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990-PF

Return of Private Foundation

OMB No 1545-0052

or Section 4947(a)(1) Trust Treated as Private Foundation ▶ Do not enter social security numbers on this form as it may be made public. Department of the Treasury ▶ Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf. Open to Public Inspection Interfial Revenue Service For calendar year 2014 or tax year beginning 07/01, 2014, and ending 06/30, 2015 Name of foundation INSTITUTION FOR SAVINGS IN NEWBURYPORT & A Employer identification number ITS VICINITY CHARITABLE FOUNDATION, INC 04-3353621 Number and street (or P O box number if mail is not delivered to street address) Room/suite B Telephone number (see instructions) 93 STATE STREET (978) 462-3106 P.O. BOX 510 City or town, state or province, country, and ZIP or foreign postal code If exemption application is pending, check here NEWBURYPORT, MA 01950 G Check all that apply: Initial return Initial return of a former public charity D 1 Foreign organizations, check here . . Final return Amended return 2 Foreign organizations meeting the 85% test, check here and attach Address change Name change computation H Check type of organization: | X | Section 501(c)(3) exempt private foundation E If private foundation status was terminate Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation under section 507(b)(1)(A), check here . Fair market value of all assets at J Accounting method X Cash Accrual If the foundation is in a 60-month termination Other (specify) end of year (from Part II, col. (c), line under section 507(b)(1)(B), check here . > 8,898,754. (Part I, column (d) must be on cash basis) (d) Disbursements Part I Analysis of Revenue and Expenses (The (a) Revenue and (b) Net investment (c) Adjusted net for charitable total of amounts in columns (b), (c), and (d) expenses per purposes may not necessarily equal the amounts in income income books (cash basis only) column (a) (see instructions)) 765.750 Contributions, gifts, grants, etc., received (attach schedule) . if the foundation is not required to attach Sch B 1,839 1,839. ATCH 1 3 Interest on savings and temporary cash investments. 247,651 247,651. ATCH 2 Dividends and interest from securities **5a** Gross rents Net rental income or (loss) 107,602 Net gain or (loss) from sale of assets not on line 10 Gross sales price for all 421,242 assets on line 6a 122,621. Capital gain net income (from Part IV, line 2) . Net short-term capital gain.

Income modifications . Gross sales less returns and allowances - - b Less Cost of goods sold . c Gross profit or (loss) (attach schedule) Other income (attach schedule) 111 Total. Add lines 1 through 11 1,122,842. 372,111. 13 Compensation of officers, directors, trustees, etc. 8 14 Other employee salaries and wages 1 5 2015 \$ 1,700. 1,700 b Accounting fees (attach schedule)ATCH . 3 . OGDEN, UT Other professional fees (attach schedule). . . C 17 Administr 18 18 17,700 Taxes (attach schedule) (see instructions)[4]. Depreciation (attach schedule) and depletion. p 21 22 Travel, conferences, and meetings Printing and publications , 70 70 멸23 Other expenses (attach schedule) ATCH .5. . Operatir 25 Total operating and administrative expenses. 19,470. 1,770. Add lines 13 through 23. 1,254,072. 1,254,072. Contributions, gifts, grants paid 1,273,542. 1,255,842. 26 Total expenses and disbursements Add lines 24 and 25 Subtract line 26 from line 12 -150,700. a Excess of revenue over expenses and disbursements

JSA For Paperwork Reduction Act Notice, see instructions. 4£1410 1 000

b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-). .

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Form 990-PF (2014) 44423PF

372,111.

04-3353621

Part II	Balance Sheets description column should be for end-of-year	Beginning of year		=na or	year
	amounts only (See instructions)	(a) Book Value	(b) Book Value		(c) Fair Market Value
٦ ا	Cash - non-interest-bearing	1,223,520.	619,8	41.	619,841.
2	Savings and temporary cash investments	43,467.	44,3	36.	44,336.
3	Accounts receivable ▶				
	Less allowance for doubtful accounts ▶				
4	Pledges receivable	·			<u></u>
	Less allowance for doubtful accounts ▶				
5	Grants receivable				
6	Receivables due from officers, directors, trustees, and other				
	disqualified persons (attach schedule) (see instructions)				
7	Other notes and loans receivable (attach schedule)			\neg	
1.	Less allowance for doubtful accounts				
<u>ه</u> ع	Inventories for sale or use			_	
ssets e s	Prepaid expenses and deferred charges			\dashv	
¥ 100	· · · · · · · · · · · · · · · · · · ·			\dashv	
Jiva	Investments - U S and state government obligations (attach schedule) . Investments - corporate stock (attach schedule) ATCH 6	7,577,907.	8 234 5	,, 	8,234,577.
			0,234,3	' ' -	0,234,377
11°	Investments - corporate bonds (attach schedule)				
12	Investments - mortgage loans				
13 14	Investments - other (attach schedule)			_	
1	equipment basis Less accumulated depreciation (attach schedule)				
15	Other assets (describe				
16	Total assets (to be completed by all filers - see the				
	instructions Also, see page 1, item I)	8,844,894.	8,898,7	54.	8,898,754
17	Accounts payable and accrued expenses				
18	Grants payable				
ဖ္ထု 19	Deferred revenue				
20	Loans from officers, directors, trustees, and other disqualified persons				
Liabilities 20 21 21 22	Mortgages and other notes payable (attach schedule)				
리 22	Other liabilities (describe				
23	Total liabilities (add lines 17 through 22)	0		0	
88	Foundations that follow SFAS 117, check here . ▶ and complete lines 24 through 26 and lines 30 and 31.				
Salances 25	Unrestricted				
[25	Temporarily restricted				
	Permanently restricted				
or Fund	Foundations that do not follow SFAS 117, ▶ X				
	check here and complete lines 27 through 31.				
ون 27	Capital stock, trust principal, or current funds			[
27 28 29 29	Paid-in or capital surplus, or land, bldg , and equipment fund				
2 9	Retained earnings, accumulated income, endowment, or other funds	8,844,894.	<u>8,898,7</u>	54.	
30 2	Total net assets or fund balances (see instructions)	8,844,894.	8,898,7	54.	
31	Total liabilities and net assets/fund balances (see			1	
	ınstructions)	8,844,894.	8,898,7	54.	
Part I	Analysis of Changes in Net Assets or Fund Bala	nces			
	al net assets or fund balances at beginning of year - Part !				
end	d-of-year figure reported on prior year's return)		[1	8,844,894
				2	-150,700
	ner increases not included in line 2 (itemize) \(\sum_ATCH_7			3	204,560
4 Add	d lines 1, 2, and 3		 [4	8,898,754.
	creases not included in line 2 (itemize) ▶			5	
6 Tot	al net assets or fund balances at end of year (line 4 minus	line 5) - Part II, column (b), line 30	6	8,898,754.

Page 3

Pa	rt IV Capital Gains	and Losses for Tax on Inve	estment Income			
	(a) List and	(b) How acquired	(c) Date acquired	(d) Date sold		
	2-story b	P - Purchase D - Donation	(mo , day, yr)	(mo , day, yr)		
<u>1a</u>	SEE PART IV SCHE					
<u>b</u>				· 		
<u> </u>						
<u>d</u>					· - ·	
<u>e</u>		(0.0	(a) Cost or other book			L _
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo (e) plus (f) mini	
a						
<u>b</u>					···	
_ <u>C</u>						
_ <u>d</u> _e					· — —	
	Complete only for assets	showing gain in column (h) and owne	d by the foundation on 12/31/69		Cara (Cal. (b) a	
		(i) Adjusted basis	(k) Excess of col (i)		Gains (Col (h) ga (k), but not less t	
(i) FMV as of 12/31/69	as of 12/31/69	over col (j), if any	Ì	Losses (from co	
а						
b						
С						
d						
_e				<u> </u>		
2	Capital gain net income		gain, also enter in Part I, line 7 (loss), enter -0- in Part I, line 7	2		122,621.
3	Net short-term capital ga	ain or (loss) as defined in sections	1222(5) and (6):		-	
	•	art I, line 8, column (c) (see ins				
		· · · · · · · · · · · · · · · · · · ·		3		0_
Pa	rt V Qualification	Under Section 4940(e) for Re	duced Tax on Net Investment I	ncome		
Was			outable amount of any year in the b Do not complete this part.	ase period	d?	Yes X No
1	Enter the appropriate an	nount in each column for each yea	ir; see the instructions before makin	g any ent	ries.	_
	(a) Base penod years	(b)	(c)		(d) Distribution ra	
Cal	endar year (or tax year beginning in)	Adjusted qualifying distributions	Net value of nonchantable-use assets		(col (b) divided by	
	2013	1,026,569.	8,489,399.			0.120924
	2012	889,183.	7,445,965.			0.119418
	2011	866,954.	5,869,881.		·,	0.147695
	2010	863,819.	5,803,913.	-		0.148834
_	2009	242,394.	4,987,979.	 		0.048596
_	T. 6-1 -6 line 4 - enlument /-	1/		_		0.585467
		5)		2		0.363467
3	_	o for the 5-year base period - divid ndation has been in existence if les	-	3		0.117093
4	Enter the net value of no	ncharitable-use assets for 2014 fr	om Part X, line 5	4	8,	490,239.
5	Multiply line 4 by line 3			5		994,148.
						3,721.
6		ent income (1% of Part I, line 27b)		6		
7	Add lines 5 and 6		• • • • • • • • • • • • • • • • • • • •	7		997,869.
8			in Part VI, line 1b, and complete			255,842. x rate. See the
						

					_
Form 990-PF (2014)	INSTITUTION	FOR	SAVINGS	IN	NEW

SURYPORT &	(04 - ¹

Form	990-PF (2014) INSTITUTION FOR SAVINGS IN NEWBURYPORT & 04-335	3621	F	age 4
Par	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see i			
1a	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	Domestic foundations that meet the section 4940(e) requirements in Part V, check		3,7	721.
	here ► X and enter 1% of Part I, line 27b		<u>·</u>	
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of			
	Part I, line 12, col (b)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			
3	Add lines 1 and 2		3.7	721.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)			0
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-		3.7	721.
6	Credits/Payments			
a	2014 estimated tax payments and 2013 overpayment credited to 2014 6a 11,500.			
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			
7	Total credits and payments Add lines 6a through 6d		11,5	00
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached			
9	,, , , , , , , , , , , , , , , , , , ,			
-	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			770
10 11	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		/ , /	779.
	Enter the amount of line 10 to be Credited to 2015 estimated tax ▶ 7,779. Refunded ▶ 11 It VII-A Statements Regarding Activities			
1 a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it	4.	Yes	No
	participate or intervene in any political campaign?	1a		_ <u>X</u> _
D	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see			
	Instructions for the definition)?	1b		<u> </u>
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials			
	published or distributed by the foundation in connection with the activities			
	Did the foundation file Form 1120-POL for this year?	1c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			
	(1) On the foundation ► \$ (2) On foundation managers ► \$			
9	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on			
	foundation managers > \$			
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			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of			
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X
	If "Yes," attach the statement required by General Instruction T			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			
	By language in the governing instrument, or			
	By state legislation that effectively amends the governing instrument so that no mandatory directions that			
	conflict with the state law remain in the governing instrument?	6	Х	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	7	Х	
	Enter the states to which the foundation reports or with which it is registered (see instructions)			
	MA,			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General			
_	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8b .	х	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(i)(3) or			
-	4942(j)(5) for calendar year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "Yes,"			
	complete Part XIV	9		х
10				
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10		х

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Par	t VII-A Statements Regarding Activities (continued)			
	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the		_	
٠٠,	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions).	11		x
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified			
	person had advisory privileges? If "Yes," attach statement (see instructions)	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?		х	
	Waharta address N/A			
14	The books are in care of ► MICHAEL J JONES, PRESIDENT Telephone no ► 978-462	-310	6	
• •	Located at ▶2 DEPOT SQUARE IPSWICH, MA ZIP+4 ▶ 01938			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here			T
	and enter the amount of tax-exempt interest received or accrued during the year			
16	At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority		Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		x
	See the instructions for exceptions and filing requirements for FinCEN Form 114, (formerly TD F 90-22.1) If			
	"Yes," enter the name of the foreign country			
Pai	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1 a	During the year did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			
	disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No			1
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for			
	the benefit or use of a disqualified person)?			
	(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)			
t	of the 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)?	1b		ļ
	Organizations relying on a current notice regarding disaster assistance check here			
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that	_		ا
	were not corrected before the first day of the tax year beginning in 2014?	1c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			
	operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
а	At the end of tax year 2014, did the foundation have any undistributed income (lines 6d and			
	6e, Part XIII) for tax year(s) beginning before 2014?			
	If "Yes," list the years			
	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to			
	all years listed, answer "No" and attach statement - see instructions)	2b		
	of the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here	20		
3 :	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
3.	at any time during the year?			
	olf "Yes," did it have excess business holdings in 2014 as a result of (1) any purchase by the foundation or			
Ì	disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the			
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of]	
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the			
	foundation had excess business holdings in 2014)	3b		
4 a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		x
	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 2014?	4b		x

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_	t VII-B Statements Regarding Activities	for Which Form		uired (continued)	-	rage 0
5a	During the year did the foundation pay or incur any amo			(55)		
٠,	(1) Carry on propaganda, or otherwise attempt to influe		n 4945(e)\?	Yes X No		
	(2) Influence the outcome of any specific public ele	, , , , , , ,			1 1	
	directly or indirectly, any voter registration drive?	•	•			
	(3) Provide a grant to an individual for travel, study, or o			· H H		
		• •				
	(4) Provide a grant to an organization other than a				1 1	
	section 4945(d)(4)(A)? (see instructions) (5) Provide for any purpose other than religious, ch					
			• •			
	purposes, or for the prevention of cruelty to children				1 1	
b	If any answer is "Yes" to 5a(1)-(5), did any of the Regulations section 53 4945 or in a current notice regar		•	•		
	· •	-	•		5b	
	Organizations relying on a current notice regarding disa				<u> </u>	
С	If the answer is "Yes" to question 5a(4), does the		•			
	because it maintained expenditure responsibility for the	grant?		Yes No		
	If "Yes," attach the statement required by Regulations se	ction 53 4945-5(d)				
6a	Did the foundation, during the year, receive any fur	•				
	on a personal benefit contract?			. Yes X No		
р	Did the foundation, during the year, pay premiums, dire	ectly or indirectly, on a	personal benefit contra	ıct?	6b	X_
	If "Yes" to 6b, file Form 8870					
7a	At any time during the tax year, was the foundation a p				·	
	If "Yes," did the foundation receive any proceeds or ha				7b	
Pa	t VIII Information About Officers, Directo and Contractors	rs, Trustees, Fou	indation Managers	s, Highly Paid Emp	loyees,	
1	List all officers, directors, trustees, foundation r	nanagers and their	r compensation (see	instructions).		
	(a) Name and address	(b) Title, and average hours per week	(c) Compensation (If not paid,	(d) Contributions to employee benefit plans	(e) Expense	
		hours per week devoted to position	enter -0-)	and deferred compensation	other allow	ances
- -						
ATC	H 8		0	9		0
2	Compensation of five highest-paid employees "NONE."	(other than thos	se included on line	e 1 - see instruction	ons). If non	e, enter
	HONE.	(b) Title, and average		(d) Contributions to		
(a)	Name and address of each employee paid more than \$50,000	hours per week	(c) Compensation	employee benefit plans and deferred	(e) Expense a other allow	account,
		devoted to position		compensation		
	NONE					
						_
			li .			
		·	·			
Tota	number of other employees paid over \$50,000.			▶		

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Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation

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1,255,842.

1,252,121.

3,721.

Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b (see instructions)

Adjusted qualifying distributions. Subtract line 5 from line 4

qualifies for the section 4940(e) reduction of tax in those years.

5

6

Page 9

Pa	rt XIII Undistributed Income (see instru	uctions)		,	
		(a)	(b)	(c)	(d)
1	Distributable amount for 2014 from Part XI.	Corpus	Years prior to 2013	2013	2014
-	line 7				420,791.
2	Undistributed income, if any, as of the end of 2014		-		
	Enter amount for 2013 only				
ь	10 11 10				
3	Excess distributions carryover, if any, to 2014				
	From 2009 6,774.				
b	From 2010 577,009.				
c					
d	• • • • • • • • • • • • • • • • • • • •				
		2 217 621			
	Total of lines 3a through e	2,317,621.	· · · · · · · · · · · · · · · · · · ·		
4	are in the second secon				
	line 4 ▶ \$ 1,255,842.			, .	
а	Applied to 2013, but not more than line 2a				
b	Applied to undistributed income of prior years			,	
	(Election required - see instructions)				
С	Treated as distributions out of corpus (Election required - see instructions)				
d	Applied to 2014 distributable amount				420,791.
	Remaining amount distributed out of corpus	835,051.		***	
5	Excess distributions carryover applied to 2014				<u> </u>
	(If an amount appears in column (d), the same				
6	amount must be shown in column (a)) Enter the net total of each column as				
•	indicated below:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	3,152,672.			
b	Prior years' undistributed income Subtract				
	line 4b from line 2b	2-7-22			
С	Enter the amount of prior years' undistributed				
	income for which a notice of deficiency has been issued, or on which the section 4942(a)				
	tax has been previously assessed				
d	Subtract line 6c from line 6b Taxable				
	amount - see instructions				
е	Undistributed income for 2013 Subtract line				
	4a from line 2a Taxable amount - see instructions				
T	Undistributed income for 2014 Subtract lines 4d and 5 from line 1 This amount must be				
	distributed in 2015	<u> </u>			
7	Amounts treated as distributions out of corpus				-
-	to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (Election may be				
	required - see instructions)				
8	Excess distributions carryover from 2009 not				
	applied on line 5 or line 7 (see instructions)	6,774.			
9	Excess distributions carryover to 2015.			_	
-	Subtract lines 7 and 8 from line 6a	3,145,898.			
10					
	Excess from 2010 577,009.				
b	Excess from 2011 582,534.				
	Excess from 2012				
d	Excess from 2013 624,373.				
	Excess from 2014 835, 051.				
_					

before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2).)

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

	NOT APPLICABLE
2	Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:
	Check here ▶ ☐ If the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d.
a	The name, address, and telephone number or e-mail address of the person to whom applications should be addressed
	ATCH 9
t	The form in which applications should be submitted and information and materials they should include:
	APPLICATIONS AVAILABLE AT ABOVE ADDRESS
C	Any submission deadlines:
	SEE APPLICATIONS FOR VARIOUS DEADLINES

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

ATCH 10

Page **11**

Part XV Supplementary Information	(continued)			
3 Grants and Contributions Paid Dur Recipient Name and address (home or business)	ing the Year or App	oved for F	uture Payment	
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	contribution	Amount
a Paid during the year		1		
ATCH 11				1
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Total			▶ 3a	1,254,072.
b Approved for future payment				
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ATCH 12				
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		1	1	
Total				1,630,666
				_,,,

	 Analysis of Income-Produ amounts unless otherwise indicated 		vities ated business income	Excluded by	y section 512, 513, or 514	(e)
-		(a) Business code	(b) Amount	(c)	(d) Amount	Related or exempt function income
-	n service revenue:	243/1033 0040	7 mount	Exclusion code	Amount	(See instructions)
. —			_			
c						
g Fees	and contracts from government agencies					
_	ship dues and assessments		-			
	on savings and temporary cash investments			14	1,839.	
4 Dividend	ds and interest from securities			14	247,651.	
5 Net rent	tal income or (loss) from real estate					
a Debt	-financed property					
b Not	debt-financed property					
6 Net renta	al income or (loss) from personal property .					
7 Other in	vestment income					
8 Gain or (loss) from sales of assets other than inventory			18	107,602.	
9 Net inco	ome or (loss) from special events					
0 Gross p	rofit or (loss) from sales of inventory					
11 Other re	evenue a					
b						
С						
d						
е						774
	Add columns (b), (d), and (e)				357,092.	- .
	dd line 12, columns (b), (d), and (e)				13	357,092.
	heet in line 13 instructions to verify calci					
Part XVI						
Line No.	Explain below how each activit					
lacktriangledown	accomplishment of the foundation	on's exemp	t purposes (other that	n by providing	funds for such purposes	s). (See instructions.)
			_	·· -	<u></u>	
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	<u>"-</u>					
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JSA 4E1492 1 000 Form **990-PF** (2014)

14) INSTITUTION FOR SAVINGS IN NEWBURYPORT & 04-3353621 Page Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations Part XVII.

	Did the organization directly or indirectly engage in any of the following with any other organization in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to											Yes	No
		ations?	(00.(0)(0) 0.9	, armeation	o, c		0.019	, со рошиос.			
	-	ers from the reporting	g foundation to	a nonc	haritable exer	mpt organ	zation of	f:					
		h	_								1a(1)		Х
											1a(2)		Х
	(2) Other assets												
(1	(1) Sales of assets to a noncharitable exempt organization												X
(2	2) Pur	chases of assets fro	m a noncharita	able exe	mpt organizati	on					1b(2)		Х
		ntal of facilities, equip				1b(3)		Х					
1 H = 1											1b(4)		X
		ns or loan guarantee									1b(5)		X
(6	6) Per	formance of service:	s or membersl	hip or fu	ndraising solid	atations .					1b(6)		X
		of facilities, equipm											X
		answer to any of the											
		f the goods, other a											
	alue ir	n any transaction or											
(a) Line	no	(b) Amount involved			able exempt organ	ization	(d) De:	scription of transf	ers, tran	sactions, and sha	nng ama	ingeme	nts
			NOT APPLI	CABLE									
									-				
		<u></u>											
				_	<u>.</u>			 					
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	+		-			·	<u> </u>			_ ,_			
	<u> </u>												
				_					• •	_			
					_								
	the t	foundation directly of	or indirectly at	ffiliated	with or relati	ed to on	e or mo	re tax-exemp	t orgai	nizations			
		ed in section 501(c)									7	es X	No
		" complete the follow				(0)(0)/ 0.	0000	02			·`	~	
		(a) Name of organization			(b) Type of org	janization			(c) Desc	ription of relations	ship		
				NOT Z	APPLICABLE	3							
		-											
		penalties of perjury, I decla t, and complete Declaration of							to the be	st of my knowled	ge and t	oelief, it	is true,
Sign	Conec	t, and complete Declaration of	D / 4	-	based on all informa				. =/	May the IB	C deaus	a thus	rotum
_			1.000		10 17	119	201	TREASU		May the IR	S discus repar <u>er</u>		retum below
Here	Sign	nature of officer or trustee			Date		Title			(see instruction	1s)? X	Yes	No
		T											
Paid		Print/Type preparer's na		Pre	parer's signature	O		Date 10/7/1	5 I	Check ıf	PΠN		
	0 rc =	MICHAEL J ROW			run 1	9. Res	r	10,771		self-employed	P005	35 <u>83</u>	1
Prepa			LF & COMPA		<u></u>				Firm's	EIN ▶ 04-2	<u>6898</u>	83	
Use (Unly		HIGH STRE	EET, 2	1ST FLOOR		_						
		<u> B</u> O	STON, MA				02	2110	Phone				
										Fo	m 990	v-PF	(2014)

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.

Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2014

Employer identification number

INSTITUTION FOR SAVING							
ITS VICINITY CHARITABI	JE FOUNDATION, INC.	04-3353621					
Organization type (check one):							
Filers of:	Section:						
Form 990 or 990-EZ	501(c)() (enter number) organization						
	4947(a)(1) nonexempt charitable trust not treated as a private fou	ndation					
	527 political organization						
Form 990-PF	X 501(c)(3) exempt private foundation						
	4947(a)(1) nonexempt charitable trust treated as a private foundate	lion					
	501(c)(3) taxable private foundation						
, ,	vered by the General Rule or a Special Rule . (8), or (10) organization can check boxes for both the General Rule and a S	Special Rule. See					
General Rule							
	ing Form 990, 990-EZ, or 990-PF that received, during the year, contribution property) from any one contributor. Complete Parts I and II. See instruction tributions						
Special Rules							
regulations under sec 13, 16a, or 16b, and t	escribed in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1 tions 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 chat received from any one contributor, during the year, total contributions he amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Co	or 990-EZ), Part II, line s of the greater of (1)					
contributor, during the	escribed in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that re e year, total contributions of more than \$1,000 <i>exclusively</i> for religious, ch il purposes, or the prevention of cruelty to children or animals. Complete P	aritable, scientific,					
contributor, during the contributions totaled reducing the year for an General Rule applies	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled 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 totaling \$5,000 or more during the year						
Caution. An organization that is 990-EZ, or 990-PF), but it must	not covered by the General Rule and/or the Special Rules does not file So answer "No" on Part IV, line 2, of its Form 990; or check the box on line I certify that it does not meet the filing requirements of Schedule B (Form 99	chedule B (Form 990, I of its Form 990-EZ or on its					

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) (2014)

Name of organization INSTITUTION FOR SAVINGS IN NEWBURYPORT & ITS VICINITY CHARITABLE FOUNDATION, INC.

Employer identification number 04-3353621

Part I	Contributors (see instructions). Use duplicate copies of F	Part I if additional space is nee	ded.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1_	IFSN 1820 SECURITY CORPORATION 93 STATE STREET NEWBURYPORT, MA 01950	\$663,938.	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2 _	IFSN 1820 SECURITY CORPORATION 93 STATE STREET NEWBURYPORT, MA 01950	\$ <u>101,812.</u>	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		- - - -	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		- - - -	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		- - - -	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		- - \$	Person Payroll Noncash (Complete Part II for noncash contributions)

Name of organization INSTITUTION FOR SAVINGS IN NEWBURYPORT & ITS VICINITY CHARITABLE FOUNDATION, INC.

Employer identification number 04-3353621

Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	HONEYWELL STOCK		_
		\$663,938.	_05/20/2015_
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_2	CAMBRIDGE BANCORP STOCK		
		\$101,812.	_05/20/2015
(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
		¢.	
		\$	990, 990-EZ, or 990-PF) (2

Employer identification number

	ITS VICINITY CHARITABL	E FOUNDATION, I	NC.	04-3353621						
Part III	Exclusively religious, charitable, etc.	, contributions to o	rganizations desc	ribed in section 501(c)(7), (8), or (10)						
	that total more than \$1,000 for the y									
	following line entry. For organizations									
	contributions of \$1,000 or less for the			ee instructions.) ► \$						
	Use duplicate copies of Part III if additi	ional space is neede	ed							
(a) No. from	(b) Purpose of gift	(c) Use	of aift	(d) Description of how gift is held						
Part I	(b) Fullpose of gilt	(c) 0se	or gift	(a) Description of now girt is field						
			_							
		-								
		(e) Transfe	er of gift							
	Transferee's name, address, ar	nd ZIP + 4	Relation	nship of transferor to transferee						
(a) No.										
from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held						
	-									
		(e) Transf	er of aift							
	Transferee's name, address, ar	Relatio	ionship of transferor to transferee							
(a) No.										
(a) No. from Part i	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held						
raiti	 									
	(a) Transfer of nift									
	(e) Transfer of gift									
	Transferee's name, address, a	nd 7IP + 4	Relatio	tionship of transferor to transferee						
	,,,		Relationship of transferor to transferee							
			~~							
(a) No.	 	<u>-</u>	<u> </u>							
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held						
Faiti	 		 							
-										
	(e) Transfer of gift									
		(e) Transt	er or Aur							
	Transferee's name, address, a	nd 7IP + 4	Dalatia	nchin of transferer to transfere						
	Transferee's flame, audress, at	114 EIF T 4	Keiatio	nship of transferor to transferee						
		- -								
			-							
	<u> </u>		L							

INSTITUTION FOR SAVINGS IN NEWBURYPORT & 04-3353621
FORM 990-PF - PART IV
CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

•		INS AND LO	X TAX ON	HAFPI	P	ENT INCOM		
Kind of Property Description					or D	Date acquired	Date sold	
Gross sale price less expenses of sale	Depreciation allowed/ allowable	Cost or other basis	FMV as of 12/31/69	Adj basis as of 12/31/69	Excess of FMV over adi basis	Ĭ	Gain or (loss)	
19,246.		CAMBRIDGE BA PROPERTY TY: 353.	ANCORP			D	08/31/2012 18,893.	09/09/2014
168,087.		ALLSTATE COI PROPERTY TY: 141,256.		IES		P	06/21/2006	06/17/2015
160,087.		APPLIED MAT	ERIALS INC			P	26,831. 03/06/2012	06/17/2015
156,552.		PROPERTY TY: 133,766.		IES			22,786.	
		COSTCO WHOLI		TES		P	11/04/2003	06/17/2015
69,047.		16,855.	I D. J_JONE				52,192.	
0.210		TALEN ENERGY PROPERTY TY		IES		P	06/01/2015	06/17/2015
8,310.		6,391.					1,919.	
TOTAL GAIN(L	oss)			• • • • • • • • • • • • • • • • • • • •			122,621.	
-								

INTEREST ON SAVINGS & CDS

04-3353621

ATTACHMENT 1

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

TOTAL

REVENUE

AND

NET INVESTMENT

INCOME

ADJUSTED

DESCRIPTION EXPENSES
PER BOOKS

1,839.

1,839.

NET INCOME

1,839.

1,839.

ATTACHMENT 1

04-3353621

ATTACHMENT 2

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

REVENUE

AND

NET INVESTMENT ADJUSTED

DESCRIPTION

EXPENSES PER BOOKS

INCOME

NET INCOME

DIVIDENDS ON STOCKS

247,651. 247,651. 247,651.

247,651.

TOTAL

ATTACHMENT 2

04-3353621

ATTACHMENT 3

FORM 990PF, PART I - ACCOUNTING FEES

REVENUE NET AND ADJUSTED EXPENSES INVESTMENT NET CHARITABLE DESCRIPTION PER BOOKS INCOME INCOME PURPOSES WOLF & COMPANY, PC. 1,700. 1,700. TOTALS 1,700. 1,700.

04-3353621

ATTACHMENT 4

FORM 990PF, PART I - TAXES

REVENUE

AND

NET

ADJUSTED

DESCRIPTION

EXPENSES PER BOOKS INVESTMENT INCOME NET INCOME CHARITABLE PURPOSES

FEDERAL TAXES

17,700.

TOTALS

17,700.

04-3353621

ATTACHMENT 5

FORM 990PF, PART I - OTHER EXPENSES

<u>DESCRIPTION</u>		REVENUE AND EXPENSES PER BOOKS	NET INVESTMENT <u>INCOME</u>	ADJUSTED NET INCOME	CHARITABLE <u>PURPOSES</u>
BANK SERVICE CHARGES MASS FILING FEE		70.			70.
	TOTALS	70.			70.

04-3353621

ATTACHMENT 6

FORM 990PF, PART II - CORPORATE STOCK

DESCRIPTION

BEGINNING BOOK VALUE ENDING BOOK VALUE ENDING FMV

STOCKS & BONDS

7,577,907.

8,234,577.

8,234,577.

TOTALS

7,577,907.

8,234,577.

8,234,577.

ATTACHMENT 7

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

DESCRIPTION AMOUNT

UNREALIZED GAINS 204,560.

204,560. TOTAL

ATTACHMENT 8

NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
PATRICIA D CONNELLY 93 STATE STREET P.O BOX 510 NEWBURYPORT, MA 01950	CLERK 1.00	0	0	0
DAVID A TIBBETTS 93 STATE STREET P O BOX 510 NEWBURYPORT, MA 01950	TRUSTEE 1 00	0	0	0
PETER G KELLY 93 STATE STREET P.O. BOX 510 NEWBURYPORT, MA 01950	TRUSTEE 1.00	0	0	O
MARY E LARNARD 93 STATE STREET P O BOX 510 NEWBURYPORT, MA 01950	TRUSTEE 1.00	0	0	0
FREEMAN J CONDON 93 STATE STREET P.O. BOX 510 NEWBURYPORT, MA 01950	TRUSTEE 1 00	0	0	o

04-3353621

FORM 990PF, PART VIII - LIST O	F OFFICERS, DIRECTORS, AND TRUSTEES	•	ATTACE	MENT 8 (CONT'D)
NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
CINDY M JOHNSON 93 STATE STREET P.O. BOX 510 NEWBURYPORT, MA 01950	TRUSTEE 1.00	0	0	0
JOHN F LEARY III 93 STATE STREET P O. BOX 510 NEWBURYPORT, MA 01950	TRUSTEE 1.00	0	0	0
DONALD M GREENOUGH 93 STATE STREET P O. BOX 510 NEWBURYPORT, MA 01950	TRUSTEE 1.00	0	0	0
MICHAEL J JONES 93 STATE STREET P O BOX 510 NEWBURYPORT, MA 01950	PRESIDENT/TRUSTEE 1.00	0	0	0
JEREMIAH T LEWIS 93 STATE STREET P O BOX 510 NEWBURYPORT, MA 01950	TRUSTEE 1 00	0	0	0

ATTACHMENT	8	(CONT)	D)	
				=

NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
R. DREW MARC-AURELE 93 STATE STREET P O. BOX 510 NEWBURYPORT, MA 01950	TRUSTEE 1.00	0	0	0
ELLEN G NICH 93 STATE STREET P O. BOX 510 NEWBURYPORT, MA 01950	TRUSTEE 1.00	0	0	0
ELLEN MACKEY ROSE 93 STATE STREET P O. BOX 510 NEWBURYPORT, MA 01950	TRUSTEE 1.00	0	0	0
RICHARD J SILVERMAN 93 STATE STREET P O. BOX 510 NEWBURYPORT, MA 01950	TRUSTEE 1 00	0	0	0
KIMBERLY A ROCK 93 STATE STREET P.O. BOX 510 NEWBURYPORT, MA 01950	TRUSTEE 1 00	0	0	o

04-3353621

FORM 990PF, PART VIII - LIST OF	OFFICERS, DIRECTORS, AND TRUSTEES		ATTACH	MENT 8 (CONT'D)
NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
STEPHEN P COTE 93 STATE STREET P.O. BOX 510 NEWBURYPORT, MA 01950	TREASURER 1.00	0	0	0
JAMES V ELLARD 93 STATE STREET P.O BOX 510 NEWBURYPORT, MA 01950	TRUSTEE 1.00	0	0	0
KEVIN M GASIOROWSKI 93 STATE STREET P.O. BOX 510 NEWBURYPORT, MA 01950	TRUSTEE 1.00	0	0	0
SAIRA NASEER-GHIASUDDIN 93 STATE STREET P O BOX 510 NEWBURYPORT, MA 01950	TRUSTEE 1 00	0	0	0
JOHN J MEANY 93 STATE STREET P.O. BOX 510 NEWBURYPORT, MA 01950	TRUSTEE 1.00	0	0	0

04-3353621

FORM	990 DE	DADT	WITT	_	TTCT	OF	OFFICEDS	DIRECTORS,	AND	TRICTER	
F ORLY	JJUEF.	-EWKT	ATTT	_	TITOI	OF.	OFFICERS,	DIKECIOKS,	MIND	TKASTEES	

FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES		ATTACHMENT 8 (CONT'D)		
NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
STUART E WINFREY 93 STATE STREET P.O BOX 510 NEWBURYPORT, MA 01950	TRUSTEE 1.00	0	0	0
	GRAND TOTALS	0	0	0

ATTACHMENT 9

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

MICHAEL J JONES 2 DEPOT SQUARE IPSWICH, MA 01938 978-462-3106

ATTACHMENT 10

990PF, PART XV - RESTRICTIONS OR LIMITATIONS ON AWARDS

AWARDS ARE TO BE GRANTED WITHIN NEWBURYPORT, MASSACHUSETTS, AND ITS VICINITY UNLESS AN EXCEPTION IS MADE BY THE BOARD OF TRUSTEES TO BENEFIT COMMUNITY, CHARITABLE, EDUCATIONAL, AND OTHER BENEVOLENT PURPOSES.

04-3353621

FOEM 990PP, PART YV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

ATTACHMENT 11

RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR

AND

RECIPIENT NAME AND ADDRESS

FOUNDATION STATUS OF RECIPIENT

PURPOSE OF GRANT OR CONTRIBUTION

AMOUNT

PLEASE SEE ATTACHED SCHEDULE

NOT RELATED

EXEMPT PURPOSE

1 254,072

ON FILE - AVAILABLE UPON REQUEST

PC

TOTAL CONTRIBUTIONS PAID

1,254,072

ATTACHMENT 11

8/20/2015 3 19 45 PM

V 14-6P

P

44423PF

INSTITUTION FOR SAVINGS CHARITABLE FOUNDATION



Summary of Grants Awarded

Fiscal YTD June 30, 2015

Organization	Amount
1st Lt. Derek Hines Soldiers Assistance Foundation	5,000
American Univ f/b/o Christian P. Cyr	7,500
American University - f/b/o Christian Cyr	7,500
Amesbury High School	500
Amesbury Public Schools f/b/o Windrush Farm	2,000
Among Friends/St. Paul's Church, Newburyport	5,000
Anna Jacques Hospital Community Health Foundation	50,000
Anna Jacques Hospital Community Health Foundation	250,000
Anna Jaques Hospital Aid Association	5,000
Assisted Living Center	7,500
Bagnall Education Foundation	1,000
Belleville Improvement Society	5,000
Belleville Roots Music Concert Series	3,000
Boston Children's Hospital	250
Boxford Elementary Schools Trust	8,300
Boys & Girls Club of Lower Merrimack Valley	1,500
Boys & Girls Club of Lower Merrimack Valley	1,000
Bridgewell Inc.	2,800
Byfield Community Arts Center	2,500
Central Congregational Church	2,500
Christmas Tree Santas	1,000
City of Newburyport	2,500
City of Newburyport	3,500
City of Newburyport	100,000
Coastal Homebuyers Education	3,000
Community Action Inc.	7,500
Community Service of Newburyport	2,500 500
Destination Imagination Compassionate Connections Downtown Newburyport Enhancement Team	1,000
Endicott College f/b/o Courtney Brown	5,000
Family Services of Merrimack Valley Playhouse Event	2,500
Firehouse Center for the Arts	15,000
First Parish Church of Newbury	5,000
Fraxa Reseach Foundation	3,500
Friends of the Newburport Public Library	1,000
Friends of the Newburyport Council on Aging	10,000
Friends of the Salisbury Council on Aging	1,500
Girl Scouts of Eastern Ma	1,000
Greater Newburyport Chamber of Commerce	2,000
Greater Newburyport Ovarian Cancer Awareness	1,000
Groveland Youth Soccer	2,500
Half Dozen Di-Destination Imagination Team	1,000
Haverhill YMCA	5,000
His Provision Too-St. Anglican Church	10,000
Horizon Club	2,000
Imagine Studios	2,000
Immaculate Conception School	6,550
Immaculate Conception School	5,000
Jeanne Geiger Crisis Center	20,000
Joppa Flats Running Club	2,500
Larry Fournier Memorial Hockey Tournament	2,500
Link House Inc.	1,000
Lowell's Boat Shop	10,000
Merrimac PTO	3,000

INSTITUTION FOR SAVINGS CHARITABLE FOUNDATION



Summary of Grants Awarded

Fiscal YTD June 30, 2015

Organization	Amount
Merrimack College f/b/o Stephen Levesque	3,660
Merrimack River Feline Rescue Society	7,500
Merrimack Valley Economic Development Council	5,000
Music-for-Music	2,500
New England Exchange Clubs Foundation, Inc.	1,000
Newburyport Adult & Community Education	5,000
Newburyport Art Association	17,500
Newburyport Choral Society	1,000
Newburyport Education Foundation	33,333
Newburyport Education Foundation	100,000
Newburyport Education Foundation	10,000
Newburyport Education Foundation	50,000
Newburyport Elementary PTO	1,200
Newburyport Girls Basketball Assoc.	1,500
Newburyport Lions Club	500
Newburyport Literary Association	5,000
Newburyport Lodge 909 Elks Club	500
Newburyport PTO	2,500
Newburyport Rotary Club	1,000
Newburyport Waterfront Trust	750
Newburyport Youth Services Inc	3,000
NHS Environmental Club	4,000
North Shore YMCA	10,000
Northern Essex Community College	5,000
Opportunity Works	42,333
Opportunity Workshop	1,000
Our Neighbor's Table	10,000
Pan Mass Challenge	2,500
Pennies for Poverty	5,000
Pentucket Athletic Association	1,000
Pentucket Education Foundation	500
Pentucket Education Foundation	5,000
Pentucket Fine & Performing Arts Foundation	5,000
Pentucket Regional High School Senior Celebration	500
Pentucket Youth Lacrosse	5,000
PMC Greater Newburyport Kids Ride	2,500
Princeton University f/b/o Erin Curley	595
Rupert A. Nock Middle School	2,500
Salısbury Beach Partnership	5,000
Salisbury Chamber of Commerce	500
Senior Celebration 2015	500
Society for the Preservation of New England Antiquities	10,000
St. Basil's Kitchen - Greek Church	2,500
St. Vincent de Paul	2,500
The Actors Studio of Newburyport	5,000
The ALS Association MA Chapter	1,000
The Firehouse Center for the Arts	50,000
The Pettengill House	20,000
The Pettengill House	5,000
The Pettengill House	5,000
The Pettingill House	3,000
The Salvation Army	5,000
Timmy Trot 5K	300
Town of Salisbury	100,000

INSTITUTION FOR SAVINGS CHARITABLE FOUNDATION



Summary of Grants Awarded

Fiscal YTD June 30, 2015

<u>Organization</u>	<u>Amount</u>	
Travis Elliot Landreth Foundation	3,000	
Triton Babe Ruth League	2,500	
Triton Regional High School Robotics Team	1,500	
Triton Regional School District	20,000	
Triton Viking Gradventure	500	
Trı-Town Council	500	
Turning Point	1,000	
Umass Lowell f/b/o Ryan Dymek	12,000	
Veterans Legacy Initiative	1,000	
Winners Circle Running Club	5,000	
Turning Point	2,000	
Winner's Circle Running Club	4,000	
Yankee Clipper Council BSA (Boy Scouts of America)	1,000	
YWCA Greater Newburyport	5,000	
YWCA Greater Newburyport	15,000	
Total Grants Awarded 2015	1,254,072	

04-3353621

FORM 990PF PART	XV - CONTRIB	UTIONS APPROVED FOR	R FIFTIER PAYMENT	

		ATTACHMENT	12
	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR		
	AND		
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
TRITON REGIONAL HIGH SCHOOL	NOT RELATED	STADIUM PROJECT/AUDIO VISUAL/PERFORMING ARTS	225,0
112 ELM STREET	PC		
BYFIELD, MA 01922			
NEWBURYPORT EDUCATIONAL FOUNDATION	NOT RELATED	UPGRADE NHS LIBRARY	33,3
PO BOX 1002	PC		
NEWBURYPORT, MA 01950			
RESTORE OUR STADIUM	NOT RELATED	RENOVATIONS TO WORLD WAR MEMORIAL STADIUM FIELD	400,0
26 SUMMIT PLACE	PC		
NEWBURYPORT, MA 01950			
NEWBURYPORT EDUCATIONAL FOUNDATION	NOT RELATED	SCIENCE LAB MAINTENANCE	10,0
PO BOX 1002	PC		
NEWBURYPORT, MA 01950			
OPPORTUNITY WORKS	NOT RELATED	CAPITAL CAMPAIGN-EXECUTIVE CONFERENCE ROOM	33,3
TEN OPPORTUNITY WAY	PC		
NEWBURYPORT, MA 01950			
OPPORTUNITY WORKS	NOT RELATED	LEND-A-HAND AUCTION & GOLF TOURNAMENT	9,0
TEN OPPORTUNITY WAY	PC		
NEWBURYPORT, MA 01950			

ATTACHMENT 12

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04-3353621

FORM 990PF, PART XV - CONTRIBUTIONS APPROVED FOR FU	TURE PAYMENT		
			ATTACHMENT 12 (CONT'D)
	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR		
	AND		
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
TOWN OF SALISBURY	NOT RELATED	CONSTRUCTION OF NEW PUBLIC LIBRARY	400,000
17 ELM ST	PC		
SALISBURY, MA 01952			
ESSEX COUNTY GREENBELT	NOT RELATED	SUPPORT FOR LAND CONSERVATION	500,000
82 EASTERN AVENUE	PC		
ESSEX, MA 01929			
NEWBURYPORT EDUCATIONAL FOUNDATION	NOT RELATED	AMERICAN MUSIC AND HARVEST FESTIVAL	20,000
PO BOX 1002	PC		
NEWBURYPORT, 01950			
		TOTAL CONTRIBUTIONS APPRO	VED

ATTACHMENT 12

8/20/2015 3 19 45 PM

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