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Department of the Treasury

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

For	alen	dar year 2012 or tax year beginning APR	1, 2012	, and ending	MAR 31, 2013	
Nar	ne of	foundation			A Employer identification	number
S	al	em Community Benefits,	Inc.		02-0499456	
		nd street (or P O box number if mail is not delivered to street		Room/suite	B Telephone number	
3	S	outh Broadway			(603) 898-	2153
		own, state, and ZIP code			C If exemption application is p	ending, check here
		em, NH 03079			,	
G C	heck	all that apply Initial return	Initial return of a fo	rmer public charity	D 1. Foreign organizations	, check here
		Final return	Amended return		2 Formian amanutations me	eting the RESK toot
		Address change	Name change		Foreign organizations me check here and attach co	mputation ESI,
H C	_	type of organization X Section 501(c)(3) ex			E if private foundation state	_ F 1
			Other taxable private founda		under section 507(b)(1)	• •
		rket value of all assets at end of year J Accounting	T	X Accrual	F If the foundation is in a	
(fr		Part II, col. (c), line 16) Oti	her (specify)	nasis I	under section 507(b)(1)	(B), check here
	ırt l		(a) Revenue and		(a) Adjusted set	(d) Disbursements
[F E	#1 4 E	(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	expenses per books	(b) Net investment income	(c) Adjusted net income	for chantable purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received	150,000.		N/A	(22)
	2	Check If the foundation is not required to attach Sch B				
	3	Interest on savings and temporary cash investments	213.	213.		**************************************
	4	Dividends and interest from securities				
	5a	Gross rents .				
	b	Net rental income or (loss)		*** **** *****		\$\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
<u> </u>	6a	Net gain or (loss) from sale of assets not on line 10				
enc	b	Gross sales price for all assets on line 6a			11 ton	
Revenue	7	Capital gain net income (from Part IV, line 2)		0.		
	8	Net short-term capital gain	· · · · · · · · · · · · · · · · · · ·	 		
	9 10a	Income modifications Gross sales less returns				
		and allowances Less Cost of goods sold	1-1'1 , ,' , 11, - 4''- 11-21,- '\'	 	1111/ 1 111/1 111/1	
		Gross profit or (loss)				
	11	Other income		<u> </u>	1	**************************************
	12	Total. Add lines 1 through 11	150,213.	213.		
<u>~</u>	13	Compensation of officers, directors, trustees, etc	0.	0.		0.
2013	14	Other employee salaries and wages				
 €⊚ v	15	Pension plans, employee benefits				
္ဆန္		Legal fees				
	RE	Accounting fees				
	17	Interest				
動	Į.	Tags 2 2013 Stmt 1	3.	0.		0.
影	19	Depreciation and depiction				
	20_	Occupancy 17				
	3	travel conferences, and meetings			· · · · ·	
WE	22	Printing and publications				
Bu	23	Other expenses Stmt 2	75.	0.		75.
rati	24	Total operating and administrative				
Operating		expenses. Add lines 13 through 23	78.	0.		75.
•	ı	Contributions, gifts, grants paid	139,000.			139,000.
	26	Total expenses and disbursements.	139,078.	0.		139,075.
	27	Add lines 24 and 25 Subtract line 26 from line 12	139,070.	<u> </u>	-	139,073.
	l	Excess of revenue over expenses and disbursements	11,135.			
	ı	Net investment income (if negative, enter -0-)		213.	the stime of over the	
	i	Adjusted not income (it posetive enter 0.)			N/A	1

Form 99	90-PF(2012) Salem Community Benefit	s, Inc.	02-	0499456 Page 2
Part	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End of	
Fait		(a) Book Value	(b) Book Value	(c) Fair Market Value
1	• • • • • • • • • • • • • • • • • • • •	101 100	02 267	02.267
li li	Savings and temporary cash investments	131,132.	92,267.	92,267.
3	Accounts receivable			
	Less allowance for doubtful accounts			·
4	Pledges receivable			
_	Less allowance for doubtful accounts	100,000.	150,000.	150,000.
	Grants receivable	100,000.	130,000.	130,000.
6	Receivables due from officers, directors, trustees, and other			
_	disqualified persons			
'	Other notes and loans receivable		1	
	Less allowance for doubtful accounts ▶			
= -	Inventories for sale or use			
ASS	Prepaid expenses and deferred charges			_ -
1 108	a Investments - U S and state government obligations			
1	n Investments - corporate stock			
1	Investments - corporate bonds	· · · · · · · · · · · · · · · · · · ·		
11	Investments - land, buildings, and equipment basis	•		
40	Less: accumulated depreciation		· · · · · · · · · · · · · · · · · · ·	
	Investments - mortgage loans			
13	Investments - other			
14			1	
	Less. accumulated depreciation		-	
15	Other assets (describe)			
16	Total assets (to be completed by all filers)	231,132.	242,267.	242,267.
	Accounts payable and accrued expenses	20272020	21272575	212/2071
18				
	Deferred revenue			
Liabilities 52 52 52 52 52 52 52 52 52 52 52 52 52				
e 21				
ات ا دورا ت	Other liabilities (describe)			
	The manifest (asserted by			
23	Total liabilities (add lines 17 through 22)	0.	0.	
	Foundations that follow SFAS 117, check here			
	and complete lines 24 through 26 and lines 30 and 31.			
8 24	Unrestricted			
<u>E</u> 25	Temporanly restricted			
<u>6</u> 26				
<u> </u>	Foundations that do not follow SFAS 117, check here	i		
E	and complete lines 27 through 31.			
<u>s</u> 27	Capital stock, trust principal, or current funds	231,132.	231,132.	
Net Assets or Fund Balances 0.00		0.	0.	
Ž 29	Retained earnings, accumulated income, endowment, or other funds	0.	11,135.	
Ž 30	Total net assets or fund balances	231,132.	242,267.	
		001 100	0.40 0.67	
31	Total liabilities and net assets/fund balances	231,132.	242,267.	
Part	Analysis of Changes in Net Assets or Fund B	alances		
1 Tota	al net assets or fund balances at beginning of year - Part II, column (a), line	30		
•	ist agree with end-of-year figure reported on prior year's return)		1	231,132.
	er amount from Part I, line 27a	. 2	11,135.	
	er increases not included in line 2 (itemize)		3	0.
	l lines 1, 2, and 3		. 4	242,267.
	reases not included in line 2 (itemize)	· · · · · · · · · · · · · · · · · · ·		0.
6 Tota	al net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	olumn (b), line 30	. 6	242,267.

1.163547

.232709

138,794.

32,299.

32,301.

2.

41,996. 72,633. .578194 2008 2,098 93,715. .022387 2007

2 Total of line 1, column (d) Average distribution ratio for the 5-year base period - divide the total on line 2 by 5, or by the number of years

the foundation has been in existence if less than 5 years

5 Multiply line 4 by line 3

Enter the net value of noncharitable-use assets for 2012 from Part X, line 5

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

8 Enter qualifying distributions from Part XII, line 4

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate See the Part VI instructions

139,075.

Add lines 5 and 6

2

3

5

6

orm		<u>-049</u>			Page 4
Pa	art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 494	3 - see	instru	ctio	ns)
1a	a Exempt operating foundations described in section 4940(d)(2), check here ▶ □ and enter *N/A* on line 1				
	Date of ruling or determination letter (attach copy of letter if necessary-see instructions)				
b	b Domestic foundations that meet the section 4940(e) requirements in Part V, check here 🕨 🗶 and enter 1%				<u>2.</u>
	of Part I, Jine 27b				
C	c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b)				
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)				<u>0.</u>
_	Add lines 1 and 2				2.
	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)				0.
	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	<u> </u>			<u> 2.</u>
	Credits/Payments.				
	a 2012 estimated tax payments and 2011 overpayment credited to 2012				
	b Exempt foreign organizations - tax withheld at source				
	c Tax paid with application for extension of time to file (Form 8868)				
	d Backup withholding erroneously withheld				•
	Total credits and payments. Add lines 6a through 6d				<u> </u>
	Enter any penalty for underpayment of estimated tax. Check here If Form 2220 is attached				
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed				2.
	Enter the amount of line 10 to be Credited to 2013 estimated tax	Ц			
	art VII-A Statements Regarding Activities	<u>_</u>			
1a	a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in			res	No
	any political campaign?		1a		X
þ	b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)?	-	1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published of	r			
	distributed by the foundation in connection with the activities.				.,
	c Did the foundation file Form 1120-POL for this year?		1c		X
d	d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year				
	(1) On the foundation ►\$ 0. (2) On foundation managers ►\$ 0.				
е	e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation				
	managers > \$ 0.				v
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	•	2		X
•	If "Yes," attach a detailed description of the activities				
J	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or				х
40	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		3		X
	b If "Yes," has it filed a tax return on Form 990-T for this year?	N/A	4a		<u> </u>
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	M/ A	4b 5		X
J	If "Yes," attach the statement required by General Instruction T.	•			
£	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either				
٠	By language in the governing instrument, or				
	 By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law 	,			
	remain in the governing instrument?		6	Х	Ì
7	Did the foundation have at least \$5,000 in assets at any time during the year?	•	7	X	
-	If "Yes," complete Part II, col. (c), and Part XV.	• •			
8a	a Enter the states to which the foundation reports or with which it is registered (see instructions)				
	NH				
b	b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)				
-	of each state as required by General Instruction G? If "No," attach explanation		8b	X]
9		r r			
	year 2012 or the taxable year beginning in 2012 (see instructions for Part XIV)? If "Yes," complete Part XIV		9		Х
<u>1</u> 0	Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names and addresses	•	10	-	Х
		Fc	m 990	-PF	(2012)

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	rt 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		х
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		Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
14	Website address ► N/A The books are in care of ► Ann R. Lally, Treasurer & Secretary Telephone no ► (603)	898	-21	53
	Located at ▶ 3 South Broadway, Salem, NH ZIP+4 ▶ 03	079	_	
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		<u>/></u>	
	and enter the amount of tax-exempt interest received or accrued during the year .		<u>/A</u> _	
16	At any time during calendar year 2012, did the foundation have an interest in or a signature or other authority over a bank,	,	Yes	
	securities, or other financial account in a foreign country?	16		<u>X</u>
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1 If "Yes," enter the name of the foreign			
D:	country art VII-B Statements Regarding Activities for Which Form 4720 May Be Required	<u> </u>		
1.6	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
10	During the year did the foundation (either directly or indirectly)		163	140
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?			
		1 1		
	(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)?			
	(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) Yes X No			
מ	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)? N/A	.		
		1b		
	Organizations relying on a current notice regarding disaster assistance check here			
0	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected			37
_	before the first day of the tax year beginning in 2012?	10		<u>X</u>
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))			
8	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?		1	
_	If "Yes," list the years			
t	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect			
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach	1 _ [
	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			
38	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
	during the year?			
t	o 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		1	
	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,		1	
	Form 4720, to determine if the foundation had excess business holdings in 2012.) N/A	3b	1	
48	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
t	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		<u>X</u>

4b X Form **990-PF** (2012)

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Part VII-B Statements Regarding Activities for Which F	orm 4720 May Be F	Required (continu	ıed)	
5a During the year did the foundation pay or incur any amount to			1	
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	4945(e))?	Ye	s X No	
(2) Influence the outcome of any specific public election (see section 4955), or		ectly,		
any voter registration drive?	• • •		s X No	
(3) Provide a grant to an individual for travel, study, or other similar purposes?	,	Ye	s X No	
(4) Provide a grant to an organization other than a charitable, etc., organization		•		
509(a)(1), (2), or (3), or section 4940(d)(2)?		T Ye	s X No	
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or f	or		
the prevention of cruelty to children or animals?			s X No	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	er the exceptions described i	••		
section 53 4945 or in a current notice regarding disaster assistance (see instruc			N/A t	ib l
Organizations relying on a current notice regarding disaster assistance check he			▶ □ □	
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr		ned .		
expenditure responsibility for the grant?		I/A 🔲 Ye	s No	
If "Yes," attach the statement required by Regulations section 53.4945	• • •	.,		
6a Did the foundation, during the year, receive any funds, directly or indirectly, to p				
a personal benefit contract?	ay promisins on	□ γ _e	s X No	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a po	 ersonal henefit contract?			sb X
If "Yes" to 6b, file Form 8870.	organiar borrow contract.	• •		
7a At any time during the tax year, was the foundation a party to a prohibited tax sl	nelter transaction?	☐ Ye	s X No	
b If "Yes," did the foundation receive any proceeds or have any net income attribu				7b
Information About Officers Directors Truste		nagers. Highly		
Part VIII Paid Employees, and Contractors	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	•	
List all officers, directors, trustees, foundation managers and their	compensation.			
	(b) Title, and average	(c) Compensation	(d) Contributions to employee benefit plans	(e) Expense
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	and deferred compensation	account, other allowances
		,		
See Statement 3		0.	0.	0.
	•			
2 Compensation of five highest-paid employees (other than those inc	luded on line 1). If none,	enter "NONE."		
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average	(c) Compensation	(d) Contributions to employee benefit plans	(e) Expense account, other
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(C) Compensation	and deferred compensation	allowances
NONE				
				
		<u> </u>		
Total number of other employees paid over \$50,000				0
			Form	990-PF (2012)

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P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations, se	e instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
а	Average monthly fair market value of securities	1a	0.
b	Average of monthly cash balances	1b	0. 140,908.
C	Fair market value of all other assets	10	
d	Total (add lines 1a, b, and c)	1d	140,908.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0 •		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	140,908.
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	2,114.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	138,794.
6	Minimum investment return. Enter 5% of line 5	6	6,940.
P	art XI Distributable Amount (see instructions) (Section 4942(I)(3) and (I)(5) private operating foundations are foreign organizations check here and do not complete this part.)	id certain	_
1	Minimum investment return from Part X, line 6	1	6,940.
2a	2		
b	Income tax for 2012 (This does not include the tax from Part VI)		
C	Add lines 2a and 2b	2c	2.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	6,938.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	6,938.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1	7	6,938.
F	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		120 075
а		1a	139,075.
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 chantable projects that satisfy the		
а	Suitability test (prior IRS approval required)	3a	
þ	, , , , , , , , , , , , , , , , , , , ,	3b	100 075
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	139,075.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		_
	income. Enter 1% of Part I, line 27b	5	2.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	139,073.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation	qualifies for ti	ie section

Form **990-PF** (2012)

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				6,938.
2 Undistributed income, if any, as of the end of 2012	***************************************			
a Enter amount for 2011 only			0.	
b Total for prior years	· · · · · · · · · · · · · · · · · · ·			······································
		0.		
3 Excess distributions carryover, if any, to 2012				
a From 2007 .				
b From 2008 38,372.				
c From 2009				
d From 2010 5,087.				
e From 2011 70,073.	112 522			
f Total of lines 3a through e	113,532.			
4 Qualifying distributions for 2012 from				
Part XII, line 4 ► \$ 139,075.	1		0.	
a Applied to 2011, but not more than line 2a	!! -::::::::::::::::::::::::::::::::		V •	
b Applied to undistributed income of prior		0.		
years (Election required - see instructions)		U •	***************************************	**************************************
c Treated as distributions out of corpus	0.			
(Election required - see instructions)				6,938.
d Applied to 2012 distributable amount	132,137.			0,750.
e Remaining amount distributed out of corpus	0.			0.
5 Excess distributions carryover applied to 2012 (If an amount appears in column (d), the same amount must be shown in column (a))	J.	,		
6 Enter the net total of each column as indicated below:	***************************************			
2 Corpus Add lines 3f, 4c, and 4e Subtract line 5	245,669.			
b Prior years' undistributed income Subtract				
line 4b from line 2b		0.		***************************************
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b Taxable				
amount - see instructions		0.		
e Undistributed income for 2011 Subtract line				·
4a from line 2a Taxable amount - see instr			0.	
f Undistributed income for 2012 Subtract				
lines 4d and 5 from line 1. This amount must		,		
be distributed in 2013		······································	<u></u>	0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2007	0.			
not applied on line 5 or line 7	<u></u>			
9 Excess distributions carryover to 2013. Subtract lines 7 and 8 from line 6a	245,669.			
	243,003.			
10 Analysis of line 9 a Excess from 2008 38,372.	****			
b Excess from 2009	1			
c Excess from 2010 5,087.				
d Excess from 2011 70,073.	1			
e Excess from 2012 132,137.				
0 2x0000 nom 2012				Form 990-PF (2012)

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Part XIV Private Operating I			-A, question 9)	N/A	
1 a If the foundation has received a ruling	or determination letter that	it is a private operating			
foundation, and the ruling is effective f	or 2012, enter the date of t	he ruling	>		
b Check box to indicate whether the four	dation is a private operatir	ig foundation described i	n section	4942(j)(3) or	4942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum	(a) 2012	(b) 2011	(c) 2010	(d) 2009	(e) Total
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			ĺ		
d Amounts included in line 2c not					
used directly for active conduct of					
· .					
exempt activities			<u> </u>		
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,		ŀ		1	
dividends, rents, payments on					
securities loans (section					
512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt				1	
organizations as provided in					
section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from					
an exempt organization				-	
(4) Gross investment income	<u> </u>				
Part XV Supplementary Inf			if the foundation	n had \$5,000 o	r more in assets
at any time during	the year-see insti	ructions.)			
1 Information Regarding Foundati	-				
a List any managers of the foundation w			ributions received by th	e foundation before t	he close of any tax
year (but only if they have contributed	more than \$5,000) (See s	section 507(d)(2))			
None					
b List any managers of the foundation w other entity) of which the foundation h			(or an equally large port	ion of the ownership	of a partnership or
None					
2 Information Regarding Contribu	tion Grant Gift Loan	Scholarship etc. Pr	rograms:		
Check here Check here				not accent unsolicite	d requests for funds. If
the foundation makes gifts, grants, etc	•	•	•	•	•
	· · · · · · · · · · · · · · · · · · ·	<u> </u>	· · · · · · · · · · · · · · · · · · ·		
a The name, address, and telephone number 1 a 1 ly (603)	•	יינע wiroiti applications s	prioring ne sontessed		
Ann R. Lally, (603)		170			
3 South Broadway, S					
b The form in which applications should				11 ha	.
Letter of request a	nd explanati	on as to ho	w runas Wi	TT be use	<u>u</u>
c Any submission deadlines					
None	 				
d Any restrictions or limitations on awar					
Limited to organiza	tions in the	e greater Sa	ıтеm, NH ar	ea	
					
223601 12-05-12					Form 990-PF (2012)

Supplementary Information (continued) Part XV 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient show any relationship to Foundation Purpose of grant or Amount any foundation manager status of contribution Name and address (home or business) or substantial contributor recipient a Paid during the year Community Crossroads, Inc. None Public Charity 16th Annual Kids 3 Commerce Drive Carnival 1,000. Atkinson, NH 03811 Lazarus House Inc None Public Charity Campaign for Dignity 412 Hampshire Street 50,000. Lawrence, MA 01842 Public Charity Mission Possible NH Catholic Charities DBA NH Food None Challenge Bank 215 Myrtle Street 50,000. Manchester, NH 03104 Public Charity Marching band and Salem High School Parents Music Club None color guard travel and Geremonty Drive Salem, NH 03079 competition in Phoenix, AZ 5,000. Public Charity Construction of United Lebanese Cemetary Corporation None culvert system and 50 Corbett Road driveway for future Lawrence, MA 01843 cemetary expansion 33,000. 139,000. ➤ 3a b Approved for future payment None Total

Part XVI-A	Analysis of Income-Producing	Activities
• ••• • • • • • • • • • • • • • • • • •	,	

	Unrelated t	ousiness income	Eveluded	by section 512, 513, or 514	/->
ter gross amounts unless otherwise indicated	(a) Business	(b) Amount	(C) Exclu- sion code	(d) Amount	(e) Related or exempt function income
Program service revenue	code		Code		
a		.			
)	-			· · · · · · · · · · · · · · · · · · ·	
	l I				
	1			-	
	_				<u> </u>
Fees and contracts from government agencies					
Nembership dues and assessments					
nterest on savings and temporary cash			1 4	212	
vestments			14	213.	
lividends and interest from securities		, , 			
let rental income or (loss) from real estate	<u> </u>				
Debt-financed property					 -
Not debt-financed property					
let rental income or (loss) from personal					
property					
Other investment income					
Gain or (loss) from sales of assets other					
han inventory					
let income or (loss) from special events					
iross profit or (loss) from sales of inventory					
other revenue					
·					
h					
<u> </u>	ł I		- - - 		
	_				
d	_				
	_	C		213.	
Subtotal Add columns (b), (d), and (e)	_	C		213.	
Subtotal Add columns (b), (d), and (e) Fotal. Add line 12, columns (b), (d), and (e)		C		213.	
Subtotal Add columns (b), (d), and (e) Fotal. Add line 12, columns (b), (d), and (e) E worksheet in line 13 instructions to verify calculations				. 13	
Subtotal Add columns (b), (d), and (e) Fotal. Add line 12, columns (b), (d), and (e) E worksheet in line 13 instructions to verify calculations				. 13	
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) E worksheet in line 13 instructions to verify calculations Relationship of Activities	s to the Accor	nplishment of	Exempt F	. 13	2
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) E worksheet in line 13 instructions to verify calculations Relationship of Activities The No. Explain below how each activity for which in	s to the Accor	nplishment of	Exempt F	. 13	2
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) Eworksheet in line 13 instructions to verify calculations Relationship of Activities	s to the Accor	nplishment of	Exempt F	. 13	2
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) E worksheet in line 13 instructions to verify calculations Relationship of Activities The No. Explain below how each activity for which in	s to the Accor	nplishment of	Exempt F	. 13	2
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) Worksheet in line 13 instructions to verify calculations Relationship of Activities Explain below how each activity for which in	s to the Accor	nplishment of	Exempt F	. 13	2
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) Worksheet in line 13 instructions to verify calculations Relationship of Activities Explain below how each activity for which in	s to the Accor	nplishment of	Exempt F	. 13	2
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) Eworksheet in line 13 instructions to verify calculations Relationship of Activities The No. Explain below how each activity for which in	s to the Accor	nplishment of	Exempt F	. 13	2
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) Eworksheet in line 13 instructions to verify calculations Relationship of Activities The No. Explain below how each activity for which in	s to the Accor	nplishment of	Exempt F	. 13	2
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) Eworksheet in line 13 instructions to verify calculations Relationship of Activities The No. Explain below how each activity for which in	s to the Accor	nplishment of	Exempt F	. 13	2
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) Worksheet in line 13 instructions to verify calculations Relationship of Activities Explain below how each activity for which in	s to the Accor	nplishment of	Exempt F	. 13	2
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) Worksheet in line 13 instructions to verify calculations Relationship of Activities Explain below how each activity for which in	s to the Accor	nplishment of	Exempt F	. 13	2
subtotal Add columns (b), (d), and (e) total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations Relationship of Activities e No. Explain below how each activity for which in	s to the Accor	nplishment of	Exempt F	. 13	2
ubtotal Add columns (b), (d), and (e) otal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations rt XVI-B Relationship of Activities e No. Explain below how each activity for which in	s to the Accor	nplishment of	Exempt F	. 13	2
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) Worksheet in line 13 instructions to verify calculations Relationship of Activities Explain below how each activity for which in	s to the Accor	nplishment of	Exempt F	. 13	2
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) Worksheet in line 13 instructions to verify calculations Relationship of Activities Explain below how each activity for which in	s to the Accor	nplishment of	Exempt F	. 13	2
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) Eworksheet in line 13 instructions to verify calculations Relationship of Activities The No. Explain below how each activity for which in	s to the Accor	nplishment of	Exempt F	. 13	2
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) Eworksheet in line 13 instructions to verify calculations Relationship of Activities The No. Explain below how each activity for which in	s to the Accor	nplishment of	Exempt F	. 13	2
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) Worksheet in line 13 instructions to verify calculations Relationship of Activities Explain below how each activity for which in	s to the Accor	nplishment of	Exempt F	. 13	2
subtotal Add columns (b), (d), and (e) total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations Relationship of Activities e No. Explain below how each activity for which in	s to the Accor	nplishment of	Exempt F	. 13	2
Subtotal Add columns (b), (d), and (e) Fotal. Add line 12, columns (b), (d), and (e) E worksheet in line 13 instructions to verify calculations Relationship of Activities The No. Explain below how each activity for which in	s to the Accor	nplishment of	Exempt F	. 13	2

		Exempt Organ	izations							
1	Did the	organization directly or indi	rectly engage in any of th	ne following	with any other organization	n described in sectio	n 501(c) of		Yes	No
		_			7, relating to political organiz					
а		rs from the reporting founda								
(1) Cash							1a(1)	1	Х	
	٠.	er assets	•			•		1a(2)		X
L		ansactions	••					1.2/2/		
U			ble everent everentees					16(1)		Х
		es of assets to a noncharita								<u> </u>
		rchases of assets from a no		nization		•	•	1b(2)		X
		ntal of facilities, equipment,		-		•		1b(3)		X
		mbursement arrangements			•		•	1b(4)		
		ans or loan guarantees		•	•			1b(5)		X
	(6) Per	rformance of services or me	embership or fundraising	j solicitatioi	ns .			1b(6)		X
	-	of facilities, equipment, ma						10	i	X
d					dule Column (b) should alw				ets,	
		ces given by the reporting for (d) the value of the goods,			ed less than fair market value	e in any transaction (or shanng arrangement, s	show in		
(a)	Line no	(b) Amount involved			exempt organization	(d) Description	of transfers, transactions, and	sharing ar	rangeme	nts
. , .		• • • • • • • • • • • • • • • • • • • •		N/A						
	-+		-		· · · · · · · · · · · · · · · · · · ·					
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			-							
-						-	 -			
						 				
									-	
						- 				
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	-	<u>-</u>								
	-				·					
			 	•						
			 			· · · · · ·				
										
						· · · -				
	Is the f	oundation directly or indirec	tly affiliated with, or rela	ted to, one	or more tax-exempt organiz	zations described				
	ın secti	on 501(c) of the Code (othe	er than section 501(c)(3)) or in sect	юп 527?		L	Yes	X	No
b	If Yes,	complete the following sch	nedule							
		(a) Name of org	ganization		(b) Type of organization	(c) Description of relations	hip		
_		N/A								
	Un	der penalties of perjury, I declare	e that I have examined this re	tum, includin	ng accompanying schedules and	statements, and to the i	best of my knowledge	y the IRS	discuss	this
		a beller, it is take, correct, and co	Militare declaration of prepa	000	n taxpayer) is based on all inform		90	um with the	e prepar (see ins	er tr)?
Н	ere		100	9	1/10/13	Secret	ary	Yes	;	_ No
	3	Signature of officer or truster	е	_()	Date	Title				
		Print/Type preparer's n	iame P	reparer's s	ignature		Check If PTIN			
				2	Λ –	11.01	self- employed			
P	aid	Nicholas E		11	N	6/25/13		0182		
P	repare	er Firm's name ► Bak	ker Newman	& Noy	es		Firm's EIN ► 01-0	4945	26	·
	se On									
		Firm's address ► BC	ox 507							
			ortland, ME	0411	2		Phone no (207	<u>) 8</u> 7	9-2	100
				_				orm 99 0		

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

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

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

OMB No 1545-0047

2012

Employer identification number

Salem Community Benefits, Inc. 02-0499456 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 foundation 527 political organization X 501(c)(3) exempt private foundation Form 990-PF 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. General Rule [X] For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. **Special Rules** For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II. For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III. For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not total to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively \$ religious, charitable, etc., contributions of \$5,000 or more during the year Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on Part I, line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2012)

Name of organization

Employer identification number

Salem Community Benefits, Inc.

02-0499456

Part I	Contributors (see instructions). Use duplicate copies of Part I if addition	nal space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	Salem Cooperative Bank 3 South Broadway Salem, NH 03079	\$ 150,000.	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
·		- - \$	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.)

Employer identification number

Salem Community Benefits, Inc.

02-0499456

Part II	Noncash Property (see instructions). Use duplicate copies of Part II if a	dditional space is needed.	
(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
		\$	
(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
		\$	

(e) Transfer of gift

Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

Form 990-PF	Taxes		Statement 1		
Description	(a) Expenses Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Income	(d) Charitable Purposes	
Federal excise	3.	0.		0.	
To Form 990-PF, Pg 1, ln 18	3.	0.		0.	
Form 990-PF	Other Expenses		Statement 2		
Description	(a) Expenses Per Books	(b) Net Invest- ment Income	_	(d) Charitable Purposes	
State of NH annual report fee	75.	0.		75.	
To Form 990-PF, Pg 1, ln 23	75.	0.		75.	

	Part VIII - List of Officers, Directors Trustees and Foundation Managers			Statement 3	
Name and Address	Title and Avrg Hrs/Wk	Compen- sation	Employee Ben Plan Contrib	Expense	
David Beshara c/o Salem Community Benefits, Inc. 3 South Broadway Salem, NH 03079	Director 0.10	0.	0.	0.	
John Korbey c/o Salem Community Benefits, Inc. 3 South Broadway Salem, NH 03079	Director 0.10	0.	0.	0.	
James Rausch c/o Salem Community Benefits, Inc. 3 South Broadway Salem, NH 03079	Director 0.10	0.	0.	0.	
Nadema Gemmell c/o Salem Community Benefits, Inc. 3 South Broadway Salem, NH 03079	Chairman 0.10	0.	0.	0.	
Ann R. Lally c/o Salem Community Benefits, Inc. 3 South Broadway Salem, NH 03079	Treasurer & Se	ecretary 0.	0.	0.	
Totals included on 990-PF, Page 6,	Part VIII	0.	0.	0.	