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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

OMB No 1545-0052

2012

Open to Public Inspection

For calendar year 2012 or tax year beginning , 2012, and ending , 20

Name of foundation JEWETT CITY SAVINGS BANK FOUNDATION INC		A Employer identification number 13-4242396						
Number and street (or P O box number if mail is not delivered to street address) 111 MAIN STREET	Room/suite	B Telephone number (see instructions) (860) 376-4444						
City or town, state, and ZIP code JEWETT CITY, CT 06351		C If exemption application is pending, check here <input type="checkbox"/>						
G Check all that apply: <table border="0" style="width:100%;"> <tr> <td><input type="checkbox"/> Initial return</td> <td><input type="checkbox"/> Initial return of a former public charity</td> </tr> <tr> <td><input type="checkbox"/> Final return</td> <td><input type="checkbox"/> Amended return</td> </tr> <tr> <td><input type="checkbox"/> Address change</td> <td><input type="checkbox"/> Name change</td> </tr> </table>		<input type="checkbox"/> Initial return	<input type="checkbox"/> Initial return of a former public charity	<input type="checkbox"/> Final return	<input type="checkbox"/> Amended return	<input type="checkbox"/> Address change	<input type="checkbox"/> Name change	D 1 Foreign organizations, check here <input type="checkbox"/> 2 Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>
<input type="checkbox"/> Initial return	<input type="checkbox"/> Initial return of a former public charity							
<input type="checkbox"/> Final return	<input type="checkbox"/> Amended return							
<input type="checkbox"/> Address change	<input type="checkbox"/> Name change							
H Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>						
I Fair market value of all assets at end of year (from Part II, col (c), line 16) \$ 1,005,689.		F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>						
J Accounting method: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ (Part I, column (d) must be on cash basis)								

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc., received (attach schedule)				
	2 Check <input checked="" type="checkbox"/> if the foundation is not required to attach Sch B				
	3 Interest on savings and temporary cash investments	1,804.	2,028.		ATCH 1
	4 Dividends and interest from securities	27,822.	27,598.		ATCH 2
	5a Gross rents				
	b Net rental income or (loss)				
	6a Net gain or (loss) from sale of assets not on line 10				
	b Gross sales price for all assets on line 6a				
	7 Capital gain net income (from Part IV, line 2)				
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances				
b Less Cost of goods sold					
c Gross profit or (loss) (attach schedule)					
11 Other income (attach schedule)					
12 Total. Add lines 1 through 11	29,626.	29,626.	0		
Operating and Administrative Expenses	13 Compensation of officers, directors, trustees, etc.	0			
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees (attach schedule)				
	b Accounting fees (attach schedule)				
	c Other professional fees (attach schedule)				
	17 Interest				
	18 Taxes (attach schedule) (see instructions) ATCH 3	286.			
	19 Depreciation (attach schedule) and depletion				
	20 Occupancy				
	21 Travel, conferences, and meetings				
	22 Printing and publications				
	23 Other expenses (attach schedule)				
	24 Total operating and administrative expenses. Add lines 13 through 23	286.			
	25 Contributions, gifts, grants paid	44,000.			49,000.
26 Total expenses and disbursements. Add lines 24 and 25	44,286.	0	0	49,000.	
27 Subtract line 26 from line 12					
a Excess of revenue over expenses and disbursements	-14,660.				
b Net investment income (if negative, enter -0-)		29,626.			
c Adjusted net income (if negative, enter -0-)			0		

21 P

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value		
Assets	1	Cash - non-interest-bearing		590.	3,304.	3,304.
	2	Savings and temporary cash investments		12,661.	11,633.	11,633.
	3	Accounts receivable ▶				
		Less allowance for doubtful accounts ▶				
	4	Pledges receivable ▶				
		Less allowance for doubtful accounts ▶				
	5	Grants receivable				
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)				
	7	Other notes and loans receivable (attach schedule) ▶				
		Less allowance for doubtful accounts ▶				
	8	Inventories for sale or use				
	9	Prepaid expenses and deferred charges				
	10 a	Investments - U S and state government obligations (attach schedule) **	258,887.	149,346.	158,142.	
	b	Investments - corporate stock (attach schedule) ATCH 5	53,820.	105,943.	105,943.	
	c	Investments - corporate bonds (attach schedule) ATCH 6	124,596.	125,000.	128,080.	
	11	Investments - land, buildings, and equipment basis ▶				
	Less accumulated depreciation (attach schedule) ▶					
12	Investments - mortgage loans					
13	Investments - other (attach schedule) ATCH 7	548,000.	575,000.	598,392.		
14	Land, buildings, and equipment basis ▶					
	Less accumulated depreciation (attach schedule) ▶					
15	Other assets (describe ▶ ATCH 8)	17,204.	28,473.	195.		
16	Total assets (to be completed by all filers - see the instructions Also, see page 1, item I)	1,015,758.	998,699.	1,005,689.		
Liabilities	17	Accounts payable and accrued expenses	2,138.	3,178.		
	18	Grants payable	20,000.	15,000.		
	19	Deferred revenue				
	20	Loans from officers, directors, trustees, and other disqualified persons				
	21	Mortgages and other notes payable (attach schedule)				
	22	Other liabilities (describe ▶)				
23	Total liabilities (add lines 17 through 22)	22,138.	18,178.			
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here ▶ <input type="checkbox"/>					
	and complete lines 24 through 26 and lines 30 and 31.					
	24	Unrestricted				
	25	Temporarily restricted				
	26	Permanently restricted				
	Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. ▶ <input checked="" type="checkbox"/>					
	27	Capital stock, trust principal, or current funds				
	28	Paid-in or capital surplus, or land, bldg, and equipment fund				
	29	Retained earnings, accumulated income, endowment, or other funds	993,620.	980,521.		
	30	Total net assets or fund balances (see instructions)	993,620.	980,521.		
31	Total liabilities and net assets/fund balances (see instructions)	1,015,758.	998,699.			

Part III Analysis of Changes in Net Assets or Fund Balances

1	Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	993,620.
2	Enter amount from Part I, line 27a	2	-14,660.
3	Other increases not included in line 2 (itemize) ▶ ATCH 9	3	1,561.
4	Add lines 1, 2, and 3	4	980,521.
5	Decreases not included in line 2 (itemize) ▶	5	
6	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	980,521.

**ATCH 4

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Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co)			(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a					
b					
c					
d					
e					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)		
a					
b					
c					
d					
e					
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(i) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))		
(i) 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			
a					
b					
c					
d					
e					
2 Capital gain net income or (net capital loss)	<div style="display: flex; align-items: center;"> <div style="flex: 1;"> <div style="border-left: 1px solid black; border-right: 1px solid black; padding: 0 5px;"> If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 </div> </div> <div style="border: 1px solid black; width: 40px; text-align: center; margin-left: 5px;">2</div> </div>				
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8	<div style="display: flex; align-items: center;"> <div style="flex: 1;"> <div style="border-left: 1px solid black; border-right: 1px solid black; padding: 0 5px;"> If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8 </div> </div> <div style="border: 1px solid black; width: 40px; text-align: center; margin-left: 5px;">3</div> </div>				

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

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

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

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

☐ Yes ☒ No

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

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

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col. (b) divided by col. (c))
2011	52,021.	1,012,617.	0.051373
2010	49,600.	988,263.	0.050189
2009	48,150.	1,017,571.	0.047319
2008	49,727.	1,007,778.	0.049343
2007	51,393.	1,006,075.	0.051083
2 Total of line 1, column (d)			0.249307
3 Average distribution ratio for the 5-year base period - divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years			0.049861
4 Enter the net value of noncharitable-use assets for 2012 from Part X, line 5			1,017,144.
5 Multiply line 4 by line 3			50,716.
6 Enter 1% of net investment income (1% of Part I, line 27b)			296.
7 Add lines 5 and 6			51,012.
8 Enter qualifying distributions from Part XII, line 4 If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions			49,000.

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

1 a Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1 Date of ruling or determination letter _____ (attach copy of letter if necessary - see instructions)		1	593.
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input type="checkbox"/> and enter 1% of Part I, line 27b			
c All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b)			
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)		2	
3 Add lines 1 and 2		3	593.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)		4	0
5 Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-		5	593.
6 Credits/Payments			
a 2012 estimated tax payments and 2011 overpayment credited to 2012	6a	1,207.	
b Exempt foreign organizations - tax withheld at source	6b		
c Tax paid with application for extension of time to file (Form 8868)	6c		
d Backup withholding erroneously withheld	6d		
7 Total credits and payments Add lines 6a through 6d	7	1,207.	
8 Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached	8		
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9		
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	614.	
11 Enter the amount of line 10 to be Credited to 2013 estimated tax <input type="checkbox"/> 614. Refunded <input type="checkbox"/> <input type="checkbox"/>	11		

Part VII-A Statements Regarding Activities

	Yes	No
1 a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?		X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the definition)? If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities		X
c Did the foundation file Form 1120-POL for this year?		X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation <input type="checkbox"/> \$ _____ (2) On foundation managers <input type="checkbox"/> \$ _____		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers <input type="checkbox"/> \$ _____		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities		X
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		X
4 a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		X
b If "Yes," has it filed a tax return on Form 990-T for this year?		
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T		X
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?		X
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	X	
8 a Enter the states to which the foundation reports or with which it is registered (see instructions) <input type="checkbox"/> CT, _____		
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation	X	
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2012 or the taxable year beginning in 2012 (see instructions for Part XIV)? If "Yes," complete Part XIV		X
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses		X

Part VII-A Statements Regarding Activities (continued)

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions)	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
Website address <input type="checkbox"/> N/A				
14	The books are in care of <input type="checkbox"/> JAMES A MCDONALD Telephone no <input type="checkbox"/> 860-376-4444			
Located at <input type="checkbox"/> 111 MAIN STREET JEWETT CITY, CT ZIP+4 <input type="checkbox"/> 06351				
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here <input type="checkbox"/>			
and enter the amount of tax-exempt interest received or accrued during the year <input type="checkbox"/> 15				
16	At any time during calendar year 2012, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?	16	Yes	No
See the instructions for exceptions and filing requirements for Form TD F 90-22.1 If "Yes," enter the name of the foreign country <input type="checkbox"/>				

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

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

		Yes	No
1a	During the year did the foundation (either directly or indirectly)		
(1)	Engage in the sale or exchange, or leasing of property with a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(2)	Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(3)	Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(4)	Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(5)	Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(6)	Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? <input type="checkbox"/>	1b	
Organizations relying on a current notice regarding disaster assistance check here <input type="checkbox"/>			
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2012?	1c	X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))		
a	At the end of tax year 2012, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2012? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
If "Yes," list the years <input type="checkbox"/>			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement - see instructions)	2b	
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here <input type="checkbox"/>		
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b	If "Yes," did it have excess business holdings in 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 foundation had excess business holdings in 2012)	3b	
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2012?	4b	X

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Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)**5a** During the year did the foundation pay or incur any amount to(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? ☐ Yes ☒ No(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive? ☐ Yes ☒ No(3) Provide a grant to an individual for travel, study, or other similar purposes? ☐ Yes ☒ No(4) Provide a grant to an organization other than a charitable, etc., organization described in section 509(a)(1), (2), or (3), or section 4940(d)(2)? (see instructions) ☐ Yes ☒ No(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? ☐ Yes ☒ No**b** If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)? ☐ **5b**Organizations relying on a current notice regarding disaster assistance check here ☐**c** If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? ☐ Yes ☐ No

If "Yes," attach the statement required by Regulations section 53.4945-5(d)

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

If "Yes" to 6b, file Form 8870

7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? ☐ Yes ☒ No**b** If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? ☐ **7b****Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors****1** List all officers, directors, trustees, foundation managers and their compensation (see instructions).

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
ATCH 10		0	0	0

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

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

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

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

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
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 organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1 NONE	
2	
3	
4	

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

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

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

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
a	Average monthly fair market value of securities	1a	1,026,987.
b	Average of monthly cash balances	1b	5,646.
c	Fair market value of all other assets (see instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	1,032,633.
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	1e	
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	1,032,633.
4	Cash deemed held for charitable activities. Enter 1 1/2 % of line 3 (for greater amount, see instructions)	4	15,489.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	1,017,144.
6	Minimum investment return. Enter 5% of line 5	6	50,857.

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

1	Minimum investment return from Part X, line 6	1	50,857.
2a	Tax on investment income for 2012 from Part VI, line 5	2a	593.
b	Income tax for 2012 (This does not include the tax from Part VI)	2b	
c	Add lines 2a and 2b	2c	593.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	50,264.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	50,264.
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	7	50,264.

Part XII Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
a	Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26	1a	49,000.
b	Program-related investments - total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
a	Suitability test (prior IRS approval required)	3a	
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	49,000.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b (see instructions)	5	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	49,000.

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

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Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2011	(c) 2011	(d) 2012
1 Distributable amount for 2012 from Part XI, line 7				50,264.
2 Undistributed income, if any, as of the end of 2012				
a Enter amount for 2011 only				
b Total for prior years 20 10 , 20 09 , 20 08				
3 Excess distributions carryover, if any, to 2012				
a From 2007				
b From 2008				
c From 2009				
d From 2010 955 .				
e From 2011 2,048 .				
f Total of lines 3a through e	3,003 .			
4 Qualifying distributions for 2012 from Part XII, line 4 ▶ \$ 49,000 .				
a Applied to 2011, but not more than line 2a				
b Applied to undistributed income of prior years (Election required - see instructions)				
c Treated as distributions out of corpus (Election required - see instructions)				
d Applied to 2012 distributable amount				49,000 .
e Remaining amount distributed out of corpus				
5 Excess distributions carryover applied to 2012 . (If an amount appears in column (d), the same amount must be shown in column (a))	1,264 .			1,264 .
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	1,739 .			
b Prior years' undistributed income Subtract line 4b from line 2b				
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				
d Subtract line 6c from line 6b Taxable amount - see instructions				
e Undistributed income for 2011 Subtract line 4a from line 2a Taxable amount - see instructions				
f Undistributed income for 2012 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2013				
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see instructions)				
8 Excess distributions carryover from 2007 not applied on line 5 or line 7 (see instructions)				
9 Excess distributions carryover to 2013. Subtract lines 7 and 8 from line 6a	1,739 .			
10 Analysis of line 9				
a Excess from 2008				
b Excess from 2009				
c Excess from 2010				
d Excess from 2011 1,739 .				
e Excess from 2012				

Form 990-PF (2012)

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

NOT APPLICABLE

1 a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2012, enter the date of the ruling

b Check box to indicate whether the foundation is a private operating foundation described in section

☐ 4942(j)(3) or ☐ 4942(j)(5)

	Tax year	Prior 3 years			(e) Total
	(a) 2012	(b) 2011	(c) 2010	(d) 2009	
2 a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed					
b 85% of line 2a					
c Qualifying distributions from Part XII, line 4 for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon					
a "Assets" alternative test - enter					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					

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

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

N/A

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

N/A

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

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

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

ATCH 11

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

APPLICATION AVAILABLE ON WEBSITE WWW.JCSBANK.COM

c Any submission deadlines

ATCH 12

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

ATCH 13

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

<div>Recipient</div> <div>Name and address (home or business)</div>	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount			
a Paid during the year ATCH 14							
Total	3a	49,000.	b Approved for future payment ATCH 15				
Total	3b	15,000.					

Form 990-PF (2012)

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated

Enter gross amounts unless otherwise indicated		Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See instructions)
		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	
1	Program service revenue					
a	_____					
b	_____					
c	_____					
d	_____					
e	_____					
f	_____					
g	Fees and contracts from government agencies					
2	Membership dues and assessments					
3	Interest on savings and temporary cash investments			14	2,028.	
4	Dividends and interest from securities			14	27,598.	
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					
9	Net income or (loss) from special events					
10	Gross profit or (loss) from sales of inventory . . .					
11	Other revenue a _____					
b	_____					
c	_____					
d	_____					
e	_____					
12	Subtotal. Add columns (b), (d), and (e)				29,626.	
13	Total. Add line 12, columns (b), (d), and (e)				29,626.	29,626.

(See worksheet in line 13 instructions to verify calculations)

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

[illegible]

ATTACHMENT 1FORM 990PF, PART I - INTEREST ON TEMPORARY CASH INVESTMENTS

<u>DESCRIPTION</u>	<u>REVENUE AND EXPENSES PER BOOKS</u>	<u>NET INVESTMENT INCOME</u>	<u>ADJUSTED NET INCOME</u>
CASH AND MONEY MARKET FUNDS	1,804.	2,028.	
TOTAL	<u>1,804.</u>	<u>2,028.</u>	

ATTACHMENT 2FORM 990PF, PART I - DIVIDENDS AND INTEREST FROM SECURITIES

<u>DESCRIPTION</u>	<u>REVENUE AND EXPENSES PER BOOKS</u>	<u>NET INVESTMENT INCOME</u>	<u>ADJUSTED NET INCOME</u>
INVESTMENT SECURITIES	27,822.	27,598.	
TOTAL	<u>27,822.</u>	<u>27,598.</u>	

ATTACHMENT 3

FORM 990PF, PART I - TAXES

<u>DESCRIPTION</u>	<u>REVENUE AND EXPENSES PER BOOKS</u>	<u>NET INVESTMENT INCOME</u>	<u>ADJUSTED NET INCOME</u>	<u>CHARITABLE PURPOSES</u>
EXCISE TAX	286.			
TOTALS	<u>286.</u>			

FORM 990PF, PART II - U.S. AND STATE OBLIGATIONS

<u>DESCRIPTION</u>	<u>BEGINNING BOOK VALUE</u>	<u>ATTACHMENT 4</u>	
		<u>ENDING BOOK VALUE</u>	<u>ENDING FMV</u>
FFCB 5.3%	101,916.	101,032.	107,702.
FNMA (255039)	16,440.	5,192.	5,429.
FNMA (257192)	65,531.	43,122.	45,011.
US OBLIGATIONS TOTAL	<u>183,887.</u>	<u>149,346.</u>	<u>158,142.</u>
CHFA 5.22%	75,000.		
STATE OBLIGATIONS TOTAL	<u>75,000.</u>		
US AND STATE OBLIGATIONS TOTAL	<u>258,887.</u>	<u>149,346.</u>	<u>158,142.</u>

ATTACHMENT 5FORM 990PF, PART II - CORPORATE STOCK

<u>DESCRIPTION</u>	<u>BEGINNING BOOK VALUE</u>	<u>ENDING BOOK VALUE</u>	<u>ENDING FMV</u>
ISHARES TRUST DOW JONES	26,885.	28,620.	28,620.
ISHARES HIGH DIV EQ FUND		23,504.	23,504.
SPDR S&P DIVIDEND	26,935.	29,080.	29,080.
SPDR WELLS FARGO PFD		24,739.	24,739.
TOTALS	<u>53,820.</u>	<u>105,943.</u>	<u>105,943.</u>

ATTACHMENT 6FORM 990PF, PART II - CORPORATE BONDS

<u>DESCRIPTION</u>	<u>BEGINNING BOOK VALUE</u>	<u>ENDING BOOK VALUE</u>	<u>ENDING FMV</u>
GE BOND 5.00%	124,596.	125,000.	128,080.
TOTALS	<u>124,596.</u>	<u>125,000.</u>	<u>128,080.</u>

FORM 990PF, PART II - OTHER INVESTMENTSATTACHMENT 7

<u>DESCRIPTION</u>	<u>BEGINNING BOOK VALUE</u>	<u>ENDING BOOK VALUE</u>	<u>ENDING FMV</u>
CD CAPITAL ONE BK 3.85%	98,000.		
CD JEWETT CITY 2.72%	95,000.	95,000.	101,664.
CD CHARTER OAK CU 2.96%	95,000.	95,000.	101,212.
CD SAVINGS INSTITUTE BK 2.47%	60,000.	60,000.	63,291.
CD DIME BANK 2.47%	200,000.	200,000.	206,701.
CD CHARTER OAK CU 1.736%		125,000.	125,524.
TOTALS	<u>548,000.</u>	<u>575,000.</u>	<u>598,392.</u>

ATTACHMENT 8FORM 990PF, PART II - OTHER ASSETS

<u>DESCRIPTION</u>	<u>BEGINNING BOOK VALUE</u>	<u>ENDING BOOK VALUE</u>	<u>ENDING FMV</u>
ACCRUED INCOME RECEIVABLE	17,074.	28,278.	
OTHER ASSETS	130.	195.	195.
TOTALS	<u>17,204.</u>	<u>28,473.</u>	<u>195.</u>

ATTACHMENT 9FORM 990PF, PART III - OTHER INCREASES IN NET WORTH OR FUND BALANCES

<u>DESCRIPTION</u>	<u>AMOUNT</u>
UNREALIZED SECURITY GAINS	1,561.
TOTAL	<u>1,561.</u>

JEWETT CITY SAVINGS BANK FOUNDATION INC

13-4242396

FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEESATTACHMENT 10

NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
LOUIS J. DEMICCO 111 MAIN STREET JEWETT CITY, CT 06351	CHAIRMAN/DIRECTOR 1.00	0	0	0
KEVIN C. MERCHANT 111 MAIN STREET JEWETT CITY, CT 06351	PRESIDENT/DIRECTOR 1.00	0	0	0
JAMES A. McDONALD 111 MAIN STREET JEWETT CITY, CT 06351	TREASURER 1.00	0	0	0
DIANA L. ROSE 111 MAIN STREET JEWETT CITY, CT 06351	SECRETARY 1.00	0	0	0
JOHN E. BURKE 111 MAIN STREET JEWETT CITY, CT 06351	DIRECTOR 1.00	0	0	0
DIANE L. MANNING 111 MAIN STREET JEWETT CITY, CT 06351	DIRECTOR 1.00	0	0	0

JEWETT CITY SAVINGS BANK FOUNDATION INC

13-4242396

FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEESATTACHMENT 10 (CONT'D)

<u>NAME AND ADDRESS</u>	<u>TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION</u>	<u>COMPENSATION</u>	<u>CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS</u>	<u>EXPENSE ACCT AND OTHER ALLOWANCES</u>
ERIC L. MOORE 111 MAIN STREET JEWETT CITY, CT 06351	DIRECTOR 1.00	0	0	0
DAVID T. PANTELEAKOS 111 MAIN STREET JEWETT CITY, CT 06351	DIRECTOR 1.00	0	0	0
GARY W. PELOQUIN 111 MAIN STREET JEWETT CITY, CT 06351	DIRECTOR 1.00	0	0	0
GAIL ROOKE-NORMAN 111 MAIN STREET JEWETT CITY, CT 06351	DIRECTOR 1.00	0	0	0
PHILIP E. TETREault 111 MAIN STREET JEWETT CITY, CT 06351	DIRECTOR 1.00	0	0	0
GRAND TOTALS		0	0	0

ATTACHMENT 11

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

KEVIN C. MERCHANT, PRESIDENT
111 MAIN STREET
JEWETT CITY, CT 06351
860-376-4444

ATTACHMENT 12

990PF, PART XV - SUBMISSION DEADLINES

APPLICATIONS ARE TO BE SUBMITTED BETWEEN JULY 1ST AND AUGUST 31ST TO
BE CONSIDERED FOR APPROVAL BY DECEMBER 31ST

ATTACHMENT 13

990PF, PART XV - RESTRICTIONS OR LIMITATIONS ON AWARDS

THE JEWETT CITY SAVINGS FOUNDATION'S FINANCIAL GRANTS AND MONETARY
GIFTS SUPPORT NON-PROFIT ORGANIZATIONS WHOSE WORK BENEFITS THE
POPULATION OF THOSE COMMUNITIES IN WHICH THE BANK HAS A MAJOR PRESENCE

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

ATTACHMENT 14

RECIPIENT NAME AND ADDRESS	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
PLEASE REFER TO ATTACHMENT	NOT RELATED 501 (C) (3)	EXEMPT PURPOSE	49,000
TOTAL CONTRIBUTIONS PAID			49,000

**Jewett City Savings Bank Foundation
2012 List of Charitable Donations**

Date Disbursed	Organization	Exempt Status	Address	City	ST	Zip	Purpose of Grant	Amount
5/7/2012	American Cancer Society	Y	825 Brook Street	Rocky Hill	CT	06067	Relay for Life Event - Silver Sponsor	\$2,000
5/7/2012	Day Kimball Healthcare	Y	PO Box 632	Putnam	CT	06260	Appeals Campaign	\$1,000
5/7/2012	Backus Hospital	Y	326 Washington Street	Norwich	CT	06360	Annual Appeal	\$1,000
7/6/2012	Slater Library	Y	26 Main Street	Jewett City	CT	06351	Annual Support	\$1,000
7/6/2012	Backus Hospital	Y	326 Washington Street	Norwich	CT	06360	Plainfield Emergency Care Center	\$5,000
8/20/2012	American Legion Ambulance Fund (Moosup)	Y	P O Box 785	Moosup	CT	06354	Annual Support	\$700
8/20/2012	Canterbury Volunteer Fire Dept & Ambulance	Y	P O Box 293	Canterbury	CT	06331	Annual Support	\$1,100
8/20/2012	Griswold Community Ambulance, Inc	Y	P O Box 282	Jewett City	CT	06351	Annual Support	\$700
8/20/2012	Killingly/Brooklyn Ambulance Corps	Y	P O Box 209	Danielson	CT	06239	Annual Support	\$500
8/20/2012	Mortlake Fire Co & Ambulance Service	Y	P O Box 301	Brooklyn	CT	06234	Annual Support	\$1,000
8/20/2012	Attawaugan Fire Department	Y	20 Country Club Road	Dayville	CT	06241	Annual Support	\$600
8/20/2012	Danielson Fire Department	Y	47 Academy Street	Danielson	CT	06239	Annual Support	\$600
8/20/2012	Dayville Fire Company	Y	P O Box 307	Dayville	CT	06241	Annual Support	\$600
8/20/2012	East Killingly Fire Department	Y	P O Box 214	East Killingly	CT	06243	Annual Support	\$600
8/20/2012	South Killingly Fire Department	Y	P O Box 31	Danielson	CT	06239	Annual Support	\$600
8/20/2012	Williamsville Fire Engine Company (Rogers)	Y	P O Box 141	Rogers	CT	06263	Annual Support	\$600
8/20/2012	Preston City Volunteer Fire Department	Y	412 Route 165	Preston	CT	06365	Annual Support	\$600
8/20/2012	Poquetanuck Fire Department EMS	Y	87 Route 2A	Preston	CT	06365	Annual Support	\$600

**Jewett City Savings Bank Foundation
2012 List of Charitable Donations**

Date Disbursed	Organization	Exempt Status	Address	City	ST	Zip	Purpose of Grant	Amount
8/20/2012	Lisbon Ambulance Service	Y	7 Newent Road	Lisbon	CT	06351	Annual Support	\$500
8/20/2012	Windham Hospital Foundation	Y	112 Mansfield Avenue	Willimantic	CT	06226	Annual Support	\$1,000
11/14/2012	Day Kimball Hospital	Y	PO Box 632	Putnam	CT	06260	Capital Campaign 2nd installment	\$5,000
11/14/2012	Natchaug Hospital	Y	189 Storrs Road	Mansfield Center	CT	06250	Annual Appeal	\$1,000
11/14/2012	Hospice Southeastern Connecticut	Y	227 Dunham Street	Norwich	CT	06360	Annual Appeal	\$500
11/14/2012	Performing Arts of Northeast Connecticut	Y	PO Box 75	Pomfret	CT	06258	Annual Appeal	\$1,000
11/14/2012	Town of Pomfret Food Pantry	170(c)(1)	P O Box 286	Pomfret Center	CT	06259	To purchase and maintain non-perishable food items and re-stock food inventories, serving 40-45 people/families per month	\$500
11/14/2012	Justice Resource Institute / Susan Wayne Center	501(c)(3)	75 Church Street	Thompson	CT	06277	To purchase kayaks, paddles, life jackets, new bicycles and helmets to expand the recreational activities available to the Center's students The Center is a home and school serving boys and girls with mild to moderate mental retardation	\$1,000
11/14/2012	St Mary Food Pantry	Y	34 North Main Street	Jewett City	CT	06351	To purchase food items, including fresh meat, and some toiletries, serving an average of 100 families per month	\$4,600
11/14/2012	Sterling Volunteer Fire Company, Inc	501(c)(3)	225 Main Street	Sterling	CT	06377	To purchase 2 portable SCENE lights for the rescue truck that will provide high intensity lighting at nighttime emergency calls	\$500
11/14/2012	K B Ambulance Corps Inc	501(c)(3)	294 Westcott Road P O Box 209	Danielson	CT	06239	To purchase and install a Stryker power load system into one ambulance to serve as the bariatric unit, allowing a crew of two to lift heavy patients	\$500
11/14/2012	Friends of Camp Quinebaug	Y	54 Taos Drive	Danielson	CT	06239	To replace two paddle boats used during the summer programs for special needs children	\$500
11/14/2012	South Killingly Fire Co	Y	P O Box 31	Danielson	CT	06239	To replace outdated SCBA air packs with breathing apparatus that meets current safety requirements	\$500
11/14/2012	Attawaugan Fire Department	Y	20 Country Club Road	Dayville	CT	06241	To purchase new fire gear racks to help minimize falling or tripping injuries to volunteer fire staff And, to purchase a new sign for the outside of the building	\$500
11/14/2012	A A Young Jr Hose & Ladder Co #1, Inc	Y	105 Hill Street	Jewett City	CT	06351	To purchase a new boat, motor, trailer and rescue equipment for water rescue and recovery incidents	\$500
11/14/2012	Preston City Congregational Church Food Pantry	501(c)(3)	321 Route 164	Preston	CT	06365	To purchase needed items to stock food pantry shelves, to continue to provide farm coupons, and to add nutritional items, such as eggs, milk, and cheese	\$2,100
11/14/2012	Oneco Fire Co #1	Y	1146 Plainfield Pike	Oneco	CT	06373	To purchase 20 new pagers enabling the department to provide all members with reliable communications	\$500

**Jewett City Savings Bank Foundation
2012 List of Charitable Donations**

Date Disbursed	Organization	Exempt Status	Address	City	ST	Zip	Purpose of Grant	Amount
11/14/2012	United Community and Family Services	501(c)(3)	47 Town Street	Norwich	CT	06360	To purchase a spirometer that can be used to measure respiratory function and to improve influenza and pneumonia immunizations rates for children, adolescents and adults seen in the Jewett City primary care office	\$500
11/14/2012	East Brooklyn Fire Department	Y	15 South Main Street	Brooklyn	CT	06234	To purchase six mobile lockers to keep the gear dry, clean, mold-free and to protect gear from damage	\$500
11/14/2012	Plainfield Fire Co #1	Y	620 Norwich Road	Plainfield	CT	06374	To purchase voice-activated GPS units for emergency vehicles, allowing for quicker response times when responding to out-of-town emergency calls	\$500
11/14/2012	Central Village Fire Co #1	Y	P O Box 355	Central Village	CT	06332	To purchase rescue jack equipment used for vehicle stabilization at the scene of auto accidents, which will provide a safer environment for rescue personnel and quicker treatment for victims	\$500
11/14/2012	Griswold Volunteer Fire Department	Y	883 Voluntown Road	Griswold	CT	06351	To help fund the costs of converting a trailer into a mobile command post, haz-mat and mass casualty response unit	\$500
11/14/2012	Northeast Opportunities for Wellness, Inc	501(c)(3)	480 Joy Road	Woodstock	CT	06281	To continue to provide the nutritional parent education programs, teaching parents about the nutritional needs of children, healthy food choices and healthier eating	\$1,000
11/14/2012	Eastern Connecticut Performing Arts Association	Pending	150 Bitgood Road	Griswold	CT	06351	To support four educational dance and theater classes to be held at the Griswold Schools campus and to provide scholarships for eight participants from the Griswold community	\$1,000
11/14/2012	Borough of Danielson Fire Department	501(c)(3)	47 Academy Street	Danielson	CT	06239	To obtain specifically designed breathing equipment to bring an additional air supply to a distressed or trapped firefighter for the Firefighter Assistance and Search Team, a unique service provided by the Danielson Fire Department to surrounding towns	\$500
11/14/2012	Atwood Hose Fire Company	Y	P O Box 14	Wauregan	CT	06387	To replace turnout gear that protects the firefighter from flame, heat and other hazards	\$500
11/14/2012	Voluntown Volunteer Fire Co Inc #1	Y	205 Preston City Road	Voluntown	CT	06384	To obtain underwater search lights to aid in search and rescue/recovery operations	\$500
11/14/2012	Friends of Assisi Food Pantry Inc	Y	77 Water Street	Danielson	CT	06239	To continue the diaper program and to provide clients with vouchers to be used for produce at local farmers markets and farms	\$3,500
Total JCSB Foundation grant disbursements 2012:								\$49,000

JENETT CITY SAVINGS BANK FOUNDATION INC

13-4242396

FORM 990DE, PART XV - CONTRIBUTIONS APPROVED FOR FUTURE PAYMENT

ATTACHMENT 15

RECIPIENT NAME AND ADDRESS	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT		PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
CARE IN A HEARTBEAT DAY KIMBALL HOSPITAL PO BOX 632 PUTNAM, CT 06260	NOT RELATED 501 (C) (3)		EMERGENCY DEPARTMENT CAMPAIGN	15,000
TOTAL CONTRIBUTIONS APPROVED				<u>15,000</u>

► **File a separate application for each return.**

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

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

A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete

Part I only

All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time

to file income tax returns.

Enter filer's identifying number, see instructions

Type or print File by the due date for filing your return See instructions	Name of exempt organization or other filer, see instructions.	Employer identification number (EIN) or
	JEWETT CITY SAVINGS BANK FOUNDATION INC	13-4242396
	Number, street, and room or suite no. If a P.O. box, see instructions. 111 MAIN STREET	Social security number (SSN)
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. JEWETT CITY, CT 06351	

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

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

- The books are in the care of ► JAMES A MCDONALD

Telephone No ► 860 376-4444

FAX No. ►

- If the organization does not have an office or place of business in the United States, check this box ☐
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . If this is for the whole group, check this box ☐ . If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension is for.

- 1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until 08/15, 2013, to file the exempt organization return for the organization named above. The extension is for the organization's return for:
- ☒ calendar year 2012 or
- ☐ tax year beginning _____, 20____, and ending _____, 20____.

- 2 If the tax year entered in line 1 is for less than 12 months, check reason: ☐ Initial return ☐ Final return
☐ Change in accounting period

3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$	
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$	1,271.
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$	

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

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

Form 8868 (Rev. 1-2013)

- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** and check this box. ☒ **X**
- Note.** Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868.
- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** (on page 1)

Part II Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed).

Type or print File by the due date for filing your return. See instructions.	Enter filer's identifying number, see instructions	
	Name of exempt organization or other filer, see instructions	Employer identification number (EIN) or
	JEWETT CITY SAVINGS BANK FOUNDATION INC	13-4242396
	Number, street, and room or suite no. If a P.O. box, see instructions	Social security number (SSN)
	111 MAIN STREET	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions.	
	JEWETT CITY, CT 06351	

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

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

STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.

- The books are in the care of **JAMES A MCDONALD**
Telephone No. **860 376-4444** FAX No. _____
- If the organization does not have an office or place of business in the United States, check this box ☐
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____. If this is for the whole group, check this box ☐. If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension is for

- I request an additional 3-month extension of time until 11/15, 2013
- For calendar year 2012, or other tax year beginning _____, 20____, and ending _____, 20____.
- If the tax year entered in line 5 is for less than 12 months, check reason: ☐ Initial return ☐ Final return
☐ Change in accounting period
- State in detail why you need the extension **ADDITIONAL TIME IS NEEDED TO GATHER THE INFORMATION NECESSARY TO COMPLETE AN ACCURATE RETURN.**

8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions	8a \$	0
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868.	8b \$	1,271.
c Balance Due. Subtract line 8b from line 8a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	8c \$	

Signature and Verification must be completed for Part II only.

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form

Signature Harry A. Kalajian Jr. Title SR. TAX MANAGER Date 07/29/2013

Form **8868** (Rev 1-2013)