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990-PF

### **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

OMB No 1545-0052

Open to Public Inspection

		nt of the Treasury	Note. Th	ne foundation may	freated as a Privat be able to use a copy of th			requi	rements	Open to Public Inspection
F	or cal	endar year 2012	or tax year	r beginning		, 2012	, and ending			, 20
	Name	of foundation						A	Employer ident	ification number
	UNIC	ON SAVINGS E	BANK FOUN	DATION, I	NC.			$\perp$	06-15082	
	Numbe	er and street (or P O	box number if it	nail is not delivered	to street address)		Room/suite	В	•	iber (see instructions)
							]		(2	03) 830-4200
_	226	MAIN STREET	<u>:                                    </u>				l	$\perp$	<u>.</u>	<u> </u>
	City or	town, state, and ZIP of	code							
								6	If exemption appl pending, check he	ere
_		BURY, CT 068	310		<del></del>		<del></del>	4		
G	Che	ck all that apply		al return	Initial return	-	oublic charity	/   D	1. Foreign organi	t t
			<b>├</b> ──	l return	Amended ref					zations meeting the
				ress change	Name chang			_		
H					c)(3) exempt private f			E	If private foundate	uon status was terminated
$\perp$		ection 4947(a)(1) i			Other taxable pr			_	under section 507	(b)(1)(A), check here .
ı		market value of			unting method C	ashAcc	cruai	F		is in a 60-month termination
	_	ear (from Part II, o		. —	ther (specify)			-	under section 507	(b)(1)(8), check here .
			671,724.		column (d) must be on	i casri basis )	<u>'</u>			(d) Disbursements
Li	art I	Analysis of Rev	venue and E n columns (b).	expenses (The control of the control	(a) Revenue and	(b) Net inv	estment	(c)	Adjusted net	for charitable
		may not necessar	nly equal the a		expenses per books	incor	ne		ıncome	, purposes
_	Ι.	column (a) (see in			10,550.					(cash basis only)
	1		e foundation is	not required to		<u> </u>				
	2	Check ▶ ☐ atta	ch Sch B							
	3	Interest on savings a			59,885.		59,885.		-	ATCH 1
	4	Dividends and inte					,,,,,,			
		Gross rents								
_	١.	Net rental income or			18,447.					
Revenue	ba b	Net gain or (loss) fro Gross sales price for		., 159, 190.						
Ş	٠,	assets on line 6a Capital gain net in					L8,447.			
8	8	Net short-term ca								
	9	Income modification								
		Gross sales less retur	ns							
	ь	and allowances • • Less Cost of goods s								
		Gross profit or (los		redule)			1			
	11	Other income (atta								
	12	Total. Add lines 1			88,882.	•	78,332.			d
	13	Compensation of off	icers, directors,	trustees, etc	0					
s	14	Other employee s	alanes and wa	ages						
nse	15	Pension plans, en	nployee benefi	ts				_		
pel	16 a	Legal fees (attach	schedule)			ļ		_		
Administrative Expenses	b	Accounting fees (			8,000.	<u> </u>	22 05 1			8,000
tive	C	Other professiona	I fees (attach	schedule). * .	23,854.	ļ <u> </u>	21,254.			2,600.
tra	17	Interest			F 100	-				F 100
n.s	18	Taxes (attach schedu			5,192.	<u> </u>				5,192.
Ē	19	Depreciation (atta	•	•	<del></del>					
		Occupancy				<del> </del>				
Į	21	Travel, conference		_		1				<del> </del>
Ğ	22	Printing and publi				-			<del></del>	
Operating and	23	Other expenses (					<del></del>			
Jer:	24	Total operating a			37,046.		21,254.			15,792
ŏ		Add lines 13 throu			221,592.	<del>                                     </del>	21,634.			221,592
	25	Contribution \$ / giff			258,638.		21,254.			0 237,384
_	26_	Total expenses and dis		unes 24 and 25	250,050.	-	,254.		<del></del>	237,334.
	27	Subtract line 26 f		[7	-169,756.	-				
	a	Net investment in			100,730.		57,078.			1
		Adjusted net inco		•		<u> </u>				d

		Attached schedules and amounts in the	Beginning of year	End o	f year
	art II	Balance Sheets description column should be for end-of-year amounts only (See instructions )	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing			
ļ	2	Savings and temporary cash investments	43,328.	161,949.	161,949.
	3	Accounts receivable ▶	· · · · · · · · · · · · · · · · · · ·		
		Less allowance for doubtful accounts ▶			
	4	Pledges receivable			
		Less allowance for doubtful accounts ▶			
		Grants receivable			
		Receivables due from officers, directors, trustees, and other			
		disqualified persons (attach schedule) (see instructions)	_		
		Other notes and loans receivable (attach schedule)			
		Less allowance for doubtful accounts ▶			
တ္	i e	Inventories for sale or use			
Assets		Prepaid expenses and deferred charges			
As		Investments - U S and state government obligations (attach schedule). * *	383,090.	212,652.	212,652.
		Investments - corporate stock (attach schedule) ATCH 6			
		Investments - corporate bonds (attach schedule) ATCH 7		1,389,435.	
	11	Investments - land, buildings,		<u> </u>	
		and equipment basis  Less accumulated depreciation			
		(attach scredule)			
		Investments - mortgage loans			
	14	Land, buildings, and			-
		equipment basis Less accumulated depreciation (attach schedule)			
	15	(attach schedule) Other assets (describe ATCH 8 )	14,092.	12,433.	12,433.
	16	Total assets (to be completed by all filers - see the			
	'6	instructions Also, see page 1, item I)	2,610,621.	2,671,724.	2,671,724.
_	4-		5,095.		2,0,2,,21.
	1	Accounts payable and accrued expenses			
	!	Grants payable	_		
Liabilities	19	Deferred revenue			
薑	20	Loans from officers, directors, trustees, and other disqualified persons			
Ë	21	Mortgages and other notes payable (attach schedule)			
	22	Other liabilities (describe )			
	23	Total liabilities (add lines 17 through 22)	5,095.	1,714.	
_	-	Foundations that follow SFAS 117, check here	3,050.		
		and complete lines 24 through 26 and lines 30 and 31.			
Ses			2,605,526.	2,670,010.	
a	24	Unrestricted	2,003,320.	2,0,0,020.	1
Ba	25	Temporarily restricted			
2	26	Permanently restricted			
显		Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. ▶			
9	24 25 26	·			
Assets	27	Capital stock, trust principal, or current funds			
SS	28	Paid-in or capital surplus, or land, bldg, and equipment fund  Retained earnings, accumulated income, endowment, or other funds			
Α,	29	Total net assets or fund balances (see instructions)	2,605,526.	2,670,010.	
Net	30 31	Total liabilities and net assets/fund balances (see	2,003,320.	2,0,0,010.	
	3 '	Instructions)	2,610,621.	2,671,724.	
	Part I	Analysis of Changes in Net Assets or Fund		2/0/2//221	<u> </u>
		I net assets or fund balances at beginning of year - Part		(must agree with	
'		of-year figure reported on prior year's return)			2,605,526.
2	Ento-	or smount from Part I line 27a	• • • • • • • • • • • • • • • • • • • •		-169,756
2	Othe	er amount from Part I, line 27a er increases not included in line 2 (itemize)  ATCH 9	• • • • • • • • • • • • • • • • • • • •		234,240.
ى م	Othe A a a	lines 1.2 and 3		4	2,670,010
4	Maa	lines 1, 2, and 3 reases not included in line 2 (itemize) ▶	• • • • • • • • • • • • •		2,0,0,010
		I net assets or fund balances at end of year (line 4 minus	line 5) - Part II, column /		2,670,010
0	rota	**ATCH 5	mic oj - i art ii, wiwiiii (t	<i>)</i> , mie 00   <b>0</b>	Form <b>990-PF</b> (2012)

Form 990-PF (2012)	and Losses for Tax on Inve	estment Income			Page 3
			(b) How	(c) Date	(d) Date sold
· ·	describe the kind(s) of property sold (elick warehouse, or common stock, 200 s	L- MIC C+ )	acquired P - Purchase D - Donation	acquired (mo, day, yr)	(mo, day, yr)
1a SEE PART IV SCHEI			D - DOLLARION		
b			_		
C					
d					
е					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo (e) plus (f) min	
a					
b					
С					
d					
е					
Complete only for assets	showing gain in column (h) and owned	by the foundation on 12/31/69	(1)	Gains (Col (h) g	ain minus
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col (j), if any		(k), but not less Losses (from or	than -0-) or
_a					
b				<u> </u>	
С					
<u>d</u>					
е			ļ		
2 Capital gain net income or		gain, also enter in Part I, line 7			
	( " ·	(loss), enter -0- in Part I, line 7	2		18,447.
If gain, also enter in Par	or (loss) as defined in sections 12 t I, line 8, column (c) (see instr	fuctions) If (loss), enter -0- in $\}$			
			3		0
	Inder Section 4940(e) for Rec				
If section 4940(d)(2) applies, Was the foundation liable for	e private foundations subject to the leave this part blank the section 4942 tax on the distrib not qualify under section 4940(e).	utable amount of any year in the b		·	] Yes X No
	ount in each column for each year,		any entr	ies	
(a)	(b)	(c)	driy criti	(d)	
Base period years Calendar year (or tax year beginning in)	Adjusted qualifying distributions	Net value of nonchantable-use assets		Distribution i (col (b) divided b	
2011	220,679.	2,863,306.		<u> </u>	0.077071
2010	209,135.	2,726,341.			0.076709
2009	165,999.	2,012,166.			0.082498
2008	145,091.	2,319,535.			0.062552
2007	134,300.	2,813,897.			0.047727
	<del></del>				
2 Total of line 1, column (d)			2		0.346557
3 Average distribution ratio	for the 5-year base period - divide	the total on line 2 by 5, or by the			
•	dation has been in existence if less		3		0.069311
4 Enter the net value of nor	scharitable-use assets for 2012 fro	m Part X, line 5	4	2	,700 <u>,</u> 865.
			5		187,200.
	nt income (1% of Part I, line 27b)		6		571.
				<del> ,</del>	187,771.
			7		
8 Enter qualifying distribution If line 8 is equal to or gree Part VI instructions	eater than line 7, check the box i	n Part VI, line 1b, and complete	[8] that part	using a 1% ta	237,384. ix rate See the

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7

Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV

If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)

8a Enter the states to which the foundation reports or with which it is registered (see instructions)

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X

Х

3b

4a

b If "Yes," did it have excess business holdings in 2012 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? . . . . . . .

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its

charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2012?

foundation had excess business holdings in 2012)

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Total number of other employees paid over \$50,000

Form 990-PF (2012) Page 7 Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued) Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE." (a) Name and address of each person paid more than \$50,000 (b) Type of service (c) Compensation NONE Total number of others receiving over \$50,000 for professional services Part IX-A **Summary of Direct Charitable Activities** List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of Expenses organizations and other beneficianes served, conferences convened, research papers produced, etc Summary of Program-Related Investments (see instructions) Part IX-B Amount Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 1 NONE All other program-related investments. See instructions 3 NONE

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Page 8

Pa	Minimum Investment Return (All domestic foundations must complete this part. F see instructions.)	oreign foundati	ons,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, et	С,	
	purposes		
а	Average monthly fair market value of securities	1a	2,655,008.
b	Average of monthly cash balances	1b	78,743.
С	Fair market value of all other assets (see instructions)	1c	8, <u>244.</u>
d	Total (add lines 1a, b, and c)	1d	2,741,995.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d  Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see	3	2,741,995.
4			
	instructions)  Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	4	41,130.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	2,700,865.
6	Minimum investment return. Enter 5% of line 5		135,043.
Pa	The property of the property		
1	Minimum investment return from Part X, line 6	1	135,043.
2a	Tax on investment income for 2012 from Part VI, line 5	571.	-
b			
С	Add lines 2a and 2b	2c	571.
3	Add lines 2a and 2b  Distributable amount before adjustments Subtract line 2c from line 1	3	134,472.
4	Recoveries of amounts treated as qualifying distributions		
5	Add lines 3 and 4		134,472.
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,		
	line 1		134,472.
Pa	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		· -
·a			237,384.
b		1b	· · · · · · · · · · · · · · · · · · ·
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, e	tc.	
		2	
3	purposes  Amounts set aside for specific charitable projects that satisfy the	250	
a	- · · · · · · · · · · · · · · · · · · ·		
b		3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	237,384.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income		
-	Enter 1% of Part I, line 27b (see instructions)	I L	571.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	236,813.
•	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when	n calculating wh	
	qualifies for the section 4940(e) reduction of tax in those years	<b>--</b>	

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Form 990-PF (2012) Page 9 Part XIII Undistributed Income (see instructions) (a) (b) Corpus Years prior to 2011 2011 2012 Distributable amount for 2012 from Part XI, 134,472. Undistributed income, if any, as of the end of 2012 2 a Enter amount for 2011 only ...... Total for pnor years 20 10 ,20 09 ,20 08 Excess distributions carryover, if any, to 2012 From 2007 . . . . . . **b** From 2008 . . . . . . 14,546. From 2009 . . . . . . 73,508 d From 2010 ..... 84,956. e From 2011 . . . . . . 173,010. Total of lines 3a through e . . . . . . . . . . . Qualifying distributions for 2012 from Part XII, 237,384. line 4 ▶ \$ a Applied to 2011, but not more than line 2a b Applied to undistributed income of prior years (Election required - see instructions)..... Treated as distributions out of corpus (Election required - see instructions) . . . . . . . . . . 134,472. Applied to 2012 distributable amount . . . . . Remaining amount distributed out of corpus . . 102,912. Excess distributions carryover applied to 2012 (If an amount appears in column (d), the same amount must be shown in column (a) ) Enter the net total of each column as indicated below: 275,922. a Corpus Add lines 3f, 4c, and 4e Subtract line 5 Prior years' undistributed income Subtract line 4b from line 2b 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 . . . . . . . . . . . . . d Subtract line 6c from line 6b Taxable amount - see instructions Undistributed income for 2011 Subtract line 4a from line 2a Taxable amount - see f Undistributed income for 2012 Subtract lines 4d and 5 from line 1. This amount must be distributed in 2013 ........ Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see instructions) Excess distributions carryover from 2007 not applied on line 5 or line 7 (see instructions) . . . Excess distributions carryover to 2013. 275,922. Subtract lines 7 and 8 from line 6a . . . . . . . Analysis of line 9 10 a Excess from 2008 . . . 14,546 Excess from 2009 . . . 73,508 Excess from 2010 . . . 84,956. d Excess from 2011 . . .

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e Excess from 2012 . . .

102,912.

2E1490 1 000

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Part XV Supplementary Information (	continuea)			
3 Grants and Contributions Paid Durin	ng the Year or Appr	oved for F	uture Payment	
3 Grants and Contributions Paid Durin Recipient Name and address (home or business)	show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	Contribution	
a Paid during the year				
ATCH 14				
			!	
Total			> 3a	221,592.
b Approved for future payment				
2 Approved for future payment				
Total	<u> </u>			

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ter gross amounts unless otherwise indicated	Unrela	ated business income	Excluded by	section 512, 513, or 514	(e) Related or exempt
Program service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income (See instructions)
a					
b					
c					
d					
e					
f					
g Fees and contracts from government agencies					
Membership dues and assessments					
Interest on savings and temporary cash investments			+		
Dividends and interest from securities			14	59,885.	<u> </u>
Net rental income or (loss) from real estate.			ļ		
a Debt-financed property					
<b>b</b> Not debt-financed property	Ti control of the con				
Net rental income or (loss) from personal property					
Other investment income	1		18	18,447.	
Gain or (loss) from sales of assets other than inventory			1.0	10,44/.	
Net income or (loss) from special events					
Gross profit or (loss) from sales of inventory					
Other revenue ab			<del> </del>		
			-		
d					
e					
				L	
Subtotal Add columns (b), (d), and (e)	4 4-	1		78,332.	
Subtotal Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculated art XVI-B Relationship of Activities	culations) s to the Ac	complishment of E	xempt Purp		78,33
Total. Add line 12, columns (b), (d), and (e) the worksheet in line 13 instructions to verify calculated art XVI-B Relationship of Activities	culations) s to the Act ty for which	ccomplishment of E	xempt Purp	ooses e) of Part XVI-A contrib	78,33
rotal. Add line 12, columns (b), (d), and (e) see worksheet in line 13 instructions to verify calcart XVI-B Relationship of Activities ine No.  Explain below how each activities	culations) s to the Act ty for which	ccomplishment of E	xempt Purp	ooses e) of Part XVI-A contrib	78,33
rotal. Add line 12, columns (b), (d), and (e) se worksheet in line 13 instructions to verify calcart XVI-B Relationship of Activities ine No.  Explain below how each activities	culations) s to the Act ty for which	ccomplishment of E	xempt Purp	ooses e) of Part XVI-A contrib	78,33
rotal. Add line 12, columns (b), (d), and (e) se worksheet in line 13 instructions to verify calcart XVI-B Relationship of Activities ine No.  Explain below how each activities	culations) s to the Act ty for which	ccomplishment of E	xempt Purp	ooses e) of Part XVI-A contrib	78,33
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Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calcart XVI-B Relationship of Activities ne No.  Explain below how each activities	culations) s to the Act ty for which	ccomplishment of E	xempt Purp	ooses e) of Part XVI-A contrib	78,33
Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calcart XVI-B Relationship of Activities ne No.  Explain below how each activities	culations) s to the Act ty for which	ccomplishment of E	xempt Purp	ooses e) of Part XVI-A contrib	78,33
Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calce in tXVI-B Relationship of Activities ne No.  Explain below how each activities to the columns of th	culations) s to the Act ty for which	ccomplishment of E	xempt Purp	ooses e) of Part XVI-A contrib	78,33
Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calce in tXVI-B Relationship of Activities ne No.  Explain below how each activities to the columns of th	culations) s to the Act ty for which	ccomplishment of E	xempt Purp	ooses e) of Part XVI-A contrib	78,33
Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calce in tXVI-B Relationship of Activities ne No.  Explain below how each activities to the columns of th	culations) s to the Act ty for which	ccomplishment of E	xempt Purp	ooses e) of Part XVI-A contrib	78,33
Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calcart XVI-B Relationship of Activities ne No.  Explain below how each activities	culations) s to the Act ty for which	ccomplishment of E	xempt Purp	ooses e) of Part XVI-A contrib	78,33
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Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calcart XVI-B Relationship of Activities ne No.  Explain below how each activities	culations) s to the Act ty for which	ccomplishment of E	xempt Purp	ooses e) of Part XVI-A contrib	78,33
Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calcart XVI-B Relationship of Activities ne No.  Explain below how each activities	culations) s to the Act ty for which	ccomplishment of E	xempt Purp	ooses e) of Part XVI-A contrib	78,33
Total. Add line 12, columns (b), (d), and (e)	culations) s to the Act ty for which	ccomplishment of E	xempt Purp	ooses e) of Part XVI-A contrib	78,33
Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calcart XVI-B Relationship of Activities ne No.  Explain below how each activities	culations) s to the Act ty for which	ccomplishment of E	xempt Purp	ooses e) of Part XVI-A contrib	78,33
Total. Add line 12, columns (b), (d), and (e)	culations) s to the Act ty for which	ccomplishment of E	xempt Purp	ooses e) of Part XVI-A contrib	78,33
Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calcart XVI-B Relationship of Activities ne No.  Explain below how each activities	culations) s to the Act ty for which	ccomplishment of E	xempt Purp	ooses e) of Part XVI-A contrib	78,33

Form 990	)-PF (			VINGS BANK FOUNDA				06-1508			ge 13
Part X	(VII	Information Ro Exempt Organ	_	insfers To and Trans	sactions	and	l Relationship	s With Non	chari	table	)
1 D	d the			engage in any of the foll	lowing wit	h any	other organiza	tion described	- ==	Yes	No
ın	sec			section 501(c)(3) organiz							
	-		g foundation to	a noncharitable exempt	organizatio	on of					
		•	•	·	_				1a(1)		Х
									1a(2)		Х
-		transactions			• • • • •						
(1	) Sa	les of assets to a no	ncharitable exer	npt organization					1b(1)		Х
				ble exempt organization .					1b(2)		Х
				assets					1b(3)		Х
									1b(4)		Х
									1b(5)		X
(6	) Pe	erformance of service	es or membersh	ip or fundraising solicitation	ons				1b(6)		X
c S	harır	ng of facilities, equipn	nent, mailing lis	ts, other assets, or paid e	mployees				1c	l	X
				s," complete the followi							
				ces given by the reporti							
va	alue	in any transaction or	r sharing arrang	gement, show in column	(d) the v	alue o	of the goods, other	ner assets, or s	ervice	s rec	eived
(a) Line	no	(b) Amount involved	(c) Name of n	oncharitable exempt organization	<del></del>	•	ription of transfers, tr	ansactions, and sha	nng arra	angeme	nts
		N/A			N	/A					
								··			
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		• •	•	filiated with, or related thereton 501(a)(				ganizations	$\Box$ $\checkmark$	es 🛚	7 Na
		• •	•	ther than section 501(c)(	3)) UI III SI	ECLIOI	13277		<u>'</u>	C3 L4	;) IVO
<u>D</u> II	1 6	s," complete the follo (a) Name of organization		(b) Type of organiza	ation		(c) De	escription of relation	ship		
		(a) Name of organization	<i></i>	(b) Type of eigenize			(0) 5	occupation of rotation	<u></u>		
	-										
					-						
Sign	Undi	er penalties of perjury, I deci ect, and complete Declaration of	lare that I have examing preparer (other than the	ned this return, including accompa axpayer) is based on all information of	anying schedule of which prepar	es and rer has a	statements, and to the ny knowledge	best of my knowled	ge and	belief, i	t is tru
Here		Weberah Z	, Teil	105/06/13		S. V. F	& Treasure		S discu reparer		
. 1010	Sig	gnature of officer or trustee	-	Date	Title			(see instruction		Yes	N-
Doid	Ь	Print/Type preparer's	s name	Preparer's signature	11		Date	Check If	PTIN		

5/3/2013 self-employed P01449016

02110

JANA B. BACON, CPA Preparer ► WOLF & COMPANY F<u>irm'ş name</u> **Use Only** Firm's address ▶ 99 HIGH STREET, 21ST FLOOR

Firm's EIN ▶ 04 - 2689883

BOSTON,

Phone no 617-439-9700

Form 990-PF (2012)

### Schedule B

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

### **Schedule of Contributors**

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

OMB No 1545-0047

2012

Schedule B (Form 990, 990-EZ, or 990-PF) (2012)

Name of the organization		Employer identification number
UNION SAVINGS BANK FO	UNDATION, INC.	06-1508286
Organization type (check one)		
Filers of:	Section:	
Form 990 or 990-EZ	501(c)( ) (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a private fou	indation
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private founda	tion
	501(c)(3) taxable private foundation	
	vered by the <b>General Rule</b> or a <b>Special Rule</b> .  (8), or (10) organization can check boxes for both the General Rule and a	Special Rule See
instructions		
General Rule		
	ling Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 ne contributor. Complete Parts I and II.	or more (in money or
Special Rules		
under sections 509(a	3) organization filing Form 990 or 990-EZ that met the 33 1/3 % support ()(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the 200 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form II	e year, a contribution of
during the year, total	7), (8), or (10) organization filing Form 990 or 990-EZ that received from contributions of more than \$1,000 for use <i>exclusively</i> for religious, charitases, or the prevention of cruelty to children or animals. Complete Parts I, II	ible, scientific, literary,
during the year, continot total to more that year for an exclusively applies to this organi	7), (8), or (10) organization filing Form 990 or 990-EZ that received from abbutions for use <i>exclusively</i> for religious, charitable, etc., purposes, but the \$1,000. If this box is checked, enter here the total contributions that were religious, charitable, etc., purpose. Do not complete any of the parts unless that the received nonexclusively religious, charitable, etc., contributions that were religious to the religious that the rel	ese contributions did re received during the ss the <b>General Rule</b> butions of \$5,000 or
990-EZ, or 990-PF), but it must	anot covered by the General Rule and/or the Special Rules does not file S answer "No" on Part IV, line 2 of its Form 990, or check the box on line F to certify that it does not meet the filing requirements of Schedule B (Fo	l of its Form 990-EZ or on

For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF.

Name of organization UNION SAVINGS BANK FOUNDATION, INC.

Employer identification number 06-1508286

Part I	Contributors (see instructions). Use duplicate copies of Part	I if additional space is need	led.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1_	UNION SAVINGS BANK PO BOX 647 DANBURY, CT 06813	\$10,550.	Person X Payroll Noncash  (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<b></b>		\$	Person Payroll Noncash  (Complete Part II if there is a noncash contribution)
 (a) No.	(b) Name, address, and ZIP + 4	(c) Total 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) Total 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) Total 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) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)

Schedule B (Form 990, 990-EZ, or 990-PF) (2012)

Name of organization UNION SAVINGS BANK FOUNDATION, INC.

Employer identification number 06-1508286

Part II	Noncash Property	(see instructions).	Use duplicate copies of	f Part II if additional s	pace is needed.
	,	<b>,</b> ,			

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	<b></b>
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
	<u> </u>	1	L

Name of organization UNION SAVINGS BANK FOUNDATION, INC.

Employer identification number

06-1508286

Part III	Exclusively religious,	charitable, etc.	, individual c	ontributions	to section 5	01(c)(7), (8),	or (10) org	anizations
	that total more than	\$1,000 for the y	ear. Complet	e columns (a	ı) through (e	e) and the fol	lowing line	entry

For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc., contributions of **\$1,000** or less for the year. (Enter this information once. See instructions.)

No. om	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
art I			
		(e) Transfer of gift	
	Transferee's name, address, and a	ZIP + 4	Relationship of transferor to transferee
-			
No.		<u></u>	
om rt l	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	. <b></b>   -		
		(e) Transfer of gift	
	Transferee's name, address, and a	<u>ZIP + 4                                  </u>	Relationship of transferor to transferee
	·	<b></b>	
No.	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
rt I		<del></del>	
-		(e) Transfer of gift	
		(o) rranoror or give	
	Transferee's name, address, and	ZIP + 4	Relationship of transferor to transferee
 	(b) Purpose of gift	(c) Use of aift	(d) Description of how gift is held
m	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
om	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
m	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
om	(b) Purpose of gift		(d) Description of how gift is held
om	(b) Purpose of gift	(c) Use of gift  (e) Transfer of gift	(d) Description of how gift is held
om		(e) Transfer of gift	
No. om rt 1	(b) Purpose of gift  Transferee's name, address, and	(e) Transfer of gift	(d) Description of how gift is held

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## ATTACHMENT 1

SECURITIES	
FROM	
INTEREST	
AND	
· DIVIDENDS	
т Н	İ
PART	
990PF,	
FORM	

ADJUSTED NET INCOME		
NET INVESTMENT INCOME	59,885.	59,885.
REVENUE AND EXPENSES PER BOOKS	59,885.	59,885.
		TOTAL
DESCRIPTION	DIVIDEND & INTEREST	

CHARITABLE <u>PURPOSES</u>	8,000.	8,000.
ADJUSTED NET INCOME		
NET INVESTMENT INCOME		
REVENUE AND EXPENSES PER BOOKS	8,000.	8,000.
		TOTALS
DESCRIPTION	AUDIT FEE	

# FORM 990PF, PART I - OTHER PROFESSIONAL FEES

CHARITABLE PURPOSES	50.	2,600.
ADJUSTED NET INCOME		
NET INVESTMENT INCOME	21,254.	21,254.
REVENUE AND EXPENSES PER BOOKS	21,254. 50. 2,550.	23,854.
DESCRIPTION	INVESTMENT MANAGEMENT FEE FILING FEES TAX PREPERATION FEE	TOTALS

71 17-11

FORM 990PF, PART I - TAXES

CHARITABLE <u>PURPOSES</u>	5,192.	5,192.
ADJUSTED NET INCOME		
NET INVESTMENT INCOME		
REVENUE AND EXPENSES PER BOOKS	5,192.	5,192.
		TOTALS
DESCRIPTION	FEDERAL EXCISE TAX	

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OBLIGAT
STATE
AND
U.S.
- II
PART
90PF,

ENT 5	ENDING <u>FMV</u>	100,465. 112,187.	212,652.
ATTACHMENT 5	ENDING BOOK VALUE	100,465. 112,187.	212,652.
STATE OBLIGATIONS	BEGINNING BOOK VALUE	276,749. 106,341.	383,090.
FORM 990PF, PART II - U.S. AND STAT	DESCRIPTION	US GOVERNMENT AGENCY SECURITIE MUNICIPAL BONDS	US OBLIGATIONS TOTAL

CLOC TKCCAA

### ATTACHMENT

### - CORPORATE STOCK FORM 990PF, PART II

ENDING <u>FMV</u>	895,255.	895,255.
ENDING BOOK VALUE	895,255.	895,255.
BEGINNING BOOK VALUE	1,541,033.	1,541,033.
DESCRIPTION	MARKETABLE EQUITY SECURITIES	TOTALS

77 17\_A 1E

## FORM 990PF, PART II - CORPORATE BONDS

ENDING <u>FMV</u>	569,856. 819,579. 1,389,435.
ENDING BOOK VALUE	569,856. 819,579. 1,389,435.
BEGINNING BOOK VALUE	579,893. 49,185. 629,078.
DESCRIPTION	CORPORATE DEBT SECURITIES MUTUAL FUNDS TOTALS

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OTHER
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PART
990PF,
FORM

ENDING <u>FMV</u>	12,433.
ENDING BOOK VALUE	12,433.
BEGINNING BOOK VALUE	14,092.
DESCRIPTION	ACCRUED INTEREST RECEIVABLE

14,092.

TOTALS

コレ ハーヘト 77

UNION SAVINGS BANK FOUNDATION, INC.

06-1508286

ATTACHMENT 9

FORM 990PF, PART III - OTHER INCREASES IN NET WORTH OR FUND BALANCES

DESCRIPTION

AMOUNT

UNREALIZED GAINS (LOSS) ON INVESTMENTS

234,240.

TOTAL

234,240.

ATTACHMENT 10

CONTRIBUTIONS EXPENSE ACCT TO EMPLOYEE AND OTHER COMPENSATION BENEFIT PLANS ALLOWANCES	0 0 0	0 0	0 0 0	0 0	0 0	0 0
TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	PRESIDENT & CEO/TRUSTEE 1.00	TRUSTEE 1.00	TRUSTEE 1.00	TRUSTEE 1.00	TRUSTEE 1.00	TRUSTEE
NAME AND ADDRESS	FRAN DATTALO 226 MAIN STREET DANBURY, CT 06810	JEFFREY M LEVINE 226 MAIN STREET DANBURY, CT 06810	JOHN M MURPHY 226 MAIN STREET DANBURY, CT 06810	CYNTHIA STEVENS 226 MAIN STREET DANBURY, CT 06810	JOHN A BRIGHENTI 226 MAIN STREET DANBURY, CT 06810	RAY P BOA

ATTACHMENT 10 (CONT'D)

FORM 990PF,

- LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
GREGORY S ONEGLIA 226 MAIN STREET DANBURY, CT 06810	TRUSTEE 1.00	0	0	0
ABNER BURGOS-RODRIGUEZ 226 MAIN STREET DANBURY, CT 06810	TRUSTEE 1.00	0	0	0
RAY H UNDERWOOD 226 MAIN STREET DANBURY, CT 06810	TRUSTEE 1.00	0	0	0
ARNOLD E FINALDI JR 226 MAIN STREET DANBURY, CT 06810	TRUSTEE 1.00	0	0	0
STEVEN G ROSENTEL 226 MAIN STREET DANBURY, CT 06810	TRUSTEE 1.00	0	0	0
DONALD T STUDLEY 226 MAIN STREET DANBURY, CT 06810	TRUSTEE 1.00	0	0	0

•						
EXPENSE ACCT AND OTHER ALLOWANCES	0	O	0	0	0	0
CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	0	0	0	0	0	0
COMPENSATION	0	0	0	0	0	0
TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	CHAIRMAN/TRUSTEE 1.00	TRUSTEE 1.00	SECRETARY 1.00	SVP/TREASURER 1.00	TRUSTEE 1.00	GRAND TOTALS
NAME AND ADDRESS	JACK T TYRANSKY 226 MAIN STREET DANBURY, CT 06810	LUCIE H VOVES 226 MAIN STREET DANBURY, CT 06810	LYNNE A BEARDSLEY 226 MAIN STREET DANBURY, CT 06810	DEBORAH FISH 226 MAIN STREET DANBURY, CT 06810	DAVID S HAWLEY 226 MAIN STREET DANBURY, CT 06810	

א ידיידי א	CHMENT	ר ר
W 1 1 1		

### FORM 990PF, PART XV - NAME, ADDRESS AND PHONE FOR APPLICATIONS

MARIE O'NEILL, SVP MARKETING 225 MAIN STREET DANBURY, CT 06810 203-830-4200

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### 990PF, PART XV - FORM AND CONTENTS OF SUBMITTED APPLICATIONS

AN EXAMPLE OF THE GRANT APPLICATION IS ATTACHED TO THE 990-PF. THESE APPLICATIONS ARE AVAILABLE AT WWW.UNIONSAVINGS.COM. THEY MAY BE EMAILED TO THE FOUNDATION'S EMAIL ADDRESS OR MAILED TO PO BOX 647 DANBURY CT 06813-0647.

Union Savings > Apply For a Grant

Send To Printer

### How to Apply for a USB Foundation Grant

The USB Foundation makes annual donations to 501(c)(3) organizations and other non-profits that help meet health and human service needs of the residents who reside in the markets we serve. We particularly focus on funding activities that support youth development and education

The Foundation rarely, if ever, approves grants for

- Public entities
- Municipalities
- · Sectarian organizations
- Capital Expenses
- · Multi-year requests
- · Requests from individuals or endowments
- · Start-up or first year programs
- Programs that do not specifically benefit the USB service territory

**Please Note:** Organizations awarded a USB Foundation grant in 2012 are not eligible to apply for a 2013 Foundation Grant Award

### Required Documents Must Be Submitted Electronically:

- · Fully Completed Grant Application
- · Budget for the program in need of funding
- Most recent financial statement(s)

All of the above must be submitted to usbfoundation@unionsavings com

Maximum grant amount awarded, per Organization, is \$10,000

Mailed Applications will not be accepted.

Applications submitted without all required documentation will not be considered for a grant award.

Applications are only accepted between June 1 and August 31, 2013

The USB Foundation is no longer accepting applications at this time.

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### 990PF, PART XV - RESTRICTIONS OR LIMITATIONS ON AWARDS

GRANTS ARE RARELY APPROVED FOR: PUBLIC ENTITIES, MUNICIPALITIES, SECTARIAN ORGANIZATIONS, CAPITAL EXPENSES, OR MULT-YEAR REQUESTS. REQUESTS FROM INDIVIDUALS OR FROM ENDOWMENTS ARE ALSO RARELY GRANTED. IN ADDITION, ORGANIZATIONS AWARDED A 2012 GRANT ARE NOT ELIGIBLE TO APPLY IN 2013.

FORM 990PE, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR

FOUNDATION STATUS OF RECIPIENT

NOT RELATED 501(C)(3)

ON FILE - DETAILS UPON REQUEST

SEE ATTACHMENT

RECIPIENT NAME AND ADDRESS

EXEMPT PURPOSE

PURPOSE OF GRANT OR CONTRIBUTION

221,592

AMOUNT

ATTACHMENT 14

TOTAL CONTRIBUTIONS PAID

221, 592.

ATTACHMENT 14

### **USB Foundation - 2012 Applications Reviewed by Grants Committee**

ORGANIZATION NAME	ADDRESS			Grant Award
AmeriCares Free Clinics, Inc.	88 Hamilton Avenue	Stamford, CT	06902	\$10,000
Animal Welfare Society, Inc.	8 Dodd Road	New Milford, CT	06776	\$3,250
Bethel Visiting Nurse Association	70 Stony Hill Road	Bethel, CT	06801	\$10,000
Catholic Charities	30 Main Street	Danbury, CT	06810	\$10,000
Catholic Charities of Fairfield County	24 Grassy Plain Street	Bethel, CT	06801	\$5,000
Connecticut Counseling Centers, Inc.	60 Beaver Brook Road	Danbury, CT	06810	\$10,000
Connecticut Junior Republic (CJR)	550 Goshen Road	Litchfield, CT	06759	\$10,000
Connecticut Radio Information System	315 Windsor Avenue	Windsor, CT	06095	\$5,000
Danbury Children First, Inc.	83 West Street	Danbury, CT	06810	\$10,000
Danbury Schools and Business Collaborative	63 Beaver Brook Rd	Danbury, CT	06810	\$5,000
Danbury Youth Services, Inc.	91 West Street	Danbury, CT	06810	\$7,500
Family Resource Center at Vogel- Wetmore School	68 Church Street	Torrington, CT	06790	\$3,100
Gifts of Love	P O Box 463	Avon, CT	06001-0463	\$3,000
Greater New Milford WHEELS Program,	40 Main Street	New Milford, CT	06776	\$7,500
NM Advisory Board, Inc. Greenwoods Counseling Referrals, Inc.	P O Box 1549	Litchfield, CT	06759	\$7,000
HomeFront, Inc.	88 Hamilton Avenue	Stamford, CT	06902	\$7,500
Jericho Partnership, Inc.	13 Rose Street	Danbury, CT	06810	\$5,000
Kent Affordable Housing, Inc.	PO Box 265	Kent, CT	06757-0265	\$9,368
Meals on Wheels of Ridgefield, CT	25 Gilbert Street	Ridgefield, CT	06877	\$4,575
New Milford Visiting Nurse Association	68 Park Lane Road	New Milford, CT	06776	\$8,400
Northwestern Connecticut YMCA	259 Prospect Street	Torrington, CT	06790	\$10,000
Oliver Wolcott Library	P O Box 187	Litchfield, CT	06759-0187	\$5,579
Shelter of the Cross	18 Dr Aaron B Samuel Boulevard	Danbury, CT	06812	\$10,000
Susan B. Anthony Project, Inc.	179 Water Street	Torrington, CT	06790	\$10,000
The Visiting Nurse Association of Litchfield, Inc.	P O Box 422	Litchfield, CT	06579	\$10,000
United Way of Northwest Connecticut	16 Bird Street	Torrington, CT	06790	\$9,320
Western Connecticut Association for Human Rights, Inc.	268 Main Street	Danbury, CT	06810	\$5,500
Western Connecticut Home Care, Inc.	4 Liberty Street	Danbury, CT	06810	\$10,000
Women's Center of Greater Danbury, Inc.	2 West Street	Danbury, CT	06810	\$10,000
TOTAL				\$221,5

### SCHEDULE D (Form 1041)

OMB No 1545-0092

Employer identification number

Department of the Treasury Internal Revenue Service

Name of estate or trust

Capital Gains and Losses

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

► Information about Schedule D (Form 1041) and its separate instructions is at www.irs.gov/form1041.

	NION SAVINGS BANK FOUNDATION,				06-150828	36	
lote	: Form 5227 filers need to complete only Par						
Par	Short-Term Capital Gains and Los	sses - Assets	Held One Ye	ar or Less	<del></del>		
	(a) Description of property (Example 100 shares 7% preferred of "Z" Co)	(b) Date acquired (mo , day, уг)	(c) Date sold (mo , day, yr )	(d) Sales price	(e) Cost or other b		(f) Gain or (loss) for the entire year Subtract (e) from (d)
1a							
			-			-	
							<del></del>
				· <del></del> -			<u></u>
b	Enter the short-term gain or (loss), if any, fi	rom Schedule D	-1, line 1b			1b	4,194.
2	Short-term capital gain or (loss) from Form	ns 4684, 6252,	6781, and 882	4		2	
3	Net short-term gain or (loss) from partners					3	
4	Short-term capital loss carryover Enter Carryover Worksheet					4	(
5	Net short-term gain or (loss). Combine	lines 1a through	th 4 in colum	n (f) Enter here an	d on line 13, þ	5	4,194.
Par	column (3) on the back	sses - Assets	Held More T	han One Year		<u> </u>	4,104.
	(a) Description of property (Example 100 shares 7% preferred of "Z" Co)	(b) Date acquired (mo , day, yr )		(d) Sales price	(e) Cost or other to (see instruction		(f) Gain or (loss) for the entire year Subtract (e) from (d)
6a							
					<del> </del>		
					<u> </u>		
					<u> </u>		
					ļ	_	
b	Enter the long-term gain or (loss), if any, fr	om Schedule D-	-1, line 6b			6b	1,378.
7	Long-term capital gain or (loss) from Form	is 2439, 4684,	6252, 6781, ar	nd 8824		7	
8	Net long-term gain or (loss) from partners	hips, S corporat	ions, and other	estates or trusts		8_	
9	Capital gain distributions					9	12,875.
10	Gain from Form 4797, Part I					10	
11	Long-term capital loss carryover Enter Carryover Worksheet	the amount, if	any, from lir	ne 14 of the 2011	Capital Loss	11	(
12	Net long-term gain or (loss). Combine lin column (3) on the back	nes 6a through	11 in colum	n (f) Enter here and	on line 14a,	12	14,253.
For F	Paperwork Reduction Act Notice, see the Instru						e D (Form 1041) 201

ched	ule D (Form 1041) 2012				Page 2
Par	t III Summary of Parts I and II		(1) Beneficiaries'	(2) Estate's	(2) Total
	Caution: Read the instructions before completing this	part.	(see instr)	or trust's	(3) Total
3	Net short-term gain or (loss)	13			4,194.
4	Net long-term gain or (loss):				
а	Total for year	14a	·		14,253.
b	Unrecaptured section 1250 gain (see line 18 of the wrksht)	14b			
С	28% rate gain	14c			
5	Total net gain or (loss). Combine lines 13 and 14a	15			18,447.
lote	: If line 15, column (3), is a net gain, enter the gain on Form 1041, line 4 go to Part V, and do not complete Part IV. If line 15, column (3), is a n	(or Fo	m 990-T, Part I, line	4a) If lines 14a a	nd 15, column (2), are net
jairis, ieces	sary	161 1033		iu ille Capital Los	S Carryover Violesheet, as
Par	t IV Capital Loss Limitation				
	Enter here and enter as a (loss) on Form 1041, line 4 (or Form 990-T, F	Part I, I	ne 4c, if a trust), the si	maller of	
а	The loss on line 15, column (3) or b \$3,000.  If the loss on line 15, column (3), is more than \$3,000, or if Form 1041,			<u>16</u>	<u>( )</u>
Note Loss (	: If the loss on line 15, column (3), is more than \$3,000, <b>or</b> if Form 1041, Carryover Worksheet in the instructions to figure your capital loss carryover	page	1, line 22 (or Form 99	0-1, line 34), is a	ioss, complete the Capital
Par		es		<del></del>	
	1041 filers. Complete this part only if both lines 14a and 15 in col		2) are gains or an a	amount is entere	ed in Part Lor Part II and
	is an entry on Form 1041, line 2b(2), and Form 1041, line 22, is more				a miration rate mana
	ion: Skip this part and complete the Schedule D Tax Worksheet in the				
	ther line 14b, col (2) or line 14c, col (2) is more than zero, or				
	oth Form 1041, line 2b(1), and Form 4952, line 4g are more than zero				
	990-T trusts. Complete this part only if both lines 14a and 15 a				
	orm 990-T, and Form 990-T, line 34, is more than zero. Skip this part	and c	omplete the Schedu	lle D Tax Work	sheet in the instructions
f eitr	ner line 14b, col. (2) or line 14c, col. (2) is more than zero				
17	Enter taxable income from Form 1041, line 22 (or Form 990-T, line 3	34) .	17		
18	Enter the smaller of line 14a or 15 in column (2)				
	but not less than zero				
19	Enter the estate's or trust's qualified dividends				
	from Form 1041, line 2b(2) (or enter the qualified				
	dividends included in income in Part I of Form 990-T) 19				
20	Add lines 18 and 19				I .
21	If the estate or trust is filing Form 4952, enter the				
	amount from line 4g, otherwise, enter -0 ▶ 21				1
22	Subtract line 21 from line 20 If zero or less, enter -0		22		
23	Subtract line 22 from line 17 If zero or less, enter -0		23		
				İ	
24	Enter the <b>smaller</b> of the amount on line 17 or \$2,400		24		
25	Is the amount on line 23 equal to or more than the amount on line 24	47			
	Yes. Skip lines 25 and 26, go to line 27 and check the "No" box	<b>(</b> ,			
	No. Enter the amount from line 23				
26	Subtract line 25 from line 24		26		
27	Are the amounts on lines 22 and 26 the same?				
	Yes. Skip lines 27 thru 30, go to line 31 No. Enter the smaller of line 17 or line	ne 22	27		!
28	Enter the amount from line 26 (If line 26 is blank, enter -0-)		28		
29	Subtract line 28 from line 27		. 29		
30	Multiply line 29 by 15% ( 15)			30	
31	Figure the tax on the amount on line 23 Use the 2012 Tax Rat				
	(see the Schedule G instructions in the instructions for Form 1041) .			31	
32	Add lines 30 and 31			32	<del> </del>
33	Figure the tax on the amount on line 17. Use the 2012 Tax Rat	e Sch	iedule for Estates a	nd Trusts	
	(see the Schedule Ginstructions in the instructions for Form 1041)		<u>.</u> <u>.</u>	33	
34	Tax on all taxable income. Enter the smaller of line 32 or line 33				
	G, line 1a (or Form 990-T, line 36)			34	1

V 12-4.1F

Schedule D (Form 1041) 2012

### SCHEDULE D-1 (Form 1041)

### Continuation Sheet for Schedule D (Form 1041)

OMB No 1545-0092

2012

Department of the Treasury Internal Revenue Service Name of estate or trust

Attach to Schedule D to list additional transactions for lines 1a and 6a. ▶ Information about Schedule D (Form 1041) and its separate instructions is at www.irs.gov/form1041.

Employer identification number

UNION SAVINGS BANK FOUNDATION, INC. 06-1508286 Short-Term Capital Gains and Losses - Assets Held One Year or Less (b) Date (a) Description of property (Example 100 sh 7% preferred of "Z" Co) (c) Date sold (mo , day, yr ) (e) Cost or other basis (f) Gain or (loss) (d) Sales price acquired Subtract (e) from (d) (see instructions) (mo , day, yr ) 1a SALE OF SECURITIES **VARIOUS VARIOUS** 656,085 651,891 4,194. 1b Total. Combine the amounts in column (f) Enter here and on Schedule D, line 1b. 4,194.

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

Schedule D-1 (Form 1041) 2012

Name of estate or trust as shown on Form 1041 Do not enter name and employer identification number if shown on the other side Employer identification number Part II Long-Term Capital Gains and Losses - Assets Held More Than One Year (b) Date (c) Date sold (mo , day, yr ) (e) Cost or other basis (see instructions) (f) Gain or (loss) Subtract (e) from (d) (a) Description of property (Example 100 sh 7% preferred of "Z" Co) (d) Sales price acquired (mo , day, yr ) 6a SALE OF SECURITIES **VARIOUS VARIOUS** 490,230. 488,852 1,378.

1,378.

6b Total. Combine the amounts in column (f) Enter here and on Schedule D, line 6b

UNION SAVINGS BANK FOUNDATION, INC. 06-1508280
FORM 990-PF - PART IV
CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

CAPITAL GAINS AND LOSSES FOR TAX ON INVES							<u>ENT INCOM</u>	<u> E</u>
Kind of				ription		P or D	Date acquired	Date sold
Gross sale	Depreciation	Cost or	FMV	Adj basis as of	Excess of	_	Gain	
price less	allowed/	other	as of	as of	FMV over		or	
expenses of sale	allowable	basis	12/31/69	12/31/69	adı basıs	$\bot$	(loss)	
		TOTAL CAPIT	AL GAIN DIS	TRIBUTIONS			12,875.	
		SALE OF SECT	ID TOT DO			P	VARIOUS	VARIOUS
490,230.		PROPERTY TY		IES			1,378.	VARIOUS
490,230.		SALE OF SEC	פשרתדפו			P	VARIOUS	VARIOUS
656,085.		PROPERTY TY		IES			4,194.	VIII.2005
030,003.		031,031.					1,231.	
COTAL GAIN(L	oss)				• • • • • •		18,447.	
	:							
	i							