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Department of the Treasury

Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

▶ Do not enter Social Security numbers on this form as it may be made public. ▶ Information about Form 990 and its instructions is at www.irs.gov/form990

L	OMB No. 1545-0047
I	0040
ı	2013
ŀ	
	Open to Public
1	Inspection

<u> </u>	or th	e 201	3 calendar year, or tax year begini		013, and en				, 20			
D .			C Name of organization G WHITTEMO	RE TR FBO H WHITTE	MORE LIB	RARY,	D Employeride	ntification	number			
D C	neck of ap	plicable	WEBSTER BANK									
	Addre		Doing Business As				06-6025	602				
	Name	change	Number and street (or P.O. box if mail is n	ot delivered to street address)	Room/suit	te	E Telephone number					
	Initial	return	123 BANK STREET		İ		203 578	-2409	}			
	Termi	nated	City or town, state or province, country, ar	nd ZIP or foreign postal code								
	Amen		WATERBURY, CT 06702				G Gross receipts	731	,531			
	Applic	ation	F Name and address of principal officer				H(a) Is this a group return for			χNο		
_	penda	ng					subordinates? H(b) Are all aubordina		Yes	No		
	Tayer	empt st	tatus: 501(c)(3) 501(c) () ◀ (insert no.) X 4947(a)(1) or	527	If "No," attach			•		
			N/A	(magning) A 4047	a)(1) oi	327	H(c) Group exempt					
				Association Other	I Van	r of format		-	gal domicile: (<u></u>		
	rt I		mmary	Association	L rea		1934 141 3	itate or let	jai domicile. (~+		
Г												
	1		describe the organization's mission or i									
ဦ		MAI.	NTENANCE OF PUBLIC LIBR	ARY								
E												
Activities & Governance			this box 🕨 🔃 if the organization dis					1		_		
ğ	3		per of voting members of the governing t					3		<u>_</u>		
νς (χ	4		er of independent voting members of th					4		1		
ij	5	Total	number of individuals employed in calen	idar year 2013 (Part V, line 2a)	. .			5		<u>NONE</u>		
彦	6		number of volunteers (estimate if necess					6	1	<u>NONE</u>		
ď	7a	Total	unrelated business revenue from Part VII	ll, column (C), line 12				7a	1	<u>NONE</u>		
	b	Net ur	nrelated business taxable income from F	orm 990 T, line 34			<u> </u>	7b	1	<u>NONE</u>		
				RECEIVE			Prior Year		Current Yea	ar		
a	8	Contri	butions and grants (Part VIII, line 1h)		-				1	<u>,759</u>		
Ž	9	Progra	am service revenue (Part VIII, line 2g)		μ. löl		381,19	3				
Revenue	10	Invest	ment income (Part VIII, column (A), line	s 3, 4, and 70 AY 1 9 ZUI	. اما		110,67	70	111	,046		
Œ	11	Other	revenue (Part VIII, column (A), lines 5, 6	id, 8c, 9c, 10c, and 11e)	<u> </u> č							
	12	Total	revenue - add lines 8 through 11 (must e	equal Part VIII nolumnIA) line	i27		491,86	3	112	,805		
	13		s and similar amounts paid (Part IX, colu				105,98			,052		
	14		its paid to or for members (Part-IX, colur									
	15		es, other compensation, employee bene		18,20	001	20	,828				
Expenses			ssional fundraising fees Bart IX, column	-								
per			fundraising expenses (Part IX, ch) umn (E		NONE							
Ä			expenses (Part IX, column (A), lines 1 Ta	*/ */ D// ==============================		-	14,02	0.0		705		
	18		expenses. Add lines 13-17 Invist-equal I				138,21		134	, 585		
	19		nue less expenses. Subtract line 18 from			· 	353,65			, 780		
- Sa		neven	de less expenses. Subtractaine / b / tol-	upe 12:		Regin	ning of Current Ye		End of Year			
its or	20	Tatal	assets (Part X, line 16)			Dogin		_				
Net Asset Fund Balar	20					•	2,589,81	NE	2,567			
# E	21		liabilities (Part X, line 26)		· · · · · · · ·	··			2 5 6 7	NON:		
			ssets or fund balances. Subtract line 21	from line 20	· · · · · · · ·	•	2,589,81	- /	2,567	, /40		
	rt II		gnature Block					b	1.4 4 1			
			of perjury, I declare that I have examined thi complete Beclaration of preparer (other than					my know	leage and bei	iei, it is		
		Ι.	H Decagh A	1 11118			05/12	/001				
Sig	n		Signature of officer	Much			[U5/13	3/2014	<u> </u>			
Hei		•	Signature of officer				Date					
1161	C											
			Type or print name and title	\mathcal{I}	<u> </u>		· · · · · · · · · · · · · · · · · · ·					
D-:-		Print/	/Type preparer's name	Preparer's signature	Date		Check	ıf PTIN				
Paid		GOR	DON POWERS	Uman/ n	2005/1	3/201	4 self-employe	d]	P0026019	94		
	Only	Firm's	sname ▶ ERNST & YOUNG U.	S. LLP			Firm's EIN ▶	34-65				
use	Only	—	saddress ► 200 CLARENDON ST		02216				87-9019			
May	the II		cuss this return with the preparer shown						X Yes	No		
_			Reduction Act Notice, see the separate				<u> </u>		Form 990			

	t III Statement of Program Service Accomplishments
Fe	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	MAINTENANCE OF PUBLIC LIBRARY
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
4	If "Yes," describe these changes on Schedule O. Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others the total expenses, and revenue, if any, for each program service reported.
‡a	(Code:) (Expenses \$134,585. including grants of \$113,052.) (Revenue \$112,805.)
4h	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
_	Other program and idea (Decembe in Cabadula O.)
40	Other program services (Describe in Schedule O.) (Expenses \$ including grants of \$) (Revenue \$)
4e	Total program service expenses ► 134,585.

Page 3

rait	Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		Х
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to	_		
3	candidates for public office? If "Yes," complete Schedule C, Part I	3		х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
•	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			
J	assessments, or similar amounts as defined in Revenue Procedure 98-197 If "Yes," complete Schedule C,			
	Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
•	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			
	"Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
_	complete Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a			
	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or			
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted			
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		Х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
	VII, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			
	complete Schedule D, Part VI	11a		X
b	Did the organization report an amount for investments-other securities in Part X, line 12 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
C	Did the organization report an amount for investments-program related in Part X, line 13 that is 5% or more			}
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets			
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes,"			١.,
	complete Schedule D, Parts XI and XII	12a		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if	401		7,
40	the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	-	X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		^
D	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			
	fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14Ь		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or	145		^ <u>`</u>
13	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other			 ^
	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on	├ `		 "
• •	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on	<u> </u>		<u> </u>
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			1
	If "Yes," complete Schedule G, Part III	19		Х
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Part I	Checklist of Required Schedules (continued)			
_			Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Х	
22	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States			
	on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Х
22	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			<u> </u>
23				
	organization's current and former officers, directors, trustees, key employees, and highest compensated			١.,
	employees? If "Yes," complete Schedule J	23		X
24 a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
	through 24d and complete Schedule K. If No, go to line 25a	24a		<u>X</u>
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		X
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		X
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		X
	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction			
234	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
		238		<u> </u>
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?	l		.,
	If "Yes," complete Schedule L, Part L	25b	ļ	X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payable to any			
	current or former officers, directors, trustees, key employees, highest compensated employees, or		}	
	disqualified persons? If so, complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,		ĺ	
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
	Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV.	28a		Х
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
b		28b		Х
	Schedule L, Part IV.			
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)	l		٠,
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M			X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	31	<u></u>	X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"		1	
	complete Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-37 If "Yes," complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,			<u> </u>
34	or IV, and Part V, line 1	34		Х
25.	Did the organization have a controlled entity within the meaning of section 512(b)(13)?		-	X
35 a		35a		 ^-
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a			١,,
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	₩	X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			
	related organization? If "Yes," complete Schedule R, Part V, line 2	36		<u> </u>
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			
	Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and	-		
	19? Note. All Form 990 filers are required to complete Schedule O		Х	
	10. Rete: All Form 330 mers are required to complete deficulty of the control of			(2012)

Fart				
	Check if Schedule O contains a response or note to any line in this Part V	• • • •	r	لــــــــــــــــــــــــــــــــــــــ
			Yes	No
	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
C	Did the organization comply with backup withholding rules for reportable payments to vendors and			
	reportable gaming (gambling) winnings to prize winners?	1c		X
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return . 2a 0			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Х
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4a		Х
b	If Yes, enter the name of the foreign country ▶			
-	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Х
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c	Ì	
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
va	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		Х
h	If "Yes," did the organization include with every solicitation an express statement that such contributions or		t	
D	-	6ь		
7	gifts were not tax deductible?	UB		
	Organizations that may receive deductible contributions under section 170(c). Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
а		70		Х
	and services provided to the payor?	7a 7b	\dashv	^_
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	76	+	
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	7c	ł	Х
	required to file Form 8282?	76		_^
	If "Yes," indicate the number of Forms 8282 filed during the year	70		X
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e 7f		X
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?			X
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	+	X
_	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	,	Λ
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting			
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring	8		Х
	organization, have excess business holdings at any time during the year?	٥		
9	Sponsoring organizations maintaining donor advised funds.	0.0		v
	Did the organization make any taxable distributions under section 4966?	9a 9b		X
	Did the organization make a distribution to a donor, donor advisor, or related person?	30		_^
10	Section 501(c)(7) organizations. Enter Initiation fees and capital contributions included on Part VIII, line 12			
	• • • • • • • • • • • • • • • • • • • •			
11	Section 501(c)(12) organizations. Enter. Gross income from members or shareholders			
D	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)			
40-		120		Х
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		_^
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	120		
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O.			
D	Enter the amount of reserves the organization is required to maintain by the states in which			
_	the organization is licensed to issue qualified health plans			
	Enter the amount of reserves on hand	14-		v
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
D	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		i

	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes				
Sect	Check if Schedule O contains a response or note to any line in this Part VI ion A. Governing Body and Management	· · · · · · · · · ·	• • •		X
Occi	ion A. Governing body and management			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a 1			
	If there are material differences in voting rights among members of the governing body, or if the governing		1		
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.				
b	Enter the number of voting members included in line 1a, above, who are independent	1b1			
2	Did any officer, director, trustee, or key employee have a family relationship or a business rel	ationship with			
	any other officer, director, trustee, or key employee?		2		Х
3	Did the organization delegate control over management duties customarily performed by or un				
	supervision of officers, directors, or trustees, or key employees to a management company or other		3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was fi		4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's		5		Х
6	Did the organization have members or stockholders?		6_		Х
7a	Did the organization have members, stockholders, or other persons who had the power to el	ect or appoint			
	one or more members of the governing body?		7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval	by) members,	ļ ·		
	stockholders, or persons other than the governing body?		7b		X
8	Did the organization contemporaneously document the meetings held or written actions und	ertaken during			
	the year by the following:	_			
а	The governing body?		8a	Х	
b	Each committee with authority to act on behalf of the governing body?		8b		X
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot	be reached at			
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		9		<u>X</u>
Sect	on B. Policies (This Section B requests information about policies not required by the In	ternal Revenue	e Cod		
				Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of	such chapters,			
	affiliates, and branches to ensure their operations are consistent with the organization's exempt p	urposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before for	ling the form? .	11a	<u>X</u>	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.				
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13		12a		X
b	Were officers, directors, or trustees, and key employees required to disclose annually interests	that could give			
	rise to conflicts?		12b		
C	Did the organization regularly and consistently monitor and enforce compliance with the p	olicy? If "Yes,"			
	describe in Schedule O how this was done		12c		
13	Did the organization have a written whistleblower policy?		13	77	X
14	Did the organization have a written document retention and destruction policy?		14	X	
15	Did the process for determining compensation of the following persons include a review ar	id approval by			
	independent persons, comparability data, and contemporaneous substantiation of the deliberation				١,,
a	The organization's CEO, Executive Director, or top management official		15a	ļ	X
b	Other officers or key employees of the organization		15b		X
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).				
16a		_	l.,		.,
	with a taxable entity during the year?		<u>16a</u>		X
p	If "Yes," did the organization follow a written policy or procedure requiring the organization				
	participation in joint venture arrangements under applicable federal tax law, and take steps to		40.		İ
Sect	organization's exempt status with respect to such arrangements?	 	16b	L	I
	<u> </u>				
17	List the states with which a copy of this Form 990 is required to be filed Connecticut				
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and available for public inspection. Indicate how you made these available. Check all that apply. Own website X Upon request Other (explain in Sc.		501(c)(3)S	only
19	Describe in Schedule O whether (and if so, how) the organization made its governing document	ts, conflict of in	erest	policy	y, and
	financial statements available to the public during the tax year.				
20	State the name, physical address, and telephone number of the person who possesses the books organization. WEBSTER BANK, NA TEL: (203) 578-2409	and records of t	he		

orm 990 (201	3)									Pag
Part VII	Compensation		Directors,	Trustees,	Key	Employees,	Highest	Compensated	Employees,	ar

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

Check this box if neither the organization nor	any related	orga	niza	tion	cor	npen	sate	d any current office	er, director, or trus	stee.
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	box, office or dir	unle	neck ss pe	ition more	than or Highest compensated	an	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
(1) WEBSTER BANK, TRUSTEE	1.00		Х			-		20,828	NONE	NON
_(2)								20,020	1,01,12	11011
_(3)										
(5)				_						
_(8)										<u>.</u> .
_(9)										
(10)										-
(11)							1			
(12)										
(13)										
(14)										

3E1041 1 000

(A) Name and title	Average hours per week (list any hours for related organizations below dotted line)	box,	unles	neck ss pe	rson	and the struck Highest compensated	an	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation related organization (W-2/1099-M	from	(F) Estimate amount of other compensation the organization	of tion
7)	organizations below dotted	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization	organizatio		compensat	
7)											and relate organization	on ed
7)												
		}								-		
21												
B)			-									<u>,</u>
9)												
0)			_		<u> </u>							
1)				<u>. </u>						_		
2)					_							
3)												
4)												
5)												
1b Sub-total			<u> </u>									
c Total from continuation sheets to Part VII, So d Total (add lines 1b and 1c)	ection A .						•	20,828.		NONE		NON
Total number of individuals (including but not reportable compensation from the organization)	limited to						o re					1101
3 Did the organization list any former office employee on line 1a? If "Yes," complete Sched	cer, direct	or, o ıch in	r tr	uste duai	ee, /	key	emp	oloyee, or highe	st compensa	ted	Yes	No X
For any individual listed on line 1a, is the organization and related organizations gr individual	eater that	n \$1	50,0	000	? /	f Ye	s,	complete Schede			4	
5 Did any person listed on line 1a receive or for services rendered to the organization? If Y	accrue co	mper	nsati	ion	fro	m any	ur ur	related organizati	on or individ	lual a	5	Х
ection B. Independent Contractors									_			
 Complete this table for your five highest com- compensation from the organization. Report of year. 	pensated compensat	indep ion fo	end or th	ent e ca	cor alen	tracto dar ye	ear (that received mor ending with or wit	e than \$100,0 thin the orgar	000 of nization's	s tax	
(A) Name and business addi	ress							(B) Description of se	rvices	Com	(C) pensation	
							-					
2 Total number of independent contractors received more than \$100,000 of compensation						ited	to	those listed abo	ove) who	MAN TO	100 CO	Lide II.

Par	t VIII	Statement of Revenue Check if Schedule O contains a res	nonse or note to an	v line in this Part V	111		
		Silest ii eenedale e semanie a res		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
nts nts	1a	Federated campaigns 18					1
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues 11					
ts, (Arr	c	Fundraising events 10					
Gif	d	Related organizations 10	<u> </u>				
ons, Sim	е	Government grants (contributions) 16					
utic	f	All other contributions, gifts, grants,	4 550				
frib Otl		and similar amounts not included above . 11					
Con	g	Noncash contributions included in lines 1a-1f \$		1 750			
	<u>h</u>	Total. Add lines 1a-1f		1,759.			_
Program Service Revenue			Business Code			-	
Rev	2a			-			
e	ь			-			
ervi	C .					.	
n S	a						
3rar	e	All other program on the country	_				
Pro	g	All other program service revenue Total. Add lines 2a-2f	 				
	3	Investment income (including dividends, in			·-··		1
	,	other similar amounts)		75,566.			75,56
	4	Income from investment of tax-exempt bon		,			1,
	5	Royalties · · · · · · · · · · · · · · · · · · ·					<u> </u>
	•	(ı) Real	(ıi) Personal	-			
	6a	Gross rents			İ		
	b	Less rental expenses					
	c	Rental income or (loss)			-		
	d	Net rental income or (loss)					Ī
	7.	(ı) Securitie				-	
	7a	Gross amount from sales of assets other than inventory 654, 20	06				
	ь	Less cost or other basis					
	_	and sales expenses 618,72	26				
	С	Gain or (loss)	30				
	d	Net gain or (loss)		35,480.	35,480.		
<u>a</u>	8a	Gross income from fundraising					
Z.		events (not including \$					
eVe		of contributions reported on line 1c).					
ě		See Part IV, line 18	a				
Other Revenue	b	Less direct expenses	ь				
ŏ	C	Net income or (loss) from fundraising event	s . <u></u>				
	9a	Gross income from gaming activities.		1			
		See Part IV, line 19	1 1				
		Less. direct expenses		-			
	С	Net income or (loss) from gaming activities	· · <u>· · · · · · · Þ</u>				
	10a	Gross sales of inventory, less			0		1
		returns and allowances					
		Less cost of goods sold			-		<u> </u>
	С	Net income or (loss) from sales of inventory Miscellaneous Revenue	Business Code				
				I	1		
	11a						
	Ь		-				
	C		-				-
	d	All other revenue					
	е 12	Total. Add lines 11a-11d · · · · · · · · · Total revenue. See instructions · · · · ·		112,805.	35,480.		75,56
				<u> </u>	22,400.		1 10,00

_	t IX Statement of Functional Expenses										
Sec	Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).										
	Check if Schedule O contains a respo										
	not include amounts reported on lines 6b, 7b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses						
1	Grants and other assistance to governments and										
	organizations in the United States. See Part IV, line 21 .	113,052.	113,052.								
2	Grants and other assistance to individuals in										
	the United States. See Part IV, line 22				 						
3	Grants and other assistance to governments,										
	organizations, and individuals outside the										
	United States. See Part IV, lines 15 and 16		-		· · · · · · · · · · · · · · · · · · ·						
	Benefits paid to or for members										
5	Compensation of current officers, directors, trustees, and key employees	20,828.		20,828.							
6	Compensation not included above, to disqualified	,									
	persons (as defined under section 4958(f)(1)) and										
	persons described in section 4958(c)(3)(B)										
7	Other salaries and wages										
	Pension plan accruals and contributions (include section			•							
·	401(k) and 403(b) employer contributions)										
9	Other employee benefits	· -									
10	Payroll taxes										
	Fees for services (non-employees)										
	Management										
	Legal										
	Accounting	302.		302.							
	Lobbying										
	Professional fundraising services. See Part IV, line 17.										
	Investment management fees										
	Other. (If line 11g amount exceeds 10% of line 25, column										
	(A) amount, list line 11g expenses on Schedule O)										
12	Advertising and promotion										
13											
14	Information technology										
15	Royalties										
16	Occupancy										
17	Travel										
18	Payments of travel or entertainment expenses										
	for any federal, state, or local public officials										
19	Conferences, conventions, and meetings										
20	Interest										
21	Payments to affiliates										
22	Depreciation, depletion, and amortization										
23	Insurance										
24	Other expenses, Itemize expenses not covered										
	above (List miscellaneous expenses in line 24e If										
	line 24e amount exceeds 10% of line 25, column										
	(A) amount, list line 24e expenses on Schedule O.)										
а											
ь											
c											
d											
e	All other expenses	403.		403.	. <u> </u>						
	Total functional expenses. Add lines 1 through 24e	134,585.	113,052.	21,533.	NON						
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs			1							
	from a combined educational campaign and										
	fundraising solicitation. Check here if										

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Pa	rt X	Balance Sheet			
		Check if Schedule O contains a response or note to any line in this Pa	rt X	<u></u>	
			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	25,731.	1	195,534.
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	
	5	Loans and other receivables from current and former officers, directors,		- 1	
		trustees, key employees, and highest compensated employees.		1	
i		Complete Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L		6	
ets	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use		8	
_	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment: cost or			
		other basis. Complete Part VI of Schedule D			
	b	Less: accumulated depreciation		10c	
	11	Investments - publicly traded securities	2,564,086.	11	2,372,206.
	12	Investments - other securities. See Part IV, line 11		12	
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)	2,589,817.	16	2,567,740.
	17	Accounts payable and accrued expenses		17	
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
es	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
≣	22	Loans and other payables to current and former officers, directors,			
Liabilities		trustees, key employees, highest compensated employees, and			
_		disqualified persons. Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part X		25	
		of Schedule D	NONE	_	NONE
	26	Total liabilities. Add lines 17 through 25	NONE	26	NONE
S		complete lines 27 through 29, and lines 33 and 34.			
S.	27			27	
aa Ba	28	Unrestricted net assets Temporarily restricted net assets		28	
ä	29	Permanently restricted net assets		29	
Š		Organizations that do not follow SFAS 117 (ASC 958), check here			
F		complete lines 30 through 34.			
Net Assets or Fund Balances	30	Capital stock or trust principal, or current funds		30	
set	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
As	32	Retained earnings, endowment, accumulated income, or other funds	2,589,817.	32	2,567,740.
Vet	33	Total net assets or fund balances	2,589,817.	33	2,567,740.
_	34	Total liabilities and net assets/fund balances	2,589,817.	34	2,567,740.
_	<u> </u>		2/303/01/.	•	5 990 (0040)

Form **990** (2013)

Form 99	00 (2013)				Pa	ge 12
Part	XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI		<u>.</u>	<u></u>	<u> </u>	X
1	Total revenue (must equal Part VIII, column (A), line 12)	1		1	12,8	<u> 305.</u>
2	Total expenses (must equal Part IX, column (A), line 25)	2		1	34,!	<u>585.</u>
3	Revenue less expenses. Subtract line 2 from line 1	3				<u>780.</u>
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		<u>2,5</u>	89,8	<u>317.</u>
5	Net unrealized gains (losses) on investments	5				
6	Donated services and use of facilities	6				
7	Investment expenses	7				
8	Prior period adjustments	8				
9	Other changes in net assets or fund balances (explain in Schedule O)	9				<u> 297.</u>
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line	1 1				
	33, column (B))	10		<u>2,5</u>	67 <u>,</u>	<u>740.</u>
Part						
	Check if Schedule O contains a response or note to any line in this Part XII	• • •		• • •		
					Yes	No
1	Accounting method used to prepare the Form 990: X Cash Accrual Other					
	If the organization changed its method of accounting from a prior year or checked "Other," e	xplair	חוו	}		
	Schedule O.					
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were con	npiled	or			
	reviewed on a separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					ļ
b	Were the organization's financial statements audited by an independent accountant?			2b	ļ	<u>X</u>
	If "Yes," check a box below to indicate whether the financial statements for the year were audi	ted o	n a			
	separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					ļ
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for overs	sight		1		
	of the audit, review, or compilation of its financial statements and selection of an independent account	ntant?	'	2c		<u> </u>
	If the organization changed either its oversight process or selection process during the tax year, e	xplaiı	n in			İ
	Schedule O.					
3a	As a result of a federal award, was the organization required to undergo an audit or audits as se	t fortl	n in			١
	the Single Audit Act and OMB Circular A-133?			3a	 	X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not und		the			
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such au	dits.		3b	ì	I

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

OMB No. 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service

► Attach to Form 990 or Form 990-EZ.
► Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs gov/form990

Inspection

Name of	the organization	- · · · · - · - · - · · · · · · · · · ·						Employ	yer ident	ification number
G WHI	TTEMORE TR FBC	H WHITTEMOR	RE LIBRARY, C/O				_		06-6	025602
Part I	Reason for Publ	ic Charity Status	(All organizations mus	st com	plete	this pa	art.) Se	e instru	uctions	
The orga			ause it is: (For lines 1 thro	-		-				
1	4		association of churches d		ed in s	ection	170(b)(1)(A)(i).		
2	A school described	in section 170(b)	1)(A)(ii). (Attach Schedul	e E.)						
3	1		ervice organization describ							
4	•		erated in conjunction wi	th a h	ospita	I descri	bed in	section	n 170(l	o)(1)(A)(iii). Enter the
_	hospital's name, cit						- -			
5	An organization op section 170(b)(1)(A		nefit of a college or univ	ersity	owned	or ope	erated l	oy a go	vernme	ntal unit described in
6	1	•	or governmental unit desc	ribed i	in sect	ion 170)(b)(1)(<i>A</i>	A)(v).		
7	4	_	es a substantial part of it						it or fr	om the general public
	described in section			• •						J p
8	7		n 170(b)(1)(A)(vi). (Com	plete F	art II.)					
9	An organization the	at normally receive	es: (1) more than 331/3%	of its	suppo	rt from	contrib	utions,	memb	ership fees, and gross
	receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 331/3% of its									
	support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses									
	acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.)									
10										
11 X										
	purposes of one o	r more publicly su	pported organizations de	scribe	d in s	ection 9	509(a)(1	I) or se	ection 5	09(a)(2). See section
			es the type of supporting	_						•
	a Type I		c Type III-Function							nctionally integrated
e X			e organization is not cont							
			other than one or more p	publich	y supp	orted o	rganıza	tions d	lescribe	d in section 509(a)(1)
_	or section 509(a)(2					_		_		
f			n determination from the					ype II,	or Typ	e III supporting
	organization, check	this box								
g		006, has the organ	nization accepted any gift	or con	itributi	on from	any of	the		
	following persons?	dinasti, an indias		-	. 4					
			tly controls, either alone							
			the supported organization cribed in (i) above?							
			on described in (ı) or (ii) a							11g(ii) X
h			ut the supported organiza							[119\111] X
	Name of supported	(ii) EIN	(iii) Type of organization		ls the	(v) Did v	ou notify	1,411	s the	(vii) Amount of monetary
١.,,	organization	(1) = 114	(described on lines 1-9	organiz	ation in	the orga	nızation	organiz	ation in	support
			above or IRC section (see instructions))	your go	listed in overning) of your port?		rganized US.?	
			(5555.1.25.1.5.1.7)	Yes	Ment? No	Yes	No	Yes	No	
					-			1		
(A)	SEE PART IV									
							-			
(B)										
(C)										
					 	<u> </u>				
(D)										
(E)										
Total				L	1			<u> </u>		

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

Schedule A (Form 990 or 990-EZ) 2013

	dule A (Form 990 or 990-EZ) 2013						Page
Par	t II Support Schedule for Orga (Complete only if you checke Part III. If the organization fai	d the box on	line 5, 7, or 8	of Part I or if t	he organizatio	n failed to qua	
Sec	tion A. Public Support	_					N/A
Cale	ndar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")		ļ				
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3					<u> </u>	
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)		1				
6	Public support. Subtract line 5 from line 4.		<u> </u>	1		1	
	tion B. Total Support ndar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(6) Tatal
7	Amounts from line 4	(a) 2009	(6) 2010	(6) 2011	(0) 2012	(e) 2013	(f) Total
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
11	Total support. Add lines 7 through 10		,,		1		
12	Gross receipts from related activities, etc. (s	ee instructions)				12	
13	First five years. If the Form 990 is forganization, check this box and stop here	· · · · · · · · · · · · · · · · · · ·		nd, third, fourth,	or fifth tax ye	ear as a section	501(c)(3) · · · · · ▷
14	Public support percentage for 2013 (III			11 column /f/\	····	14	
15	Public support percentage for 2013 (In Public support percentage from 2012)						
	331/3% support test - 2013. If the o						
	this box and stop here. The organization	_					
b	331/3% support test - 2012. If the c			_			
	check this box and stop here. The orga	-					
17a	10%-facts-and-circumstances test - 2						
	10% or more, and if the organization						
	Part IV how the organization meets t			-	-	•	supported
_	organization						⊳ ∟
b	10%-facts-and-circumstances test - 2						

18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see

Schedule A (Form 990 or 990-EZ) 2013

Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

						<u> </u>	
Sect	tion A. Public Support		-				<u> N/A</u>
Calen	ıdar year (or fiscal year beginning in) 🕨	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise					1	
	sold or services performed, or facilities						
	furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513						
4	Tax revenues levied for the						
	organization's benefit and either paid						
	to or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3						
h	received from disqualified persons Amounts included on lines 2 and 3						
_	received from other than disqualified		i				
	persons that exceed the greater of \$5,000						
	or 1% of the amount on line 13 for the year						
	Add lines 7a and 7b						
8	''' '						
<u></u>	line 6.)		1	<u>I</u>		L	<u> </u>
	ndar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
9	Amounts from line 6		` ` `	, ,	· · · · · · · · · · · · · · · · · · ·	1	.,
	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b	Unrelated business taxable income (less	1					
	section 511 taxes) from businesses	1					
	acquired after June 30, 1975						
c	Add lines 10a and 10b		<u> </u>				
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or						
	loss from the sale of capital assets						
	(Explain in Part IV.)	 			-		
13	Total support. (Add lines 9, 10c, 11,			1			
	and 12.)	<u> </u>	1	L	I	<u> </u>	<u> </u>
14	First five years. If the Form 990 is for						
C	organization, check this box and stop here					<u></u>	···· P
	tion C. Computation of Public Sup			(5))		T 45 T	
15	Public support percentage for 2013 (line 8,					15	<u>%</u>
16	Public support percentage from 2012 Scher			· · · · · · · · ·		16	<u> </u>
	tion D. Computation of Investmen	_		13		[43]	0/
17	Investment income percentage for 2013 (In	-	•		· · · · · · · · ·	17	<u>%</u>
18	Investment income percentage from 2012					18	
ıya	331/3% support tests - 2013. If the or	=					. —
L	17 is not more than 331/3%, check th		_	-			
D	331/3% support tests - 2012. If the orgaline 18 is not more than 331/3%, check						. —
20	Private foundation. If the organization		•	•	• •		— —
20	ate realisation. It the Organization	aid HOL HIELK	a box on mic	.→, 13a, UI 13L	, GIOGE HIIS D	on and 366 11150	aotions -

Part IV Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

SCHEDULE A, PART I (h) - INFORMATION ABOUT SUPPORTED ORGANIZATIONS

NAME OF SUPPORTED ORGANIZATION:

NAUGATUCK PUBLIC LIBRARY

EIN: 06-0646963

TYPE OF ORGANIZATION FROM PART I: 6

IS THE ORGANIZATION LISTED IN GOVERNING DOCUMENT?: YES DID YOU NOTIFY THE ORGANIZATION OF YOUR SUPPORT?: YES

IS THE ORGANIZATION ORGANIZED IN THE U.S.?: YES

TOTAL SUPPORT:

NONE

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SCHEDULE 1 (Form 990) Department of the Treasury Internal Revenue Service

Governments, and Individuals in the United States Grants and Other Assistance to Organizations,

OMB No. 1545-0047

▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990 Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. ▶ Attach to Form 990.

Open to Public Inspection 2013

Name of 1	Name of the organization	Employer identification number	
G WH	G WHITTEMORE TR FBO H WHITTEMORE LIBRARY, C/O	06-6025602	
Part I	Part General Information on Grants and Assistance		
1 Do	Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and	assistance, and	
the	the selection criteria used to award the grants or assistance?	X Yes	2
2 De	2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.		
Part II	Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990,	on answered "Yes" to Fori	n 990,
	Part IV. line 21. for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.	ded.	

1 (a) Name and address of organization	(p) EIN	(c) IRC section	(d) Amount of cash	(a) Amount of non-	(f) Method of valuation	(g) Description of	(h) Purpose of grant
or government		ıf applıcable	grant	cash assistance	(book, riviv, appraisal, other)	non-cash assistance	or assistance
(1)_SEE_STATEMENT_1				-			
[2]							
(3)							:
[4]							
[5]							
(9)							
[7]							
(8)							
(6)							
(10)							
[11]							
[12]							
2 Enter total number of section 501(c)(3) and government	vernment or	ganizations liste	organizations listed in the line 1 table			A	
3 Enter total number of other organizations listed in the line	in the line	1 table				A	7
							10000 -11

3E1288 1 000 JSA

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule I (Form 990) (2013)

Schedule I (Form 990) (2013)

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. (f) Description of non-cash assistance Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information. (e) Method of valuation (book, FMV, appraisal, other) ALL INCOME GRANTS GO TO HOWARD WHITTEMORE MEMORIAL LIBRARY, NAUGATUCK (d) Amount of non-cash assistance (c) Amount of NONE EXPLANATION FOR FORM 990, SCHEDULE I, PART 1, LINE 2 cash grant Part III can be duplicated if additional space is needed. (b) Number of recipients (a) Type of grant or assistance CT 06770 Part IV Part III NIA 7 വ 9 က 4

Schedule I (Form 990) (2013)

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

► Attach to Form 990 or 990-EZ. ▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs gov/form990 Open to Public Inspection

G WHITTEMORE TR FBO H WHITTEMORE LIBRARY, C/O	06-6025602
PAGE 6, PART VI, LINE 8a: WEBSTER BANK IS THE TRUSTEE AND KEEPS	
TRACK OF MEETINGS WITH THE LIBRARY.	
PAGE 6, PART VI, LINE 10: 990 PROVIDED TO THE BANK PRIOR TO	FILING
WITH IRS.	
PAGE 6, PART VI, LINE 14: BANK AS TRUSTEE HAS DOCUMENT RETE	
POLICY.	
EXPLANATION FOR FORM 990, PAGE 6, PART VI, LINE 1a	
N/A	
EXPLANATION FOR FORM 990, PAGE 6, PART VI, LINE 8a	
<u>N/A</u>	
FORM 990, PAGE 6, PART VI, LINE 11-DESCRIPTION OF PROCESS FOR REV	/IEW
MAILED TO CLIENT FOR REVIEW	
DESCRIPTION FOR MAKING DOCUMENTS PUBLIC	
FORM 990, PAGE 6, PART VI, LINE 19	
N/A	
ESTIMATE OF AVERAGE HOURS PER WEEK DEVOTED TO RELATED ORGANIZATION	ons
FORM 990, PAGE 7, PART VII, SECTION A	
WEBSTER BANK	
123 BANK ST, WATERBURY, CT 06702	
1 HR/WEEK	

Name of the organization	Page Z Employer identification number
G WHITTEMORE TR FBO H WHITTEMORE LIBRARY, C/O	06-6025602
CHANGE IN ACCOUNTING METHOD OR DESCRIPTION OF OTHER METHOD USED	
FORM 990, PAGE 11, PART XII, LINE 1	
	
GULVATI TV GALGATETTE AVERGEGATE REVENUE TO AVERGE AND A	·
FORM 990, PAGE 11, PART XII, LINE 2	
N/A	·
EVDIANATION FOR FORM OLD DAGE 11 DARM VII IIME 25	
N/A	
	·
EXPLANATION FOR FORM 990, PART XI, LINE 9	·
DOOY HALLED AD THOMHUM AGOD OG	
BOOK VALUE ADJUSTMENT -\$297.00	
	
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G WHITTEMORE TR FBO H WHITTEMORE LIBRA
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06-6025602

SCH I, PART II - GRANTS AND OTHER ASSISTANCE TO ORG'S INSIDE THE US

NAME OF ORGANIZATION:

HOWARD WHITTEMORE MEMORIAL LIBRARY

ADDRESS:

243 CHURCH STREET

NAUGATUCK, CT 06770

TOTAL CASH GRANTS.....

113,052.

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STATEMENT OF ACCOUNT FOR THE PERIOD 01/01/14 THROUGH 12/31/13

AN TERESCRIPTION OF THE CONTINUES OF ASSESSMENT OF THE CASE CASE CONTINUES.

WEBSTER BANK, N.A.
SUCCESSOR TRUSTEE U/A GERTRUDE B.
WHITTEMORE FBO HOWARD WHITTEMORE
MEMORIAL LIBRARY

ACCOUNT NUMBER: WTC983800

WEBSTER BANK, N.A. FILE COPY 123 BANK STREET,PB805-2 WATERBURY, CT 06702

FOR QUESTIONS CALL:

ROBERT LEBREUX 860-692-1352

PHONE:

ASSET SUMMARY

THE COURSE OF A STATE OF STATE

G. WHITTEMORE TR FBO H WHITTEMORE LI

ACCOUNT: WTC983800

AS OF 12/31/13

ASSET CATEGORY	MARKET VALUE	PERCENT OF ACCOUNT	FEDERAL TAX COST	UNREALIZED GAIN/LOSS (FED TO MKT)	ESTIMATED ANNUAL INCOME	INCOME YIELD AT MARKET
PRINCIPAL PORTFOLIO						
CASH EQUIVALENTS	194,349.68	5.87 %	194,349.68	0.00	19	0.01 %
CORPORATE & FOREIGN BONDS	231,283.75	6.99 %	223,705.50	7,578.25	6,575	2.84 %
COMMON EQUITY SECURITIES	1,634,642.74	49.38 %	1,008,335.80	626,306.94	31,314	1.92 %
PREFERRED EQUITY SECURITIES	31,830.00	0.96 %	24,974.40	6,855.60	2,175	6.83 %
DOMESTIC EQUITY MUTUAL FUNDS	201,657.94	6.09 %	131,564.74	70,093.20	6,162	3.06 %
INTL EQUITY MUTUAL FUNDS	301,545.29	9.11 %	254,657.80	46,887.49	4,271	1.42 %
INTL FIXED INCOME MUTUAL FUNDS	50,149.95	1.52 %	51,354.79	1,204.84-	1,918	3.82 7
TAXABLE FIXED INCOME FUNDS	663,496.44	20.04 %	677,612.60	14,116.16-	21,645	3.26 %
PRINCIPAL PORTFOLIO TOTAL	3,308,955.79	99.96 %	2,566,555.31	742,400.48	74,080	2.24 %
INCOME PORTFOLIO						
CASH EQUIVALENTS	1,184.48	0.04 %	1,184.48	0.00	0	0.00 9
INCOME PORTFOLIO TOTAL	1,184.48	0.04 %	1,184.48	0.00	0	0.00 %
TOTAL ASSETS	3,310,140.27	100.00 %	2,567,739.79	742,400.48	74,080	2.24 %

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G. WHITTEMORE TR FBO H WHITTEMORE LI

ACCOUNT: WTC983800

AS OF 12/31/13

PAR VALUE OR SHARES	ASSET DESCRIPTION	MARKET VALUE % OF ACCOUNT	FED TAX COST	UNREALIZED GAIN/LOSS (FED TO MKT)	ESTIMATED ANNUAL INCOME	INCOME YIELD AT MARKET
PRINCIPAL PORTFOL	10					
CASH EQUIVALENTS						
194,349.6800	WEBSTER BANK MONEY MARKET/PT	194,349.68 5.87 %	194,349.68	0.00	19	0.01 %
CORPORATE & FOREI	GN BONDS					
50,000.0000	JPMORGAN CHASE & CO DTD 11/18/2010 2.600% 01/15/2016 NON CALLABLE	51,499.50 1.56 %	49,483.50	2,016.00	1,300	2.52 %
50,000.0000	LAB CORP OF AMER HLDGS DTD 08/23/2012 2.200% 08/23/2017 NON CALLABLE	50,163.00 1.52 %	50,722.00	559.00-	1,100	2.19 %
50,000.0000	BANK OF AMERICA CORP MEDIUM TERM NOTE DTD 01/11/2013 2.000% 01/11/2018 NON CALLABLE	49,911.50 1.51 %	49,312.50	599.00	1,000	2.00 %
50,000.0000	GENERAL ELEC CAP CORP MEDIUM TERM NOTE DTD 12/17/2009 4.850% 12/15/2018 NON CALLABLE	54,861.50 1.66 %	50,000.00	4,861.50	2,425	4.42 %
25,000.0000	TOYOTA MOTOR CREDIT CORP MEDIUM TERM NOTE DTD 01/28/2011 VAR CPN 01/28/2026 CALLABLE	24,848.25 0.75 %	24,187.50	660.75	750	3.02 %

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G. WHITTEMORE TR FBO H WHITTEMORE LI

ACCOUNT: WTC983800

AS OF 12/31/13

PAR VALUE OR SHARES +	ASSET DESCRIPTION	MARKET VALUE % OF ACCOUNT	FED TAX COST	UNREALIZED GAIN/LOSS (FED TO MKT)	ESTIMATED ANNUAL INCOME	INCOME YIELD AT MARKET
+ TOTAL CORPORATE COMMON EQUITY SEC	& FOREIGN BONDS	231,283.75 6.99 %	223,705.50	7,578.25	6,575	2.84 %
+						
81.0000	AMAZON.COM INC	32,301.99 0.98 %	21,018.76	11,283.23	0	0.00 %
298.0000	APACHE CORP	25,610.12 0.77 %	22,450.76	3,159.36	298	1.16 %
125.0000	APPLE INC	70,127.50 2.12 %	15,887.00	54,240.50	1,645	2.35 %
1,626.0000	BANK OF AMERICA CORP	25,316.82 0.76 %	12,422.47	12,894.35	65	0.26 %
150.0000	BLACKROCK INC CLASS A	47,470.50 1.43 %	26,721.45	20,749.05	1,158	2.44 %
600.0000	CAPITAL ONE FINANCIAL CORP	45,966.00 1.39 %	32,881.58	13,084.42	720	1.57 %
415.0000	CHEVRON CORPORATION	51,837.65 1.57 %	29,921.05	21,916.60	1,776	3.43 %
1,091.0000	CISCO SYSTEMS INC	24,471.13 0.74 %	30,112.58	5,641.45-	829	3.39 %

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ACCOUNT: WTC983800

AS OF 12/31/13

PAR VALUE OR SHARES	ASSET DESCRIPTION	MARKET VALUE % OF ACCOUNT	FED TAX COST	UNREALIZED GAIN/LOSS (FED TO MKT)	ESTIMATED ANNUAL INCOME	INCOME YIELD AT MARKET
539.0000	COACH INC	30,254.07 0.91 %	29,667.91	586.16	728	2.41 %
1,425.0000	CORNING INC	25,393.50 0.77 %	19,818.66	5,574.84	570	2.24 %
710.0000	CVS CAREMARK CORP	50,814.70 1.54 %	21,763.00	29,051.70	781	1.54 %
613.0000	DANAHER CORP	47,323.60 1.43 %	20,571.92	26,751.68	245	0.52 %
230.0000	DIAGEO PLC AMERICAN DEPOSITORY RECEIPT	30,456.60 0.92 %	17,924.82	12,531.78	690	2.27 %
498,0000	DOMINION RES INC VA	32,215.62 0.97 %	22,060.71	10,154.91	1,195	3.71 %
820.0000	DUNKIN BRANDS GROUP INC	39,524.00 1.19 %	27,555.09	11,968.91	754	1.91 %
1,068.0000	E M C CORP MASS	26,860.20 0.81 %	26,738.58	121.62	491	1.83 %
307.0000	ECOLAB INC	32,010.89 0.97 %	19,411.58	12,599.31	338	1.06 %
385.0000	EXPEDITORS INTL WASH INC	17,036.25 0.51 %	14,830.26	2,205.99	231	1.36 %

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G. WHITTEMORE TR FBO H WHITTEMORE LI

ACCOUNT: WTC983800

AS OF 12/31/13

PAR VALUE OR SHARES	ASSET DESCRIPTION	MARKET VALUE % OF ACCOUNT	FED TAX COST	UNREALIZED GAIN/LOSS (FED TO MKT)	ESTIMATED ANNUAL INCOME	INCOME YIELD AT MARKET
364.0000	EXPRESS SCRIPTS HLDG	25,567.36 0.77 %	19,517.06	6,050.30	0	0.00 %
443.0000	EXXON MOBIL CORP	44,831.60 1.35 %	24,022.84	20,808.76	1,223	2.73 %
1,448.0000	GENERAL ELECTRIC CORP	40,587.44 1.23 %	22,251.70	18,335.74	1,274	3.14 %
25.0000	GOOGLE INC-CL A	28,017.75 0.85 %	11,003.00	_ 17,014.75	0	0.00 %
242.0000	INTL. BUSINESS MACHINES CORP	45,391.94 1.37 %	20,654.08	24,737.86	1,065	2.35 %
228.0000	ISHARES DJ US OIL & GAS EXPL ETF	18,768.96 0.57 %	9,594.32	9,174.64	165	0.88 %
208.0000	ISHARES NASDAQ BIOTECH ETF	47,228.48 1.43 %	25,015.12	22,213.36	15	0.03 %
175.0000	ITC HOLDINGS CORP	16,768.50 0.51 %	13,143.81	3,624.69	298	1.78 %
272.0000	JOHNSON & JOHNSON	24,912.48 0.75 %	17,975.14	6,937.34	762	3.06 %
706.0000	JOHNSON CTLS INC	36,217.80 1.09 %	23,125.76	13,092.04	621	1.71 %

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G. WHITTEMORE TR FBO H WHITTEMORE LI

ACCOUNT: WTC983800

AS OF 12/31/13

PAR VALUE OR SHARES	ASSET DESCRIPTION	MARKET VALUE % OF ACCOUNT	FED TAX COST	UNREALIZED GAIN/LOSS (FED TO MKT)	ESTIMATED ANNUAL INCOME	INCOME YIELD AT MARKET
975.0000	JP MORGAN CHASE & CO	57,018.00 1.72 %	27,199.01	29,818.99	1,560	2.74 %
436.0000	KRAFT FOODS GROUP INC	23,504.76 0.71 %	17,285.65	6,219.11	916	3.90 %
270.0000	LABORATORY CORP AMERICA HOLDINGS	24,669.90 0.75 %	22,158.65	2,511.25	0	0.00 %
720.0000	MICROSOFT CORP	26,935.20 0.81 %	20,793.70	6,141.50	806	2.99 %
650.0000	MONDELEZ INTERNATIONAL INC	22,945.00 0.69 %	12,145.74	10,799.26	364	1.59 %
180.0000	NOVO NORDISK AS SPONSORD AMERICAN DEPOSITORY RECEIPT	33,256.80 1.00 %	21,801.93	11,454.87	408	1.23 %
243.0000	OCCIDENTAL PETE CORP	23,109.30 0.70 %	22,108.33	1,000.97	700	3.03 %
996.0000	ORACLE CORPORATION COM	38,106.96 1 ₋ 15 %	22,020.78	16,086.18	478	1.25 %
200.0000	PEPSICO INC	16,588.00 0.50 %	12,569.46	4,018.54	454	2.74 %
217.0000	PETSMART INC	15,786.75 0.48 %	4,313.64	11,473.11	169	1.07 %

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LIST OF ASSETS

G. WHITTEMORE TR FBO H WHITTEMORE LI

ACCOUNT: WTC983800

AS OF 12/31/13

PAR VALUE OR SHARES	ASSET DESCRIPTION	MARKET VALUE % OF ACCOUNT	FED TAX COST	UNREALIZED GAIN/LOSS (FED TO MKT)	ESTIMATED ANNUAL INCOME	INCOME YIELD AT MARKET
905.0000	PFIZER INC	27,720.15 0.84 %	11,620.20	16,099.95	941	3.39 %
378.0000	PROCTER & GAMBLE COMPANY	30,772.98 0.93 %	23,143.45	7,629.53	973	3.16 %
290.0000	SCHLUMBERGER LTD	26,131.90 0.79 %	23,567.81	2,564.09	464	1.78 %
225.0000	STERICYCLE INC	26,138.25 0.79 %	12,600.45	13,537.80	0	0.00 %
643.0000	TARGET CORP	40,682.61 1.23 %	37,298.65	3,383.96	1,106	2.72 %
247.0000	THERMO FISHER SCIENTIFIC INC	27,503.45 0.83 %	12,517.01	14,986.44	148	0.54 %
362.0000	TRAVELERS COMPANIES INC	32,775.48 0.99 %	15,797.11	16,978.37	796	2.43 %
540.0000	UNDER ARMOUR INC-CLASS A	47,142.00 1.42 %	18,795.49	28,346.51	0	0.00 %
453.0000	UNITED TECHNOLOGIES CORP	51,551.40 1.56 %	32,370.73	19,180.67	1,069	2.07 %
340.0000	VERIZON COMMUNICATIONS	16,707.60 0.50 %	10,947.49	5,760.11	721	4.32 %

G. WHITTEMORE TR FBO H WHITTEMORE LI

ACCOUNT: WTC983800

AS OF 12/31/13

PAR VALUE OR SHARES	ASSET DESCRIPTION	MARKET VALUE % OF ACCOUNT	FED TAX COST	UNREALIZED GAIN/LOSS (FED TO MKT)	ESTIMATED ANNUAL INCOME	INCOME YIELD AT MARKET
932.0000	WELLS FARGO & CO NEW	42,312.80 1.28 %	29,219.51	13,093.29	1,305	3.08 %
Total common eq	UITY SECURITIES	1,634,642.74 49.38 %	1,008,335.80	626,306.94	31,314	1.92 %
PREFERRED EQUITY	SECURITIES					
30.0000	BANK OF AMERICA CORP 7.250% CONVERTIBLE PFD SER L	31,830.00 0.96 %	24,974.40	6,855.60	2,175	6.83 %
DOMESTIC EQUITY M	UTUAL FUNDS					
1,975.2070	FIDELITY SMALL CAP DISCOVERY FUND	61,744.97 1.87 %	45,550.28	16,194.69	65	0.11 %
1,563.8090	FIDELITY SMALL CAP VALUE FUND	31,338.73 0.95 %	24,444.81	6,893.92	95	0.30 %
798.5060	T ROWE PRICE MID-CAP GROWTH FD #64	58,115.27 1.76 %	33,340.86	24,774.41	3,466	5.96 %
1,679.1670	T ROWE PRICE MID-CAP VALUE FD INC	50,458.97 1.52 %	28,228.79	22,230.18	2,536	5.03 %
TOTAL DOMESTIC	EQUITY MUTUAL FUNDS	201,657.94 6.09 %	131,564.74	70,093.20	6,162	3.06 %

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G. WHITTEMORE TR FBO H WHITTEMORE LI

ACCOUNT: WTC983800

AS OF 12/31/13

PAR VALUE OR SHARES	ASSET DESCRIPTION	MARKET VALUE % OF ACCOUNT	FED TAX COST	UNREALIZED GAIN/LOSS (FED TO MKT)	ESTIMATED ANNUAL INCOME	INCOME YIELD AT MARKET
NTL EQUITY MUTUAL	FUNDS		-			
3,298.1530	ARTISAN INTERNATIONAL FD #661	100,527.70 3.04 %	100,000.00	527.70	1,870	1.86 %
3,002.4310	MFS INTERNATIONAL VALUE FUND	105,625.52 3.19 %	75,286.92	30,338.60	1,986	1.88 %
2,539.7250	OPPENHEIMER DEVELOPING MARKETS FUND	95,392.07 2.88 %	79,370.88	16,021.19	415	0.44 %
TOTAL INTL EQUIT	TY MUTUAL FUNDS	301,545.29 9.11 %	254,657.80	46,887.49	4,271	1.42 %
NTL FIXED INCOME	MUTUAL FUNDS					
4,622.1150	FIDELITY STRATEGIC INCOME FUND	50,149.95 1.52 %	51,354.79	1,204.84-	1,918	3.82 %
AXABLE FIXED INC	DME FUNDS					
17,768.1460	BAIRD CORE PLUS BOND FUND	191,362.93 5.78 %	200,683.05	9,320.12-	6,130	3.20 %
15,204.7300	FIDELITY FLOATING RATE HIGH INCOME FUND	151,439.11 4.58 %	150,518.77	920.34	4,698	3.10 %
14,176.7550	T ROWE PRICE HIGH YIELD FUND	101,363.80 3.06 %	100,113.64	1,250.16	6,195	6.11 %

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G. WHITTEMORE TR FBO H WHITTEMORE LI

ACCOUNT: WTC983800

AS OF 12/31/13

•	PAR VALUE OR SHARES	ASSET DESCRIPTION	MARKET VALUE % OF ACCOUNT	FED TAX COST	UNREALIZED GAIN/LOSS (FED TO MKT)	ESTIMATED ANNUAL INCOME	INCOME YIELD AT MARKET
	9,106.4890	VANGUARD GNMA FUND	94,889.62 2.87 %	100,974.99	6,085.37-	2,249	2.37 %
	11,629.9980	VANGUARD SHORT-TERM INVESTMENT GRADE FUND	124,440.98 3.76 %	125,322.15	881.17-	2,373	1.91 %
+	TOTAL TAXABLE FI	XED INCOME FUNDS	663,496.44	677,612.60	14,116.16-	21,645	3.26 %
+	PRINCIPAL PORTFOL	O TOTAL	3,308,955.79 99.96 %	2,566,555.31	742,400.48	74,080	2.24 %

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G. WHITTEMORE TR FBO H WHITTEMORE LI

ACCOUNT: WTC983800

AS OF 12/31/13

PAR VALUE OR SHARES INCOME PORTFOLIO CASH EQUIVALENTS	ASSET DESCRIPTION	MARKET VALUE % OF ACCOUNT	FED TAX COST	UNREALIZED GAIN/LOSS (FED TO MKT)	ESTIMATED ANNUAL INCOME	INCOME YIELD AT MARKET
1,184.4800	WEBSTER BANK MONEY MARKET/PT	1,184.48 0.04 %	1,184.48	0.00	0	0.00 %
+ INCOME PORTFOLIO	TOTAL	1,184.48 0.04 %	1,184.48	0.00	0	0.00 %
+ TOTAL ASSETS		3,310,140.27 100.00 %	2,567,739.79	742,400.48	74,080	2.24 %