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.

2949114613604

For c	alend	dar year 2017 or tax year beginning		, and end	ing		
		foundation				A Employer identification	n number
W)	BS	STER FIVE FOUNDATION, IN	IC.			04-330376	0
$\overline{}$		d street (or P O box number if mail is not delivered to street a	ddress)	F	loom/suite	B Telephone number	
1) 7	A STREET				508-438-3	<u> 555</u>
		wn, state or province, country, and ZIP or foreign pour of the country of th	ostal code			C If exemption application is	pending, check here
			Initial return of a fo	rmor public ch	arıtı.	D 1. Foreign organization	ns chack hara
G C	песк	all that apply: Initial return Final return	Amended return	officer public cir	arrey	i i i oreign organization	is, dileck field
		Address change	Name change			Foreign organizations in check here and attach of	neeting the 85% test,
H C	heck	type of organization: X Section 501(c)(3) ex			ALI	E If private foundation st	
			Other taxable private founda	ition		under section 507(b)(,
I Fa		rket value of all assets at end of year J Accounti	ng method: X Cash	Accrua	<u> </u>	F If the foundation is in	~ ~
(fr	om P	· \	her (specify)			under section 507(b)(
Ì		14,068. (Part I, colun	nn (d) must be on cash basi:	s.)			<u> </u>
Pa	rt I	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	(a) Revenue and expenses per books	(b) Net inve		(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
	_	Contributions, gifts, grants, etc., received	199,000.		_	N/A	(www.i subjectivy)
		Check If the foundation is not required to attach Sch. B					
	3	Interest on savings and temporary cash investments	15.	-	15.		STATEMENT 1
- 1	4	Dividends and interest from securities					
	-	Gross rents					
1		Net rental income or (loss)	-1				
_	6a	Net gain or (loss) from sale of assets not on line 10					
n	b	Gross seles price for all assets on line 6a	۲. ا				
evenu	7	Capital gain net income (from Part IV, line 2)	<u> </u>		0.		
ř		Net short-term capital gain AY	13/2				
	9	Income modifications Gross sales less returns					
	10a	and allowances					
		Less Cost of goods sold				<u> </u>	
		Gross profit or (loss)				-	+
		Other income	199,015.		15.		+
		Total, Add lines 1 through 11	199,013.		0.	 	0.
	13	Compensation of officers, directors, trustees, etc Other employee salaries and wages				 	
		Pension plans, employee benefits					
ຜູ		Legal fees				<u> </u>	
Sesu	b	Accounting fees >					
X	ء	Other professional fees					
e E	17	Interest					
ativ	18	Taxes					
istra	19	Depreciation and depletion					
Ë.	20	Occupancy					
Adi	21	Travel, conferences, and meetings					
2	22	Printing and publications		ļ			
5	23	Other expenses STMT 2	238.	<u> </u>	0.		238.
Operating and Administrative Expe	24	• •			•		222
je j		expenses. Add lines 13 through 23	238.	ļ	0.		238.
O	23	Contributions, gifts, grants paid	192,393.	 		 	192,393.
	26	Total expenses and disbursements.	102 521		0.		102 621
	<u> </u>	Add lines 24 and 25	192,631.	 	U.		192,631.
	l	Subtract line 26 from line 12:	6,384.	1			
		Excess of revenue over expenses and disbursements	0,304.	 	15.	 	+
		Net investment income (if negative enter -0-)		 		N/A	+
	<u> </u>	Adjusted net income (if negative, enter -0-)	<u> </u>			1 4/4	

723501 01-03-18 LHA For Paperwork Reduction Act Notice, see instructions.

For	m 99	0-PF(2017) WEBSTER FIVE FOUNDATION,	INC.	<u> </u>	3 3 0 3 7 6 0 Page 2
P	art	Balance Sheets Attached schedules and amounts in the description	Beginning of year	End of	
<u> </u>		column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	7,684.	14,068.	14,068.
	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	İ		
		disqualified persons			
	7	Other notes and loans receivable			
		Less: allowance for doubtful accounts			
s	8	Inventories for sale or use	_		
Assets	9	Prepaid expenses and deferred charges			
As	10a	Investments - U.S. and state government obligations			
		Investments - corporate stock			
	ĺ	Investments - corporate bonds			
		Investments - land, buildings, and equipment basis			
	' '	Less accumulated depreciation			
	12	Investments - mortgage loans			
	13	Investments - other			
		Land, buildings, and equipment basis			
		Less accumulated depreciation			
	15	Other assets (describe)	· · · · · · · · · · · · · · · · · · ·		
		Total assets (to be completed by all filers - see the	· · · · · · · · · · · · · · · · · · ·		
	'"	instructions. Also, see page 1, item I)	7,684.	14,068.	14,068.
	17	Accounts payable and accrued expenses	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
	18	Grants payable			
	19	Deferred revenue			
jes					
ŧ.	20	Loans from officers, directors, trustees, and other disqualified persons Mortgages and other notes payable			
Liabilities	21	Other liabilities (describe)			
	**	Other Habilities (describe			
	,,	Total liabilities (add lines 17 through 22)	0.	0.	
	23	Foundations that follow SFAS 117, check here			
ý	۱.,	and complete lines 24 through 26, and lines 30 and 31.			
nces	ł	Unrestricted			
or Fund Balan	25	Temporarily restricted			
9 9	26	Permanently restricted Foundations that do not follow SFAS 117, check here			\
Š		,			
P.		and complete lines 27 through 31.	0.	0.	
	27	Capital stock, trust principal, or current funds	0.	- 0.1	}
Assets	28	Paid-in or capital surplus, or land, bldg., and equipment fund	7,684.	14,068.	
¥	29	Retained earnings, accumulated income, endowment, or other funds	7,684.	14,068.	
Net	30	Total net assets or fund balances	7,004.	14,000.	
	١	Tabal Stabilishing and not acceptationed belonger	7,684.	14,068.	į
_] 31	Total liabilities and net assets/fund balances		14,000.	
Р	art	Analysis of Changes in Net Assets or Fund Ba	alances		
-	Tota	I not proceed on fund halanges at harmonic of year. Dort II column (a) line	30		
1		I net assets or fund balances at beginning of year - Part II, column (a), line	30		7 601
_	•	st agree with end-of-year figure reported on prior year's return)		 	7,684. 6,384.
		r amount from Part I, line 27a		2	
3		r increases not included in line 2 (itemize)			14,068.
4		lines 1, 2, and 3		4	
5		reases not included in line 2 (itemize)	olumn (h) Jana 00	5	14 068
<u>6</u> _	rota	I net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	olumni (b), line 30		14,068. Form 990-PF (2017)
					rum 330-FF (201/)

723521 01-03-18

See the Part VI instructions.

Form 990-PF (2017) WEBSTER FIVE FOUNDATION, INC. 04-33(3760		Page 4	
Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see	instru	ction	s)	
1a Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.			Ī	
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 here ► X and enter 1%			0.	
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-)			0.	
3 Add lines 1 and 2			0.	
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-			0.	
6 Credits/Payments:				
a 2017 estimated tax payments and 2016 overpayment credited to 2017 6a 1,689.				
b Exempt foreign organizations - tax withheld at source 6b 0.				
c Tax paid with application for extension of time to file (Form 8868)				
d Backup withholding erroneously withheld 0.				
7 Total credits and payments. Add lines 6a through 6d		1,6	89.	
8 Enter any penaity for underpayment of estimated tax. Check here if Form 2220 is attached 8			0.	
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed				
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		1,6	89.	
11 Enter the amount of line 10 to be: Credited to 2018 estimated tax > 500 • Refunded > 11		1,1	89.	
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		Yes	No	
any political campaign?	1a		X	
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition	1b		X	
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or				
distributed by the foundation in connection with the activities.				
c 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. ▶ \$ 0 . (2) On foundation managers. ▶ \$ 0 .			ļ	
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?	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? N/A	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:			1	
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 		Ì		
remain in the governing instrument?	6	X		
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	7	Х		
8a Enter the states to which the foundation reports or with which it is registered. See instructions.	_	- [
MA	<u> </u>	j		
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)	<u> </u>			
of each state as required by General Instruction G? If "No," attach explanation	8b	X		^
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar				
year 2017 or the tax year beginning in 2017? See the instructions for Part XIV. If "Yes," complete Part XIV	9		x	ブ
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10		X	
	orm 990	-DE	2017\	

3b

N/A

b If "Yes," did it have excess business holdings in 2017 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,

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

Form 4720, to determine if the foundation had excess business holdings in 2017.)

had not been removed from jeopardy before the first day of the tax year beginning in 2017?

during the year?

Form 990-PF (2017) WEBSTER FIVE FOUNDATION,	INC.		04-33037	60	Page 6
Part VII-B Statements Regarding Activities for Which Fo	orm 4720 May Be R	equired _{(contin}	ued)		
5a During the year, did the foundation pay or incur any amount to:				Ye	s No
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	` ''		es 🗓 No	l l	
(2) Influence the outcome of any specific public election (see section 4955); or	to carry on, directly or indire				1 1
any voter registration drive?			es X No		
(3) Provide a grant to an individual for travel, study, or other similar purposes?	•	Y(es X No		1 1
(4) Provide a grant to an organization other than a charitable, etc., organization	described in section		į.	l	1 1
4945(d)(4)(A)? See instructions		Yo	es 🗓 No		[[
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or f	or			
the prevention of cruelty to children or animals?		Ye	es X No		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	ler the exceptions described i	n Regulations	[
section 53.4945 or in a current notice regarding disaster assistance? See instru	ctions		N/A	5b	
Organizations relying on a current notice regarding disaster assistance, check h	ere		▶□ 「		
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from	om the tax because it maintai	ned		l	1 1
expenditure responsibility for the grant?	N	Γ/A □ γ _€	es 🗀 No		1
If "Yes," attach the statement required by Regulations section 53.4945-5(d).				Ì	
6a Did the foundation, during the year, receive any funds, directly or indirectly, to p	oav premiums on		į		
a personal benefit contract?			es X No	ĺ	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a po	ersonal henefit contract?	,		6b	x
If "Yes" to 6b, file Form 8870.	si sonai bononi contract.		-		+ **
7a At any time during the tax year, was the foundation a party to a prohibited tax sl	naltar transaction?		es X No		
b If "Yes," did the foundation receive any proceeds or have any net income attributed the foundation of the foundation receive any proceeds or have any net income attributed the foundation of the foundation receive any proceeds or have any net income attributed the foundation of th		''		7b	 '
Part VIII Information About Officers, Directors, Truste		agers Highly	11/13	/ U	
Paid Employees, and Contractors	co, i oundation mai	agers, mgmy			
1 List all officers, directors, trustees, and foundation managers and th	eir compensation.				
		(c) Compensation	(d) Contributions to	(e) E	xpense
(a) Name and address	(b) Title, and average hours per week devoted	(If not paid,	(d) Contributions to employee benefit plans and deferred	accou	xpense nt, other
	to position	`enter '-0-)	compensation	allov	vances
SEE STATEMENT 3		0.	ا م		^
SEE STATEMENT 3		 	0.		<u> 0 </u>
		1			
	_				
 					
2 Compensation of five highest-paid employees (other than those incl		enter "NONE."	(d) Contributions to		
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) E: accour	xpense nt, other
	devoted to position	(0)	compensation		vances
NONE					
					
		<u> </u>			
		<u> </u>			
Total number of other employees paid over \$50,000		•			0
			Form	990-PI	F (2017)

Form 990-PF (2017) WEBSTER FIVE FOUNDATION, INC.		303760	Page 7
Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)	on Managers, Highly		_
3 Five highest-paid independent contractors for professional services. If none, enter "	NONE."		
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Comp	ensation
NONE			
	1		
	1		
	L		
Total number of others receiving over \$50,000 for professional services		>	0
Part IX:A Summary of Direct Charitable Activities			
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistic		Expenses	
number of organizations and other beneficiaries served, conferences convened, research papers produc	ed, etc.		
1 NONE			
			_
	_		0.
2			
	. ,		
	_		
3			
· · · · · · · · · · · · · · · · · · ·	-		
Part IX-B. Summary of Program-Related Investments			
Describe the two largest program-related investments made by the foundation during the tax year on lin	es 1 and 2.	Amount	
1 NONE			
			0.
2			
All other program-related investments. See instructions.			
3 NONE			
			^
Total Add lines 1 through 3			0.
TOTAL BOOTINGS LINTOHOUS	— 1		

Form 990-PF (2017) WEBSTER FIVE FOUNDATION, INC.	04-3	303760 Page 8
Part X Minimum Investment Return (All domestic foundations must complete this part	. Foreign foundations, see	nstructions.)
1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
Average monthly fair market value of securities	1 <u>a</u>	<u>0.</u> 21,686.
b Average of monthly cash balances	_ 1b	<u>21,686.</u>
c Fair market value of all other assets	1c	
d Total (add lines 1a, b, and c)	1d	21,686.
e Reduction claimed for blockage or other factors reported on lines 1a and	_	
1c (attach detailed explanation)	0.	_
2 Acquisition indebtedness applicable to line 1 assets	2	0.
3 Subtract line 2 from line 1d	3	21,686.
4 Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	325.
5 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	21,361.
6 Minimum investment return. Enter 5% of line 5	6	1,068.
Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foreign organizations, check here ▶ and do not complete this part.)	foundations and certain	
foreign organizations, check here and do not complete this part.) 1 Minimum investment return from Part X, line 6	1	1,068.
2a Tax on investment income for 2017 from Part VI, line 5		
b Income tax for 2017. (This does not include the tax from Part VI.)		
c Add lines 2a and 2b	2c	0.
3 Distributable amount before adjustments. Subtract line 2c from line 1	3	1,068.
4 Recoveries of amounts treated as qualifying distributions	4	0.
5 Add lines 3 and 4	5	1,068.
6 Deduction from distributable amount (see instructions)	6	0.
7 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	1,068.
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	<u> 192,631.</u>
b Program-related investments - total from Part IX-B	1b	
2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3 Amounts set aside for specific charitable projects that satisfy the:		
a Suitability test (prior IRS approval required)	3a	
b Cash distribution test (attach the required schedule)	3b	
4 Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4	4	192,631.
5 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
income. Enter 1% of Part I, line 27b	5	<u> </u>
6 Adjusted qualifying distributions. Subtract line 5 from line 4	6	192,631.
Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether to 4940(e) reduction of tax in those years.	the foundation qualifies for th	e section

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2016	(c) 2016	(d) 2017
Distributable amount for 2017 from Part XI, line 7				
2 Undistributed income, if any, as of the end of 2017				1,068.
a Enter amount for 2016 only				
b Total for prior years:			<u> </u>	
b votal for prior yours.		0.		
3 Excess distributions carryover, if any, to 2017:		<u></u>		
a From 2012 147,790.				ļ
b From 2013 156,038.				
c From 2014 154,191.				
d From 2015 17, 410.				
e From 2016 164,594.				
	640,023.			
f Total of lines 3a through e 4 Qualifying distributions for 2017 from	040,023.			
Part XII, line 4: ▶\$ 192,631.				
a Applied to 2016, but not more than line 2a		 	0.	
b Applied to undistributed income of prior		0		
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus	_			
(Election required - see instructions)	0.			
d Applied to 2017 distributable amount	101 562	·		1,068.
e Remaining amount distributed out of corpus	191,563.			
Excess distributions carryover applied to 2017 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:				
& Corpus Add lines 3f, 4c, and 4e Subtract line 5	831,586.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years'				
undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.;		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2016. Subtract line				
4a from line 2a. Taxable amount - see instr.				
f Undistributed income for 2017. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2018				0.
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)	0.			į
8 Excess distributions carryover from 2012				
not applied on line 5 or line 7	147,790.			
9 Excess distributions carryover to 2018.				
Subtract lines 7 and 8 from line 6a	683,796.			
10 Analysis of line 9:	003,730.	· · · · · · · · · · · · · · · · · · ·		
a Excess from 2013				
b Excess from 2014 154,191.				
c Excess from 2015 17,410.				
d Excess from 2016 164,594.				
e Excess from 2017 191,563.				
0 EXCUSS HUIL 2017 1 J I , J U J +				- 000 DF

	R FIVE FOUND		A		03760 Page 10
Part XIV			A, question 9)	N/A	
1 a If the foundation has received a ruling					
foundation, and the ruling is effective f			▶└┈		
b Check box to indicate whether the four		ng foundation described in		4942(j)(3) or 49	942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year	(b) 2016	Prior 3 years	1 (4) 0044	4.5
income from Part I or the minimum	(à) 2017	(0) 2010	(c) 2015	(d) 2014	(e) Total
investment return from Part X for					/
each year listed				 	
b 85% of line 2a				 	
c Qualifying distributions from Part XII,					
line 4 for each year listed				 	<u> </u>
d Amounts included in line 2c not					
used directly for active conduct of exempt activities					
e Qualifying distributions made directly				 	
for active conduct of exempt activities.		Ì			
Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the					
alternative test relied upon: a "Assets" alternative test - enter:					
(1) Value of all assets			,		
(2) Value of assets qualifying					
under section 4942(j)(3)(B)(i)				`\	
b "Endowment" alternative test - enter 2/3 of minimum investment return					
shown in Part X, line 6 for each year					
listed			<u> </u>		
c "Support" alternative test - enter: (1) Total support other, than gross					
investment income (interest,					
dividends, rents, payments on					
securities loans (section 5 <u>1</u> 2(ā)(5)), or royalties)					
(2) Support from general public					
and 5 or more exempt					
organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from					
an exempt organization					
(4) Gross investment income					
Part XV Supplementary Info	ormation (Comple	te this part only if	the foundation	had \$5,000 or mor	e in assets
at any time during	the year-see instr	uctions.)			
1 Information Regarding Foundati	on Managers:				
a List any managers of the foundation w	ho have contributed more	than 2% of the total contr	butions received by the	foundation before the close	e of any tax
year (but only if they have contributed	more than \$5,000). (See s	ection 507(d)(2).)			
NONE		·			
b List any managers of the foundation w			or an equally large porti	on of the ownership of a pa	rtnership or
other entity) of which the foundation h	as a 10% or greater interes	st.			
NONE					
2 Information Regarding Contribu					
Check here if the foundation the foundation makes gifts, grants, etc.					ests for funds. If
	<u> </u>				
a The name, address, and telephone nur	nber or email address of th	ie person to whom applica	ations should be addres	sed:	
SEE STATEMENT 4					
b The form in which applications should	be submitted and informa	tion and materials they sh	ould include:		
Any submission deadliness			·		
c Any submission deadlines:					
d Any restrictions or limitations on awar	ds, such as by geographic	al areas, charitable fields,	kınds of institutions, or	other factors:	
					
723601 01-03-18					Earm 990-PF (2017)

Grants and Contributions Paid During the		Payment	· · · · · · · · · · · · · · · · · · ·	
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year				
E ATTACHED	NOT RELATED	PC	EXEMPT PURPOSE	
ON REQUEST		 		192,3
			-	
Total			► 3a	192,3
Approved for future payment				
RCESTER COMMUNITY ACTION COUNCIL	NOT RELATED	₽C	EXEMPT PURPOSE	
4 MAIN STREET				
RCESTER, MA 01608				12,5
IENDS OF THE CHESTER C. CORBIN	NOT RELATED	PC	EXEMPT PURPOSE	
BRARY	NOT NUMBER			
0 MAIN STREET				
BSTER, MA 01570				135,0
		1		
IENDS OF OXFORD DOG PARK	NOT RELATED	PC	EXEMPT PURPOSE	
O BOX 142				
FORD , MA 01537		<u> </u>		1,0
Total SEE C	ONTINUATION SHEE	T(\$)	> 3b	151,0

Part XVI-A	Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.	Unrelated	Unrelated business income		ded by section 512, 513, or 514	(e)	
	(a) Business	(b)	(c)	(d)	Related or exempt	
1 Program service revenue:	Business	Amount	sion	Amount	function income	
-	1 3334		_			
-	-		_			
d	-					
d	-		+			
g Fees and contracts from government agencies	-					
2 Membership dues and assessments						
3 Interest on savings and temporary cash						
investments			14	15.		
4 Dividends and interest from securities						
5 Net rental income or (loss) from real estate:						
a Debt-financed property						
b Not debt-financed property			_			
6 Net rental income or (loss) from personal						
property	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		1			
7 Other investment income						
8 Gain or (loss) from sales of assets other			+			
than inventory						
9 Net income or (loss) from special events			_			
10 Gross profit or (loss) from sales of inventory			\top			
11 Other revenue:						
·	l l			ļ		
a						
C	1					
d			_			
e	-					
12 Subtotal. Add columns (b), (d), and (e)	-	0	7.	15.	0.	
13 Total. Add line 12, columns (b), (d), and (e)	<u> </u>			13	15.	
(See worksheet in line 13 instructions to verify calculations.)						

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

No.	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes).						
-							
\dashv							
-							
_							
\dashv							
\dashv							

723621 01-03-18

Form 990-PF (ER FIVE F		ION , INC . nd Transactions an	d Relationsh		03760	Pa	age 13
St. and a secretary	Exempt Organ		51010 to u.		- 1.0.0.0	po with recitoric	-iiiabio		
1 Did the o	organization directly or indi	rectly engage in any	of the followin	g with any other organization	n described in sect	tion 501(c)		Yes	No
(other th	an section 501(c)(3) organ	nizations) or in sectio	n 527, relatıng	to political organizations?					
a Transfer	s from the reporting found	ation to a noncharitat	ole exempt org	janization of:					
(1) Cas	h						1a(1)		Х
• •	er assets						1a(2)	- STATE OF THE PARTY OF THE PAR	X
	insactions:								
	es of assets to a noncharita						<u>1b(1)</u>		X
	chases of assets from a no	•	rganization				1b(2)		X
	tal of facilities, equipment,						1b(3)		X
	nbursement arrangements						1b(4)		X
	ns or loan guarantees	mharahin ar fundrais	ana colicitatio	00			1b(5)		X
	formance of services or me of facilities, equipment, ma	•	-				1b(6)		X
				dule. Column (b) should alw	rave show the fair	market value of the good		atc	
				ed less than fair market value				013,	
	(d) the value of the goods,				,	and the second s	,		
(a) Line no	(b) Amount involved			exempt organization	(d) Description	n of transfers, transactions, a	nd sharing arra	ıngemen	ıts
			N/A						
					ļ				
					<u> </u>				
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	· · · · · · · · · · · · · · · · · ·	 			- 	· · · · · · · · · · · · · · · · · · ·			
					 				
		<u> </u>			 				
					<u> </u>				
2a Is the fo	undation directly or indirec	tly affiliated with, or i	related to, one	or more tax-exempt organiz	ations described				
ın sectio	n 501(c) (other than sectio	on 501(c)(3)) or in se	ction 527?				Yes	X	No
b If "Yes,"	complete the following sch	nedule.							
	(a) Name of or	ganization		(b) Type of organization		(c) Description of relation	nship		
	N/A								
									
Unde	er penalties of periury. I declare	that I have examined this	return, includina	accompanying schedules and sta	tements, and to the be	est of my knowledge			_
				taxpayer) is based on all informati			May the IRS d	prepare	r
Here	$\sim 2h_{-}$			15/15/2018	Trea	swer	shown below?	See inst	No
c Su	gnature of officer or trustee	9		Date	Title		163		, .40
	Print/Type preparer's na	ame	Prep arer's s		Date	Check if PTI	N		
	MICHAEL J.	ROWE,	1 12.	/ / O n	2/28/18	self- employed			
Paid	CPA		1 miles	In 9. Reve	2/20/10	P	00535	<u> 331</u>	
Preparer Use Only	111111011111111111111111111111111111111	F & COMPA	NY, P.	С.		Firm's EIN ► 04-	26898	33	
•									

Phone no. 617-439-9700

Firm's address ▶ 99 HIGH STREET, 21ST FLOOR BOSTON, MA 02110

3 Grants and Contributions Approved for Fu	ture Payment (Continuation)			
Recipient	If recipient is an individual,	Foundation	Purpose of great or	
Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	status of recipient	Purpose of grant or contribution	Amount
	or substantial contributor	Tecipient	 	
EWISH FAMILY & CHILDREN'S SERVICE 430 MAIN STREET	NOT RELATED	₽C	EXEMPT PURPOSE	
ALTHAM, MA 02451		,		2,5
				l
-				-
		ļ		
				<u> </u>
		1		
			 	
Total from continuation sheets				2,5

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

► Attach to Form 990, Form 990-EZ, or Form 990-PF. ► Go to www.irs.gov/Form990 for the latest information. OMB No 1545-0047

Schedule B (Form 990, 990-EZ, or 990-PF) (2017)

Name of the organization	on	Employer Identification number	
	04-3303760		
Organization type (chec	k 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	X 501(c)(3) exempt private foundation		
	4947(a)(1) nonexempt charitable trust treated as a private foundation		
	501(c)(3) taxable private foundation		
, ,	on is covered by the General Rule or a Special Rule. (c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special F	lule. See instructions	
	tion filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totalions one contributor. Complete Parts I and II. See instructions for determining a contributor.	· · · · · · · · · · · · · · · · · · ·	
Special Rules			
sections 509(a) any one contrib	tion described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support (1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a utor, during the year, total contributions of the greater of {1) \$5,000, or {2} 2% of the ame EZ, line 1. Complete Parts I and II	a, or 16b, and that received from	
year, total cont	tion described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from the state of the section of the	, ,	
year, contribute is checked, ent purpose. Don't	tion described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from the section of t	more than \$1,000 If this box ous, charitable, etc ,	
but it must answer "No"	n that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its et the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).	•	

LHA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

Name of organization

Employer identification number

WEBSTER	FIVE	FOUNDATION,	TNC
MEDSIE	LTAT	LOOMDELLON,	TIAC

WEBST:	ER FIVE FOUNDATION, INC.	04	1-3303760
Partul	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	WEBSTER FIVE CENTS SAVINGS BANK 136 THOMPSON RD WEBSTER, MA 01570	\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) <u>No.</u>	(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 Oncash Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Omnocash 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 Oncash Complete Part II for noncash contributions.)

Employer identification number

WEBSTER FIVE FOUNDATION. INC

04-3303760

Part II	Noncash Property (see instructions) Use duplicate copies of Part II if a	idditional space is needed.	3303700
(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
		\$	200 57 200 55 (2047)

723454 11-01-17

Transferee's name, address, and ZIP + 4

(e) Transfer of gift

Relationship of transferor to transferee

FORM 990-PF INTEREST ON SAVI	NGS AND TEM	PORARY C	CASH I	INVESTMENTS	STATEMENT 1
SOURCE	(A REVE) PER B	NUE		(B) INVESTMENT INCOME	(C) ADJUSTED NET INCOME
INTEREST		15.		15.	
TOTAL TO PART I, LINE 3		15.		15.	
FORM 990-PF	OTHER E	XPENSES			STATEMENT 2
FORM 990-PF DESCRIPTION	OTHER E	(B)	/EST-	(C) ADJUSTED NET INCOM	(D) CHARITABLE
DESCRIPTION MA STATE FILING FEES	(A) EXPENSES	(B) NET INV	/EST-	ADJUSTED NET INCOM	(D) CHARITABLE
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INV MENT IN	VEST- NCOME	ADJUSTED NET INCOM	(D) CHARITABLE E PURPOSES

FORM 990-PF PART VIII - LIST TRUSTEES AND	PART VIII - LIST OF OFFICERS, DIRECTORS TRUSTEES AND FOUNDATION MANAGERS			
NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN-	EMPLOYEE BEN PLAN CONTRIB	
DAVID S BAYER 10 A STREET AUBURN, MA 01501-2102	DIRECTOR (ENDED	10/31/2017	0.	0.
MAURA E ANIELLO 10 A STREET AUBURN, MA 01501-2102	DIRECTOR 1.00	0.	0.	0.
BENJAMIN A CRAVER 10 A STREET AUBURN, MA 01501-2102	CLERK/DIRECTOR 1.00	0.	0.	0.
DAVID S BAYER II 10 A STREET AUBURN, MA 01501-2102	DIRECTOR (AS OF 1.00	11/6/2017)	0.	0.
SAM BITAR 10 A STREET AUBURN, MA 01501-2102	TREASURER/ EXEC	DIRECTOR 0.	0.	0.
DON DOYLE 10 A STREET AUBURN 01501-2102	PRESIDENT/DIREC	TOR 0.	0.	0.
TOTALS INCLUDED ON 990-PF, PAGE 6,	PART VIII	0.	0.	0.

FORM 990-PF

GRANT APPLICATION SUBMISSION INFORMATION PART XV, LINES 2A THROUGH 2D

STATEMENT 4

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

SAM BITAR 10 A STREET AUBURN, MA 01501-2102

TELEPHONE NUMBER

508-438-3503

FORM AND CONTENT OF APPLICATIONS

APPLICATIONS AVAILABLE AT ABOVE ADDRESS

ANY SUBMISSION DEADLINES

SEE APPLICATIONS FOR VARIOUS DEADLINES

RESTRICTIONS AND LIMITATIONS ON AWARDS

THE WEBSTER FIVE FOUNDATION RESTRICTS ITS AWARDS TO ORGANIZATIONS THAT MEET ELIGIBILITY GUIDELINES AS SET FORTH IN THE APPLICATION PACKAGE. A SUMMARY OF THOSE GUIDELINES IS ATTACHED.

GENERAL EXPLANATION

STATEMENT 5

FORM/LINE IDENTIFIER AND DESCRIPTION/RETURN REFERENCE

990-PF PART XV - RESTRICTIONS OR LIMITATIONS ON AWARDS

EXPLANATION:

THE FOUNDATION RESTRICTS ITS AWARDS TO ORGANIZATIONS THAT MEET ELIGIBILITY GUIDELINES AS SET FORTH IN THE APPLICATION PACKAGE. A SUMMARY OF THOSE GUIDELINES ARE AS FOLLOWS:

ELIGIBILITY:

THE WEBSTER FIVE FOUNDATION, INC. PROVIDES CHARITABLE CONTRIBUTIONS ONLY TO NOT-FOR-PROFIT, TAX-EXEMPT IRC SECTION 501(C) (3) ORGANIZATIONS.

RESTRICTIONS:

- THE FOUNDATION WILL CONSIDER A REQUEST FROM ORGANIZATIONS THAT ARE BASED IN OR WILL DIRECTLY BENEFIT THE WEBSTER FIVE'S DELINEATED COMMUNITY, IN AMOUNTS RANGING FROM \$1,000 TO \$15,000.
- THE FOUNDATION WILL SUPPORT ORGANIZATIONS INVOLVED IN: YOUTH SERVICES, SENIOR SERVICES, HEALTH AND SOCIAL SERVICES.
- THE FOUNDATION WILL CONSIDER THE FOLLOWING TYPES OF SUPPORT: ANNUAL CAMPAIGNS, PROGRAM DEVELOPMENT, AND EMERGENCY FUNDS.

THE FOUNDATION WILL NOT SUPPORT:

INDIVIDUALS, POLITICAL ORGANIZATIONS/CANDIDATES, CHURCHES, SYNAGOGUES OR MOSQUES, FRATERNAL ORGANIZATIONS, EMPLOYMENT UNIONS OR TAX SUPPORTED ENTITIES. EXCEPTIONS TO THE TAX-SUPPORTED ENTITY EXCLUSION WILL BE CONSIDERED FOR LIBRARY CAPITAL CAMPAIGNS THAT ARE SUPPORTED BY A PRIVATE FUNDING PROGRAM.

THE FOUNDATION DISCOURAGES REPEAT REQUESTS FOR FUNDING FOR THE SAME PROGRAM/PROJECT. A REPEAT REQUEST FOR FUNDING SHOULD BE WELL DOCUMENTED. UNUSUAL OR EMERGENCY CIRCUMSTANCES WILL BE CONSIDERED ON A CASE-BY-CASE BASIS.