. |
| TOTAL TO FM 990-PF, PART I, I | LN 4 = | | 3,160. | | 954. | 2,2 | 06. |
| FORM 990-PF | O | THER I | NCOME | | | STATEMENT | 3 |
| DESCRIPTION | | : | (A) REVENUE PER BOOKS | | (B) NET INVEST- MENT INCOME | | |
| GROSS INCOME FROM SPECIAL FUNDRAISING EVENTS | | | 48, | 477. | 0 | . 48,4 | 77. |
| TOTAL TO FORM 990-PF, PART I, | LINE | 11 | 48, | 477. | 0 | . 48,4 | 77. |
| FORM 990-PF | ACC | COUNTI | NG FEES | | | STATEMENT | 4 |
| DESCRIPTION | EXPE | A) NSES BOOKS | (B) NET INV MENT IN | | (C) ADJUSTED NET INCOM | | |
| PARENT, MCLAUGHLIN & NANGLE | | 2,200. | | 0 . | | 0. 2,2 | 00. |
| TO FORM 990-PF, PG 1, LN 16B | | 2,200. | | 0 . | • | 0. 2,2 | 00. |

| FORM 990-PF | XAT | ES | STATEMENT 5 | | |
|------------------------------------|------------------------------|-----------------------------------|------------------------------|----------------------|--|
| DESCRIPTION | (A) EXPENSES PER BOOKS | (B) NET INVEST- MENT INCOME | (C) ADJUSTED NET INCOM | | |
| COMM OF MA | 35. | 0. | | 0. 0. | |
| TO FORM 990-PF, PG 1, LN 18 35. | | | | 0. 0. | |
| FORM 990-PF | OTHER E | XPENSES | | STATEMENT 6 | |
| DESCRIPTION | (A) EXPENSES PER BOOKS | (B) NET INVEST- MENT INCOME | (C) ADJUSTED NET INCOM | | |
| BANK FEES GOLF TOURNAMENT EXPENSES | 377. 20,076. | | 20,07 | 0. 302. 6. 0. | |
| TO FORM 990-PF, PG 1, LN 23 | 20,453. | 75. | 20,07 | 302. | |
| FORM 990-PF | CORPORAT | E STOCK | | STATEMENT 7 | |
| DESCRIPTION | | ВО | OK VALUE | FAIR MARKET VALUE | |
| INVESTMENTS | <u></u> | 162,061. | 162,061. | | |
| TOTAL TO FORM 990-PF, PART I | I, LINE 10B | • | 162,061. | 162,061. | |

| | - LIST OF OFFICERS, DIRECTORS STATEMENT ES AND FOUNDATION MANAGERS | | | | |
|--|--|-------------------|---------------------------------|---------|--|
| NAME AND ADDRESS | TITLE AND AVRG HRS/WK | COMPEN- SATION | EMPLOYEE BEN PLAN CONTRIB | EXPENSE | |
| JAMES C. LIVELY 50 TANGLEWOOD DRIVE BRIDGEWATER, MA 02324 | PRESIDENT/DIREC | CTOR 0. | 0. | 0. | |
| RICHARD BURGESS JR 35 SHERRY LANE KINGSTON, MA 02364 | TREASURER 2.00 | 0. | 0. | 0. | |
| JOSEPH W. MITCHELL 108 ALTHEA DRIVE CUMMAQUID, MA 02637 | DIRECTOR 2.00 | 0. | 0. | 0. | |
| SUZANNE M. BLOM 75 MILLER STREET MIDDLEBORO, MA 02346 | CLERK/DIRECTOR 6.00 | 0. | 0. | 0. | |
| PETER DELLO RUSSO 50 LIBERTY PARK AVENUE BRAINTREE, MA 02346 | DIRECTOR 2.00 | 0. | 0. | 0. | |
| EDWARD F. SOUSA 3 STRIPER CIRCLE NO. DARTMOUTH, MA 02747 | DIRECTOR 2.00 | 0. | 0. | 0. | |
| TOTALS INCLUDED ON 990-PF, PAGE | 6, PART VIII | 0. | 0. | 0. | |

FORM 990-PF GRANT APPLICATION SUBMISSION INFORMATION STATEMENT PART XV, LINES 2A THROUGH 2D

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

SUZANNE M. BLOM BRIDGEWATER SAVINGS BANK, 756 ORCHARD STREET RAYNHAM, MA 02767

TELEPHONE NUMBER

508-884-3311

FORM AND CONTENT OF APPLICATIONS

SEE ATTACHED GRANT APPLICATION; IN ADDITION, A COVER LETTER INTRODUCING THE ORGANIZATION AND A PROPOSAL DESCRIBING GOALS, CONSTITUENTS, COMMUNITY NEEDS TO BE MET, AND PROJECTED OUTCOMES SHOULD BE ATTACHED AS WELL AS A COPY OF THE ORGANIZATION'S IRS TAX DETERMINATION LETTER INDICATING 501(C)(3) STATUS, IF APPLICABLE.

ANY SUBMISSION DEADLINES

NONE

RESTRICTIONS AND LIMITATIONS ON AWARDS

THE CHARITABLE FOUNDATION DOES NOT PROVIDE FUNDING FOR INDIVIDUALS, SPORTS, INDIVIDUAL SCHOOLS OR RELIGIOUS GROUPS. THE CHARITABLE FOUNDATION CONSIDERS GRANT PROPOSALS FROM ORGANIZATIONS INCLUDING NON-PROFITS AS DEFINED IN INTERNAL REVENUE CODE SECTION 501(C)(3). IT ALSO ACCEPTS APPLICATIONS FROM ORGANIZATIONS SERVING HOUSEHOLDS, ORGANIZATIONS THAT THE FOUNDATION HAS FINANCIALLY SUPPORTED IN THE PAST, ORGANIZATIONS THAT DIRECT SERVICES TO LOW-TO-MODERATE INCOME HOUSEHOLDS, ORGANIZATIONS THAT SUPPORT DEVELOPMENT AND MAINTENANCE OF HOUSING FOR LOW-TO-MODERATE INCOME HOUSEHOLDS, ORGANIZATIONS DEDICATED TO IMPROVING THE QUALITY OF COMMUNITY LIFE, AND TO OTHER ORGANIZATIONS WHOSE GOALS ARE DETERMINED TO BE CONSISTENT WITH THE FOUNDATION'S MISSION, ALL WITHIN A DEFINED MARKET AREA THAT INCLUDES THE COMMUNITIES SERVED BY BRIDGEWATER SAVINGS BANK.

STATEMENT 10

FORM 990-PF

| PAID | DURING THE YEAR | | |
|---|--|-----|--------|
| RECIPIENT NAME AND ADDRESS | RECIPIENT RELATIONSHIP AND PURPOSE OF GRANT | | AMOUNT |
| BERKLEY FIREFIGHTERS ASSOCIATION 5 NORTH MAIN STREET BERKLEY, MA 02779 | | N/A | 500. |
| BRIDGEWATER BUSINESS ASSOCIATION PO BOX 19 BRIDGEWATER, MA 02324 | | N/A | 5,500. |
| BRISTOL PLYMOUTH TECHNICAL HIGH SCHOOL 940 COUNTY STREET TAUNTON, MA 02780 | NONE GENERAL PURPOSE GRANT | N/A | 1,000. |
| | NONE GENERAL PURPOSE GRANT | N/A | 1,250. |
| NEW HOPE INC. 140 PARK STREET ATTLEBORO, MA 02703 | NONE GENERAL PURPOSE GRANT | N/A | 1,000. |
| PRO HOME INC 40 SUMMER STREET TAUNTON, MA 02780 | NONE GENERAL PURPOSE GRANT | N/A | 1,000. |
| PROJECT CONTEMPORARY COMPETITIVENESS INC PO BOX 27 BRIDGEWATER, MA 02324 | NONE GENERAL PURPOSE GRANT | N/A | 2,165. |
| SIGNATURE HEALTHCARE 680 CENTRE STREET BROCKTON, MA 02302 | NONE GENERAL PURPOSE GRANT | N/A | 1,000. |

GRANTS AND CONTRIBUTIONS

| BRIDGEWATER SAVINGS CHARITABLE | FOUNDATIO | | 11-3689271 |
|---|-------------------------------|-----|------------|
| SOUTH SHORE HOUSING 169 SUMMER STREET KINGSTON, MA 02364 | NONE GENERAL PURPOSE GRANT | N/A | 1,000. |
| SOUTHCOAST VISITING NURSE ASSOC, INC. 502 BEDFORD STREET FALL RIVER, MA 02720 | NONE GENERAL PURPOSE GRANT | N/A | 1,250. |
| SPECIAL OLYMPICS OF MASSACHUSETTS 66 MAIN STREET TAUNTON, MA 02780 | NONE GENERAL PURPOSE GRANT | N/A | 1,750. |
| ST. MARY'S EDUCATION FUND 450 HIGHLAND AVENUE FALL RIVER, MA 02720 | | N/A | 1,000. |
| ST. VINCENT DE PAUL P.O. BOX 1381 MIDDLEBORO, MA 02346 | NONE GENERAL PURPOSE GRANT | N/A | 500. |
| THE CHARITY GUILD 501 MAIN STREET, PO BOX 2372 BROCKTON, MA 02305 | NONE GENERAL PURPOSE GRANT | N/A | 1,000. |
| THE HAPPY WEDNESDAY FOUNDATION P.O. BOX 1190 LAKEVILLE, MA 02347 | NONE GENERAL PURPOSE GRANT | N/A | 1,500. |
| YMCA STRONG KIDS CAMPAIGN 320 MAIN STREET BROCKTON, MA 02301 | NONE GENERAL PURPOSE GRANT | N/A | 1,500. |
| TOTAL TO FORM 990-PF, PART XV, LI | INE 3A | | 22,915. |



Charitable Foundation, Inc.

Grant Application

| Today's Date: | Organization name: |
|---|---|
| Street Address: | City. State. Zipt. |
| Telephone number, with Area Code: | Fax number, with Area Code: |
| Contact person and title: | E-mail address: |
| Organization overview: | |
| | |
| Geographic area in Massachusens served b | by your organization that includes Plymouth and/or Bristol county: |
| Organization's annual budget: | |
| Do you have 501 (c)(3) status? | o 501 (c) (3) letter. If you do not have 501 (c) (3) status, we may require additional information |
| Amount of request: | |
| Specific purpose for which funds are reque | sted; |
| | |
| | |
| What are the goals, objectives and activities | s/strategies involved in this request? Please summarize: |
| | |
| Who will benefit if your request is granted: | |
| How does your request benefit low- to mod | derate-income individuals and families in the Bank's marketplace? |
| | |
| Total budget for this project: | |
| | of, any other individual, group or organization to date? If so, give amount |
| ls your organization eligible for matching g | grants? |
| What is your timeline? | |
| Name and signature of CEO or Executive D | Director of your organization: |
| | |

Mail completed grant application and supporting materials to:

Bridgewater Savings Charitable Foundation, Inc.
Bridgewater Savings Bank
P O Box 307
Bridgewater MA 02324