

Form 990-PF

Department of the Treasury  
Internal Revenue Service

## Return of Private Foundation

## 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.
- Information about Form 990-PF and its instructions is at [www.irs.gov/form990pf](http://www.irs.gov/form990pf).

2015

Open to Public  
Inspection

For calendar year 2015, or tax year beginning 10-01-2015

, and ending 09-30-2016

Name of foundation NEWTOWN SAVINGS BANK FOUNDATION INC		A Employer identification number 06-1514980		
Number and street (or P O box number if mail is not delivered to street address) NEWTOWN SAVINGS BANK 39 MAIN STREET		B Telephone number (see instructions) (203) 426-4440		
City or town, state or province, country, and ZIP or foreign postal code NEWTOWN, CT 06470		C If exemption application is pending, check here ►		
<b>G</b> Check all that apply <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Address change <input type="checkbox"/> Name change		<b>D</b> 1. Foreign organizations, check here ► 2. Foreign organizations meeting the 85% test, check here and attach computation <b>E</b> If private foundation status was terminated under section 507(b)(1)(A), check here <b>F</b> If the foundation is in a 60-month termination under section 507(b)(1)(B), check here		
<b>H</b> Check type of organization <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation				
<b>I</b> Fair market value of all assets at end of year (from Part II, col (c), line 16) ► \$ 1,627,986		<b>J</b> Accounting method <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ <i>(Part I, column (d) must be on cash basis )</i>		
<b>Part I</b> <b>Analysis of Revenue and Expenses</b> <i>(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions) )</i>				
Revenue	1	Contributions, gifts, grants, etc , received (attach schedule)	111,793	
	2	Check ► <input type="checkbox"/> if the foundation is <b>not</b> required to attach Sch B		
	3	Interest on savings and temporary cash investments		
	4	Dividends and interest from securities	54,316	
	5a	Gross rents		
	b	Net rental income or (loss)		
	6a	Net gain or (loss) from sale of assets not on line 10	-47,075	
	b	Gross sales price for all assets on line 6a	135,354	
	7	Capital gain net income (from Part IV, line 2)	0	
	8	Net short-term capital gain		
	9	Income modifications		
	10a	Gross sales less returns and allowances		
b	Less Cost of goods sold			
c	Gross profit or (loss) (attach schedule)			
11	Other income (attach schedule)	-718		
12	<b>Total</b> .Add lines 1 through 11	118,316	53,598	
Operating and Administrative Expenses	13	Compensation of officers, directors, trustees, etc	0	
	14	Other employee salaries and wages	0	
	15	Pension plans, employee benefits		
	16a	Legal fees (attach schedule)		
	b	Accounting fees (attach schedule)		
	c	Other professional fees (attach schedule)	11,801	
	17	Interest		
	18	Taxes (attach schedule) (see instructions)	210	
	19	Depreciation (attach schedule) and depletion		
	20	Occupancy		
	21	Travel, conferences, and meetings		
	22	Printing and publications		
	23	Other expenses (attach schedule)		
	24	<b>Total operating and administrative expenses.</b>	12,011	
	Add lines 13 through 23	12,011	0	
25	Contributions, gifts, grants paid	85,000	85,000	
26	<b>Total expenses and disbursements.</b> Add lines 24 and 25	97,011	12,011	85,000
27	Subtract line 26 from line 12			
a	<b>Excess of revenue over expenses and disbursements</b>	21,305		
b	<b>Net investment income</b> (if negative, enter -0-)	41,587		
c	<b>Adjusted net income</b> (if negative, enter -0-)			

	<b>Part II Balance Sheets</b> Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions )	Beginning of year	End of year	
		<b>(a) Book Value</b>	<b>(b) Book Value</b>	<b>(c) Fair Market Value</b>
<b>Assets</b>	1 Cash—non-interest-bearing . . . . .	42,650	98,031	98,031
	2 Savings and temporary cash investments . . . . .			
	3 Accounts receivable ► _____			
	Less allowance for doubtful accounts ► _____			
	4 Pledges receivable ► _____			
	Less allowance for doubtful accounts ► _____			
	5 Grants receivable . . . . .			
	6 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions) . . . . .			
	7 Other notes and loans receivable (attach schedule) ► _____			
	Less allowance for doubtful accounts ► _____			
	8 Inventories for sale or use . . . . .			
	9 Prepaid expenses and deferred charges . . . . .			
	10a Investments—U S and state government obligations (attach schedule)			
	b Investments—corporate stock (attach schedule) . . . . .	678,228	781,142	781,142
	c Investments—corporate bonds (attach schedule) . . . . .			
	11 Investments—land, buildings, and equipment basis ► _____			
Less accumulated depreciation (attach schedule) ► _____				
12 Investments—mortgage loans . . . . .				
13 Investments—other (attach schedule) . . . . .	702,646	748,813	748,813	
14 Land, buildings, and equipment basis ► _____				
Less accumulated depreciation (attach schedule) ► _____				
15 Other assets (describe ► _____)				
16 <b>Total assets</b> (to be completed by all filers—see the instructions Also, see page 1, item I)	1,423,524	1,627,986	1,627,986	
<b>Liabilities</b>	17 Accounts payable and accrued expenses . . . . .			
	18 Grants payable . . . . .			
	19 Deferred revenue . . . . .			
	20 Loans from officers, directors, trustees, and other disqualified persons			
	21 Mortgages and other notes payable (attach schedule) . . . . .			
	22 Other liabilities (describe ► _____)			
	23 <b>Total liabilities</b> (add lines 17 through 22) . . . . .	0	0	
<b>Net Assets or Fund Balances</b>	<b>Foundations that follow SFAS 117, check here ► <input type="checkbox"/></b> <b>and complete lines 24 through 26 and lines 30 and 31.</b>			
	24 Unrestricted . . . . .			
	25 Temporarily restricted . . . . .			
	26 Permanently restricted . . . . .			
	<b>Foundations that do not follow SFAS 117, check here ► <input checked="" type="checkbox"/></b> <b>and complete lines 27 through 31.</b>			
	27 Capital stock, trust principal, or current funds . . . . .	1,423,524	1,627,986	
	28 Paid-in or capital surplus, or land, bldg , and equipment fund	0	0	
	29 Retained earnings, accumulated income, endowment, or other funds	0	0	
	30 <b>Total net assets or fund balances</b> (see instructions) . . . . .	1,423,524	1,627,986	
	31 <b>Total liabilities and net assets/fund balances</b> (see instructions) . . . . .	1,423,524	1,627,986	

**Part III Analysis of Changes in Net Assets or Fund Balances**

1	Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) . . . . .	1	1,423,524
2	Enter amount from Part I, line 27a . . . . .	2	21,305
3	Other increases not included in line 2 (itemize) ► _____	3	183,157
4	Add lines 1, 2, and 3 . . . . .	4	1,627,986
5	Decreases not included in line 2 (itemize) ► _____	5	0
6	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 . . . . .	6	1,627,986

**Part IV Capital Gains and Losses for Tax on Investment Income**

List and describe the kind(s) of property sold (e.g., real estate, (a) 2-story brick warehouse, or common stock, 200 shs MLC Co.)		How acquired (b) P—Purchase D—Donation	Date acquired (c) (mo, day, yr)	Date sold (d) (mo, day, yr)
<b>1a</b>	See Additional Data Table			
<b>b</b>				
<b>c</b>				
<b>d</b>				
<b>e</b>				
<b>(e) Gross sales price</b>		<b>(f) Depreciation allowed (or allowable)</b>	<b>(g) Cost or other basis plus expense of sale</b>	<b>(h) (e) plus (f) minus (g)</b>
<b>a</b>	See Additional Data Table			
<b>b</b>				
<b>c</b>				
<b>d</b>				
<b>e</b>				
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69				Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
<b>(i) F M V as of 12/31/69</b>		<b>(j) Adjusted basis as of 12/31/69</b>	<b>(k) Excess of col (i) over col (j), if any</b>	
<b>a</b>	See Additional Data Table			
<b>b</b>				
<b>c</b>				
<b>d</b>				
<b>e</b>				
<b>2</b>	Capital gain net income or (net capital loss)	If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7	<b>2</b>	-47,075
<b>3</b>	Net short-term capital gain or (loss) as defined in sections 1222(5) and (6)		<b>3</b>	
If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8				

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

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income )  
If section 4940(d)(2) applies, leave this part blank

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?  Yes  No  
If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part

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

<b>(a)</b> Base period years Calendar year (or tax year beginning in)	<b>(b)</b> Adjusted qualifying distributions	<b>(c)</b> Net value of noncharitable-use assets	<b>(d)</b> Distribution ratio (col (b) divided by col (c))
2014	41,000	1,459,490	0 028092
2013	64,500	1,350,682	0 047754
2012	154,560	1,159,924	0 133250
2011	56,210	1,027,656	0 054697
2010	45,500	964,174	0 047191
<b>2</b>	<b>Total of line 1, column (d).</b>		<b>2</b> 0 310984
<b>3</b>	Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years		<b>3</b> 0 062197
<b>4</b>	Enter the net value of noncharitable-use assets for 2015 from Part X, line 5.		<b>4</b> 1,502,073
<b>5</b>	Multiply line 4 by line 3.		<b>5</b> 93,424
<b>6</b>	Enter 1% of net investment income (1% of Part I, line 27b).		<b>6</b> 416
<b>7</b>	Add lines 5 and 6.		<b>7</b> 93,840
<b>8</b>	Enter qualifying distributions from Part XII, line 4.		<b>8</b> 85,000

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

**Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the instructions)**

1a	Exempt operating foundations described in section 4940(d)(2), check here ► <input type="checkbox"/> and enter "N/A" on line 1	1	832
	Date of ruling or determination letter _____ <b>(attach copy of letter if necessary—see instructions)</b>		
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here ► <input type="checkbox"/> and enter 1% of Part I, line 27b . . . . .		
c	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b)		
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) . . . . .	2	0
3	Add lines 1 and 2. . . . .	3	832
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) . . . . .	4	0
5	<b>Tax based on investment income.</b> Subtract line 4 from line 3 If zero or less, enter -0- . . . . .	5	832
6	<b>Credits/Payments</b>		
a	2015 estimated tax payments and 2014 overpayment credited to 2015 . . . . .	6a	178
b	Exempt foreign organizations—tax withheld at source . . . . .	6b	
c	Tax paid with application for extension of time to file (Form 8868) . . . . .	6c	1,500
d	Backup withholding erroneously withheld . . . . .	6d	
7	Total credits and payments Add lines 6a through 6d. . . . .	7	1,678
8	Enter any <b>penalty</b> for underpayment of estimated tax Check here <input type="checkbox"/> If Form 2220 is attached . . . . .	8	
9	<b>Tax due.</b> If the total of lines 5 and 8 is more than line 7, enter <b>amount owed</b> . . . . .	9	
10	<b>Overpayment.</b> If line 7 is more than the total of lines 5 and 8, enter the <b>amount overpaid</b> . . . . .	10	846
11	Enter the amount of line 10 to be <b>Credited to 2015 estimated tax</b> ► 846 <b>Refunded</b> ► . . . . .	11	0

**Part VII-A Statements Regarding Activities**

1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? . . . . .		<b>Yes</b>	<b>No</b>
1a			<b>No</b>	
1b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for definition)? . . . . .		<b>No</b>	
	<i>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</i>			
1c	Did the foundation file <b>Form 1120-POL</b> for this year? . . . . .		<b>No</b>	
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year <b>(1)</b> On the foundation ► \$ _____ 0 <b>(2)</b> On foundation managers ► \$ _____ 0			
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers ► \$ _____ 0			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS? . . . . . <i>If "Yes," attach a detailed description of the activities</i>		<b>No</b>	
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? <i>If "Yes," attach a conformed copy of the changes</i> . . . . .		<b>No</b>	
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year? . . . . .		<b>No</b>	
b	If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year? . . . . .			
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year? . . . . . <i>If "Yes," attach the statement required by General Instruction T</i>		<b>No</b>	
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? . . . . .		<b>Yes</b>	
7	Did the foundation have at least \$5,000 in assets at any time during the year? <i>If "Yes," complete Part II, col (c), and Part XV</i> . . . . .		<b>Yes</b>	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions) ► CT			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? <i>If "No," attach explanation</i> . . . . .		<b>Yes</b>	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? <i>If "Yes," complete Part XIV</i> . . . . .		<b>No</b>	
10	Did any persons become substantial contributors during the tax year? <i>If "Yes," attach a schedule listing their names and addresses</i> . . . . .		<b>No</b>	

**Part VII-A Statements Regarding Activities (continued)**

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions). . . . .	11	<input type="checkbox"/>	No
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	<input type="checkbox"/>	No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ►N/A	13	<input checked="" type="checkbox"/>	Yes
14	The books are in care of ►JOHN TRENTACOSTA Located at ►NEWTOWN SAVINGS BANK 39 MAIN STREET NEWTOWN CT	Telephone no ►(203) 426-4440 ZIP+4 ►06470		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> —Check here . . . . . and enter the amount of tax-exempt interest received or accrued during the year. . . . . ►	15	<input type="checkbox"/>	
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). If "Yes," enter the name of the foreign country ►	16	<input type="checkbox"/>	Yes
			<input type="checkbox"/>	No

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

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year did the foundation (either directly or indirectly)		
(1)	Engage in the sale or exchange, or leasing of property with a disqualified person? ►	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
(2)	Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? . . . . .	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
(3)	Furnish goods, services, or facilities to (or accept them from) a disqualified person? . . . . .	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
(4)	Pay compensation to, or pay or reimburse the expenses of, a disqualified person? . . . . .	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
(5)	Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? . . . . .	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
(6)	Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days). . . . . ►	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
b	If any answer is "Yes" to 1a(1)–(6), did <b>any</b> 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)? . . . . . Organizations relying on a current notice regarding disaster assistance check here. . . . . ►	1b	
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2015? . . . . .	1c	No
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))		
a	At the end of tax year 2015, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2015? . . . . .	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
	If "Yes," list the years ► 20____, 20____, 20____, 20____		
b	Are there any years listed in 2a for which the foundation is <b>not</b> 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 <b>all</b> years listed, answer "No" and attach statement—see instructions) . . . . .	2b	
c	If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here ► 20____, 20____, 20____, 20____		
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? . . . . .	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
b	If "Yes," did it have excess business holdings in 2015 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2015) . . . . .	3b	
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? . . . . .	4a	No
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2015? . . . . .	4b	No

**Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (Continued)****5a** During the year did the foundation pay or incur any amount to

(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?  Yes  No

(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive? . . . . .  Yes  No

(3) Provide a grant to an individual for travel, study, or other similar purposes?  Yes  No

(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? (see instructions). . . . .  Yes  No

(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? . . . . .  Yes  No

**b** If any answer is "Yes" to 5a(1)–(5), did **any** of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)? . . . . .

Organizations relying on a current notice regarding disaster assistance check here. . . . . ►

**5b**

**c** If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? . . . . .  Yes  No

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

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

**b** Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . . . . .

*If "Yes" to 6b, file Form 8870*

**6b****No**

**7a** At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?  Yes  No

**b** If yes, did the foundation receive any proceeds or have any net income attributable to the transaction? . . . . .

**7b****Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors****1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).**

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

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

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

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

0

**Part VIII** **Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)**

**3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE".**

**Part IX-A Summary of Direct Charitable Activities**

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.

## Expenses

1

2

3

4

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

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.

### Amount

1

1

All other program-related investments See instructions

3

**Total.** Add lines 1 through 3.

0

**Part X Minimum Investment Return**

(All domestic foundations must complete this part. Foreign foundations, see instructions.)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc , purposes		
a	Average monthly fair market value of securities. . . . .	1a	1,517,779
b	Average of monthly cash balances. . . . .	1b	7,168
c	Fair market value of all other assets (see instructions). . . . .	1c	0
d	<b>Total</b> (add lines 1a, b, and c). . . . .	1d	1,524,947
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation). . . . .	1e	0
2	Acquisition indebtedness applicable to line 1 assets. . . . .	2	0
3	Subtract line 2 from line 1d. . . . .	3	1,524,947
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions). . . . .	4	22,874
5	<b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3 Enter here and on Part V, line 4	5	1,502,073
6	<b>Minimum investment return.</b> Enter 5% of line 5. . . . .	6	75,104

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

1	Minimum investment return from Part X, line 6. . . . .	1	75,104
2a	Tax on investment income for 2015 from Part VI, line 5. . . . .	2a	832
b	Income tax for 2015 (This does not include the tax from Part VI ). . . . .	2b	
c	Add lines 2a and 2b. . . . .	2c	832
3	Distributable amount before adjustments Subtract line 2c from line 1. . . . .	3	74,272
4	Recoveries of amounts treated as qualifying distributions. . . . .	4	0
5	Add lines 3 and 4. . . . .	5	74,272
6	Deduction from distributable amount (see instructions). . . . .	6	0
7	<b>Distributable amount</b> as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1. . . . .	7	74,272

**Part XII Qualifying Distributions** (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc , purposes		
a	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26. . . . .	1a	85,000
b	Program-related investments—total from Part IX-B. . . . .	1b	0
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc , purposes. . . . .	2	
3	Amounts set aside for specific charitable projects that satisfy the		
a	Suitability test (prior IRS approval required). . . . .	3a	
b	Cash distribution test (attach the required schedule). . . . .	3b	
4	<b>Qualifying distributions.</b> Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	85,000
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b (see instructions). . . . .	5	0
6	<b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4. . . . .	6	85,000

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

**Part XIII Undistributed Income (see instructions)**

	<b>(a) Corpus</b>	<b>(b) Years prior to 2014</b>	<b>(c) 2014</b>	<b>(d) 2015</b>
<b>1</b> Distributable amount for 2015 from Part XI, line 7				74,272
<b>2</b> Undistributed income, if any, as of the end of 2015			0	
<b>a</b> Enter amount for 2014 only. . . . .		0		
<b>b</b> Total for prior years 20____, 20____, 20____		0		
<b>3</b> Excess distributions carryover, if any, to 2015				
<b>a</b> From 2010. . . . .				
<b>b</b> From 2011. . . . .				
<b>c</b> From 2012. . . . .	87,276			
<b>d</b> From 2013. . . . .				
<b>e</b> From 2014. . . . .				
<b>f</b> <b>Total</b> of lines 3a through e. . . . .	87,276			
<b>4</b> Qualifying distributions for 2015 from Part XII, line 4 ► \$ 85,000			0	
<b>a</b> Applied to 2014, but not more than line 2a				
<b>b</b> Applied to undistributed income of prior years (Election required—see instructions). . . . .		0		
<b>c</b> Treated as distributions out of corpus (Election required—see instructions). . . . .	0			
<b>d</b> Applied to 2015 distributable amount. . . . .				74,272
<b>e</b> Remaining amount distributed out of corpus	10,728			
<b>5</b> Excess distributions carryover applied to 2015 (If an amount appears in column (d), the same amount must be shown in column (a) )	0			0
<b>6</b> <b>Enter the net total of each column as indicated below:</b>	98,004			
<b>a</b> Corpus Add lines 3f, 4c, and 4e Subtract line 5		0		
<b>b</b> Prior years' undistributed income Subtract line 4b from line 2b. . . . .		0		
<b>c</b> Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed. . . . .		0		
<b>d</b> Subtract line 6c from line 6b Taxable amount—see instructions. . . . .		0		
<b>e</b> Undistributed income for 2014 Subtract line 4a from line 2a Taxable amount—see instructions. . . . .			0	
<b>f</b> Undistributed income for 2016 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2015. . . . .				0
<b>7</b> 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). . . . .	0			
<b>8</b> Excess distributions carryover from 2010 not applied on line 5 or line 7 (see instructions). . . . .	0			
<b>9</b> <b>Excess distributions carryover to 2016.</b> Subtract lines 7 and 8 from line 6a. . . . .	98,004			
<b>10</b> Analysis of line 9				
<b>a</b> Excess from 2011. . . . .				
<b>b</b> Excess from 2012. . . . .	87,276			
<b>c</b> Excess from 2013. . . . .				
<b>d</b> Excess from 2014. . . . .				
<b>e</b> Excess from 2015. . . . .	10,728			

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

<b>1a</b> If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2015, enter the date of the ruling. . . . . ►				
<b>b</b> Check box to indicate whether the organization is a private operating foundation described in section <input type="checkbox"/> 4942(j)(3) or <input type="checkbox"/> 4942(j)(5)				
<b>2a</b> Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed. . . . .				
<b>b</b> 85% of line 2a. . . . .				
<b>c</b> Qualifying distributions from Part XII, line 4 for each year listed. . . . .				
<b>d</b> Amounts included in line 2c not used directly for active conduct of exempt activities. . . . .				
<b>e</b> Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c. . . . .				
<b>3</b> Complete 3a, b, or c for the alternative test relied upon				
<b>a</b> "Assets" alternative test—enter				
<b>(1)</b> Value of all assets. . . . .				
<b>(2)</b> Value of assets qualifying under section 4942(j)(3)(B)(i)				
<b>b</b> "Endowment" alternative test—enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed. . . .				
<b>c</b> "Support" alternative test—enter				
<b>(1)</b> Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties). . . . .				
<b>(2)</b> Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(III). . . . .				
<b>(3)</b> Largest amount of support from an exempt organization				
<b>(4)</b> Gross investment income				

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

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

**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

**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

JOHN F TRENTACOSTA  
NEWTOWN SAVINGS BANK 39 MAIN STREET  
NEWTOWN, CT 06470  
(203) 426-4440

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

APPLICATIONS SHOULD BE MADE IN WRITING

**c** Any submission deadlines

NONE

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

GRANTS ARE LIMITED TO APPLICANTS IN THE NEWTOWN AND SURROUNDING AREA AND COMMUNITIES WITH NEWTOWN SAVINGS BANK BRANCHES

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
<b>a</b> <i>Paid during the year</i> See Additional Data Table				
<b>Total</b> . . . . .			► 3a	71,000
<b>b</b> <i>Approved for future payment</i>				
<b>Total</b> . . . . .			► 3b	0

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated

	Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See instructions )
	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	
<b>1</b> Program service revenue					
a					
b					
c					
d					
e					
f					
<b>g</b> Fees and contracts from government agencies					
<b>2</b> Membership dues and assessments. . . . .					
<b>3</b> Interest on savings and temporary cash investments. . . . .					
<b>4</b> Dividends and interest from securities. . . . .			14	54,316	
<b>5</b> Net rental income or (loss) from real estate					
a Debt-financed property. . . . .					
b Not debt-financed property. . . . .					
<b>6</b> Net rental income or (loss) from personal property. . . . .					
<b>7</b> Other investment income. . . . .					
<b>8</b> Gain or (loss) from sales of assets other than inventory. . . . .					-47,075
<b>9</b> Net income or (loss) from special events					
<b>10</b> Gross profit or (loss) from sales of inventory					
<b>11</b> Other revenue a INCOME FROM PASSTHROUGH ENTITIES			14		-718
b					
c					
d					
e					
<b>12</b> Subtotal Add columns (b), (d), and (e). . . . .		0		54,316	-47,793
<b>13</b> Total Add line 12, columns (b), (d), and (e). . . . .			13		6,523

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



**Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d**

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo, day, yr)	(d) Date sold (mo, day, yr)
BELDING MICH AREA SCHS G 05/01/2035 6 62%	P	2013-03-01	2016-01-07
CLIFFS NATURAL RESOURCE 04/01/2021 4 875%	P	2014-04-09	2015-12-11
CLIFFS NATURAL RESOURCE 04/01/2021 4 875%	P	2015-04-28	2015-12-11
FACTORSHARES TRUST CYB	P	2015-07-13	2016-09-01
FACTORSHARES TRUST CYB	P	2016-03-18	2016-09-01
GLOBAL HIGH INCOME	P	2010-12-13	2016-01-26
GLOBAL HIGH INCOME	P	2012-07-27	2016-01-26
GOLDMAN SACHS GROUP INC 06/30/2035 4 00%	P	2015-07-13	2016-09-30
JP MORGAN CHASE BANK NA 07/05/2027 5 75%	P	2012-07-02	2016-04-05
KINDER MORGAN INC COM	P	2006-08-24	2015-12-18

**Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h**

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis (h) plus expense of sale	(h) (e) plus (f) minus (g)
30,900		33,310	-2,410
2,780		20,105	-17,325
695		2,658	-1,963
8,044		9,382	-1,338
2,681		2,367	314
8,176		12,710	-4,534
6,541		10,353	-3,812
10,000		9,975	25
25,000		24,900	100
5,041		13,831	-8,790

**Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l**

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			Gains (Col (h) gain minus col (k), but not less than -0-) or (l) Losses (from col (h))
(i) F M V as of 12/31/69	Adjusted basis (j) as of 12/31/69	Excess of col (i) (k) over col (j), if any	
			-2,410
			-17,325
			-1,963
			-1,338
			314
			-4,534
			-3,812
			25
			100
			-8,790

**Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d**

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co)	(b) How acquired P—Purchase D—Donation	(c) (mo, day, yr)	(d) Date sold (mo, day, yr)
PLAINS GP HOLDINGS LP CO	P	2013-10-16	2015-12-18
SINGAPORE FUND INC	P	2007-03-01	2016-09-01
SINGAPORE FUND INC	P	2008-12-26	2016-09-01
SINGAPORE FUND INC	P	2009-05-18	2016-09-01
SOCIETE GENERALE NY AUT 06/25/2018 8.00%	P	2015-06-23	2016-06-27
MATTHEWS INDIA FUND	P		

**Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h**

(e) Gross sales price	Depreciation allowed (f) (or allowable)	Cost or other basis (g) plus expense of sale	Gain or (loss) (h) (e) plus (f) minus (g)
3,000		8,800	-5,800
2,741		5,013	-2,272
2,741		2,131	610
1,828		1,900	-72
25,000		24,994	6
186			186

**Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l**

(i) F M V as of 12/31/69	Adjusted basis (j) as of 12/31/69	Excess of col (i) (k) over col (j), if any	Gains (Col (h) gain minus col (k), but not less than -0-) or (l) Losses (from col (h))
			-5,800
			-2,272
			610
			-72
			6
			186

**Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation**

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, (e) other allowances
JOHN F TRENTACOSTA	PRESIDENT & CEO 0 00	0	0	0
34 YOGANANDA ST SANDY HOOK, CT 06470				
ALAN C CLAVETTE	TRUSTEE 0 00	0	0	0
3 FOX HOLLOW LANE SANDY HOOK, CT 06482				
JOHN J MARTOCCI	CHAIRMAN 0 00	0	0	0
39 MAIN STREET NEWTOWN, CT 06470				
BRIAN C WHITE	TRUSTEE 0 00	0	0	0
60 CASTLE MEADOW ROAD NEWTOWN, CT 06470				
CAROL L MAHONEY	TRUSTEE 0 00	0	0	0
20 DIAMOND DRIVE NEWTOWN, CT 06470				
JAMES T MORLEY JR	TRUSTEE 0 00	0	0	0
54 HUNTINGTON ROAD NEWTOWN, CT 06470				
DUANE GIANNINI	SENIOR VICE PRESIDENT 0 00	0	0	0
6 SAW MILL RIDGE ROAD NEWTOWN, CT 06470				
TANYA WULFF TRAUX	SECRETARY 0 00	0	0	0
44 JOSIES RING ROAD MONROE, CT 06468				
WILLIAM A BRIMMER JR	TRUSTEE 0 00	0	0	0
8 HATTERTOWN ROAD NEWTOWN, CT 06470				
JAMES A KENNEDY	TRUSTEE 0 00	0	0	0
111 AUNT HACK ROAD DANBURY, CT 06811				

# Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation

(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
LAUREEN A TROTTO	TRUSTEE	0	0	0
168 BRUSHY HILL ROAD NEWTOWN, CT 06470	0 00			

**Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a Paid during the year</b>				
BETHEL SOCIAL SERVICES 1 SCHOOL ST BETHEL, CT 06801			TO FUND THE FOOD PANTRY AND FUEL ASSISTANCE PROGRAM	1,000
BROOKFIELD HIGH SCHOOL 45 LONGMEADOW HILL ROAD BROOKFIELD, CT 06804			TO PROVIDE A SCHOLARSHIP BASED ON FINANCIAL NEED AND COMMUNITY SERVICE	1,000
BROOKFIELD SOCIAL SERVICES PO BOX 5106 - 100 POCONO RD BROOKFIELD, CT 06804			TO FUND THE FOOD PANTRY AND FUEL ASSISTANCE PROGRAM	1,000
CATHOLIC CHARITIES FAMILY LOAN PROGRAM 405 MAIN ST DANBURY, CT 06810			GENERAL PURPOSE	2,500
AMOS HOUSE INC 34 ROCKY GLEN ROAD DANBURY, CT 06810			GENERAL PURPOSE	1,000
<b>Total . . . . .</b>			► 3a	71,000

**Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a Paid during the year</b>				
LIFEBRIDGE COMMUNITY SERVICES 475 CLINTON AVE BRIDGEPORT, CT 06905			GENERAL PURPOSE	3,000
MONROE SCHOLARSHIP FUND INC PO BOX 691 MONROE, CT 06468			SCHOLARSHIP PROGRAM	1,000
MONROE SOCIAL SERVICES 7 FAN HILL ROAD MONROE, CT 06468			TO FUND THE FOOD PANTRY AND FUEL ASSISTANCE PROGRAM	1,000
NEWTOWN SCHOLARSHIP ASSOCIATION PO BOX 302 NEWTOWN, CT 06470			SCHOLARSHIP PROGRAM	5,000
NEWTOWN SOCIAL SERVICES 3 MAIN STREET NEWTOWN, CT 06470			FUNDING THE FOOD PANTRY AND FUEL ASSISTANCE PROGRAM	1,000
<b>Total . . . . .</b>			► 3a	71,000

**Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a Paid during the year</b>				
NEWTOWN VOLUNTEER AMBULANCE CORPS PO BOX 344 NEWTOWN, CT 06470			GENERAL PURPOSE	9,000
NUNNAWAUK MEADOWS (NEWTOWN HOUSING FOR ELDERLY) 3 NUNNAWAUK MEADOWS NEWTOWN, CT 06470			GENERAL PURPOSE	1,000
PIERCE HOLLOW VILLAGE (SOUTHBURY HOUSING FOR ELDERLY) 380 NORTH POVERTY ROAD SOUTHBURY, CT 06488			FINANCIALLY SUPPORT THE LOW INCOME/AFFORDABLE ELDERLY HOUSING PROJECT	5,000
POMPERAUG HIGH SCHOOL 234 JUDD ROAD SOUTHBURY, CT 06488			SCHOLARSHIP PROGRAM	1,000
SHELTON HIGH SCHOOL 120 MEADOW STREET SHELTON, CT 06484			SCHOLARSHIP PROGRAM	2,000
<b>Total . . . . .</b>			► 3a	71,000

**Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a Paid during the year</b>				
SOUTHBURY SOCIAL SERVICES 561 MAIN ST SOUTH SOUTHBURY, CT 06488			TO FUND THE FOOD PANTRY AND FUEL ASSISTANCE PROGRAM	1,000
SPOONER HOUSE 30 TODD ROAD SHELTON, CT 06484			GENERAL PURPOSE	1,000
TRUMBULL DEPARTMENT OF SOCIAL SERVICES 23 PRISCILLA PLACE TRUMBULL, CT 06611			TO FUND THE FOOD PANTRY AND FUEL ASSISTANCE PROGRAM	1,000
TRUMBULL HIGH SCHOOL SCHOLARSHIP FOUNDATION 72 STROBEL ROAD TRUMBULL, CT 06611			SCHOLARSHIP PROGRAM	1,000
UNITED WAY OF WESTERN CONNECTICUT 85 WEST STREET DANBURY, CT 06810			FUNDING A PROGRAM WHICH TEACHES FUNDAMENTAL FINANCIAL LITERACY SKILLS, LINKING TO EXISTING FINANCIAL SERVICES AND EMPOWERING FINANCIAL CAPABILITY TO LOW-TO- MODERATE INCOME INDIVIDUALS	3,000
<b>Total . . . . .</b>			<b>► 3a</b>	<b>71,000</b>

**Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a Paid during the year</b>				
WESTERN CONNECTICUT HEALTH NETWORK FOUNDATION 24 HOSPITAL AVENUE DANBURY, CT 06810			SUPPORT OF THE NEW PATIENT TOWER AND EMERGENCY DEPARTMENT AT DANBURY HOSPITAL	10,000
WOODBURY COMMUNITY SERVICES COUNCIL PO BOX 585 WOODBURY, CT 06798			TO FUND THE FOOD PANTRY AND FUEL ASSISTANCE PROGRAM	1,000
WOODBURY SCHOLARSHIP FUND PO BOX 716 WOODBURY, CT 06798			SCHOLARSHIP PROGRAM	3,000
OXFORD HIGH SCHOOL 61 QUAKER FARMS RD OXFORD, CT 06478			SCHOLARSHIP PROGRAM	1,000
LATINO SCHOLARSHIP FUND PO BOX 3355 DANBURY, CT 06813			SCHOLARSHIP PROGRAM	2,000
<b>Total . . . . .</b>			► 3a	71,000

**Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a Paid during the year</b>				
THE HORD FOUNDATION INC PO BOX 4671 DANBURY, CT 06813			SCHOLARSHIP PROGRAM	3,000
HABITAT FOR HUMANITY 51 AUSTIN STREET DANBURY, CT 06810			GENERAL PURPOSE	1,500
THE KENNEDY CENTER 2440 RESERVOIR AVENUE TRUMBELL, CT 06611			GENERAL PURPOSE	5,000
BETHEL PUBLIC SCHOOLS 300 WHITTLESEY DRIVE BETHEL, CT 06801			E058091 - 08/03/17 03 11PM WORKSHEET PRIVATE FOUNDATION	1,000
VALLEY UNITED WAY 54 GROVE STREET SHELTON, CT 06484			GENERAL PURPOSE	1,000
<b>Total . . . . .</b>			► 3a	71,000

## TY 2015 Investments Corporate Stock Schedule

**Name:** NEWTOWN SAVINGS BANK FOUNDATION INC

**EIN:** 06-1514980

<b>Name of Stock</b>	<b>End of Year Book Value</b>	<b>End of Year Fair Market Value</b>
STOCKS	781,142	781,142

## TY 2015 Investments - Other Schedule

**Name:** NEWTOWN SAVINGS BANK FOUNDATION INC**EIN:** 06-1514980

<b>Category/ Item</b>	<b>Listed at Cost or FMV</b>	<b>Book Value</b>	<b>End of Year Fair Market Value</b>
EXCHANGE TRADED FUNDS (EFTS)	FMV	179,778	179,778
FIXED INCOME (BONDS)	FMV	548,576	548,576
MUTUAL FUNDS	FMV	20,459	20,459

## TY 2015 Other Income Schedule

**Name:** NEWTOWN SAVINGS BANK FOUNDATION INC**EIN:** 06-1514980

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
INCOME FROM PASSTHROUGH ENTITIES	-718	-718	-718

## TY 2015 Other Increases Schedule

**Name:** NEWTOWN SAVINGS BANK FOUNDATION INC

**EIN:** 06-1514980

Description	Amount
UNREALIZED GAIN ON INVESTMENT	183,157

## TY 2015 Other Professional Fees Schedule

**Name:** NEWTOWN SAVINGS BANK FOUNDATION INC

**EIN:** 06-1514980

<b>Category</b>	<b>Amount</b>	<b>Net Investment Income</b>	<b>Adjusted Net Income</b>	<b>Disbursements for Charitable Purposes</b>
INVESTMENT ADVISORY FEES	11,801	11,801		0

## TY 2015 Taxes Schedule

**Name:** NEWTOWN SAVINGS BANK FOUNDATION INC**EIN:** 06-1514980

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FOREIGN TAXES PAID	210	210		0

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

► Attach to Form 990, 990-EZ, or 990-PF  
 ► Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at  
[www.irs.gov/form990](http://www.irs.gov/form990)

**2015****Name of the organization**

NEWTOWN SAVINGS BANK FOUNDATION INC

**Employer identification number**

06-1514980

**Organization type (check one)****Filers of:****Section:**

Form 990 or 990-EZ

501(c)( ) (enter number) organization  
 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation  
 527 political organization

Form 990-PF

501(c)(3) exempt private foundation  
 4947(a)(1) nonexempt charitable trust treated as a private foundation  
 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.**Note.** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions**General Rule**

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or other property) from any one contributor Complete Parts I and II See instructions for determining a contributor's total contributions

**Special Rules**

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II

For 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, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals Complete Parts I, II, and III

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 not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

**Name of organization**

NEWTOWN SAVINGS BANK FOUNDATION INC

**Employer identification number**

06-1514980

**Part I** **Contributors** (see instructions) Use duplicate copies of Part I if additional space is needed

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	NEWTOWN SAVINGS BANK 39 MAIN STREET NEWTOWN, CT 06470	\$ 100,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )

**Name of organization**

NEWTOWN SAVINGS BANK FOUNDATION INC

**Employer identification number**

06-1514980

**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
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received

**Name of organization**

NEWTOWN SAVINGS BANK FOUNDATION INC

**Employer identification number**

06-1514980

**Part III** *Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) ► \$ \_\_\_\_\_*  
 Use duplicate copies of Part III if additional space is needed

(a) No.from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of gift	Transferee's name, address, and ZIP 4
		(e) Transfer of gift	Transferee's name, address, and ZIP 4
		(e) Transfer of gift	Transferee's name, address, and ZIP 4
		(e) Transfer of gift	Transferee's name, address, and ZIP 4