

Form **990-PF**

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.

▶ Go to www.irs.gov/Form990PF for instructions and the latest information.

ror	calendar y	ear 2017 or tax year beginning		, and ending		
	me of found				A Employer identification	number
		ate Savings Charita	ple		80-0038576	
_		et (or P O box number if mail is not delivered to stre	et address)	Room/suite	B Telephone number	
		nklin Street		1100,1100,110	(508) 890-	9078
		state or province, country, and ZIP or foreign	nostal code		C if exemption application is p	
		ster, MA 01608	poora. 0000		a moximpuon application to p	oriding, oriosik riche
	Check all th	· _	Initial return of a fo	ormer public charity	D 1. Foreign organizations	s, check here
		Final return	Amended return			
		Address change	Name change		Foreign organizations me check here and attach co	eting the 85% test, imputation
H	Check type	of organization: X Section 501(c)(3)	exempt private foundation	9 V	E If private foundation sta	tus was terminated
	Section 4	4947(a)(1) nonexempt charitable trust	Other taxable private founda	ation /	under section 507(b)(1)	(A), check here
I F	aır market v	ralue of all assets at end of year J Accour	nting method: X Cash	Accrual /	F If the foundation is in a	60-month termination
		col. (c), line 16)	Other (specify)	, ,	under section 507(b)(1)	(B), check here
	<u>\$</u>		umn (d) must be on cash basi	s.)		
Р	(The	Ilysis of Revenue and Expenses total of amounts in columns (b), (c), and (d) may not assarily equal the amounts in column (a))	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
	1 Cont	ributions, gifts, grants, etc., received	20,900.		N/A	
2	2 Check	if the foundation is not required to attach Sch. B				
フ	3 intere	st on savings and temporary	311.	311.		Statement 1
_	1	ends and interest from securities				
l	5a Gros	s rents				
1	b) Net re	ental income or (loss)				
Ι.,	6a Net ga	ain or (loss) from sale of assets not on line 10				
Ž	b Gross	sales price for all s on line 6a				
Revenue	7 Capita	al gain net income (from Part IV, line 2)		0.		
•	8 Nets	hort-term capital gain			REC	EIVED
	I	ne modifications sales less returns				00
	10a and al	llowances			- 181 MAY (2 2018 3
		Cost of goods sold			ISI MAY	
		s profit or (loss)				FNI III
	11 Other		21,211.	311.	OGU	FN. UI
_		1. Add lines 1 through 11 pensation of officers, directors, trustees, etc	0.	0.		0.
		r employee salaries and wages	0.			
		ion plans, employee benefits				
S						
Denses	b Acco	unting fees Stmt 2	900.	540.	· · · · · · · · · · · · · · · · · · ·	360.
Š	c Other	r professional fees				
Š	17 Interd					
rati:	18 Taxes	s				
ist	19 Depr	eciation and depletion				
Ē	20 Occu	pancy				
ĕ	21 Trave	el, conferences, and meetings				
and	22 Print	ing and publications				
0	23 Other	r expenses Stmt 3	35.	0.		35.
rati	24 Total	l operating and administrative]	
Operating and Administrative Ex	expe	nses. Add lines 13 through 23	935.	540.		395.
_	25 Conti	ributions, gifts, grants paid	24,100.			24,100.
		l expenses and disbursements.	25 025	E 4 0	1	24 405
_		lines 24 and 25	25,035.	540.		24,495.
		ract line 26 from line 12;	<3,824.	Ļ		
		s of revenue over expenses and disbursements nvestment income (if negative, enter -0-)	73,024.	0.	 	
		sted net income (if negative, enter -0-)			N/A	
	_ v ∧uju	otou not illuvillo (il negative, enter -u-)				

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

Part	Balance Sheets Attached schedules and amounts in the description	Beginning of year	End o	f year
ran	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
1	Cash - non-interest-bearing	1,004.	169.	169.
2	Savings and temporary cash investments	87,720.	84,731.	84,731.
3	Accounts receivable			
	Less; allowance for doubtful accounts			
4	Pledges receivable			
- 1	Less; allowance for doubtful accounts			
5				
6	Receivables due from officers, directors, trustees, and other			
	disqualified persons			
7	Other notes and loans receivable		-	
	Less; allowance for doubtful accounts			
ಕ್ಷ 8				
Assets				
10	a Investments - U.S. and state government obligations			
	b Investments - corporate stock			
- 1	c Investments - corporate bonds			
11	Investments - land, buildings, and equipment basis			-
	Less accumulated depreciation			
	Investments - mortgage loans			
13				
14	Land, buildings, and equipment; basis			
	Less accumulated depreciation			
	Other assets (describe ►)			
16	Total assets (to be completed by all filers - see the	22 524	0.4.000	04 000
	instructions. Also, see page 1, item I)	88,724.	84,900.	84,900.
	Accounts payable and accrued expenses			
18				
ဖ္တ 19				
≝ 20				
Liabilities 02 21 22 22 22 22 22 22 22 22 22 22 22 22	. ,			
_ 22	Other liabilities (describe			
	Tabel Mak Make (add Lang 47 Marcals 90)	0.	^	
23	Total liabilities (add lines 17 through 22)		0.	
-	Foundations that follow SFAS 117, check here			
စ္က	and complete lines 24 through 26, and lines 30 and 31.			
S 24 25	· · · · · · · · · · · · · · · · · · ·			
	,			
<u> </u>	Permanently restricted Foundations that do not follow SFAS 117, check here			
5	·		Ì	
5 5	and complete lines 27 through 31.	0.	0.	
S 27	Capital stock, trust principal, or current funds	- 0.	0.	
98 28 88 30		88,724.	84,900.	
Net Assets or Fund Ba 26 2 2 2 3 0 3 0		88,724.	84,900.	
¥ 30	Total net assets of fund datances	00,724.	04,300.	
01	Total liabilities and net assets/fund balances	88,724.	84,900.	
			04,500.	
Part	Analysis of Changes in Net Assets or Fund B	alances		
1 Tota	al net assets or fund balances at beginning of year - Part II, column (a), line			
	st agree with end-of-year figure reported on prior year's return)		11	88,724.
•	er amount from Part I, line 27a		2	<3,824.
	er increases not included in line 2 (itemize)		3	75,024.
	lines 1, 2, and 3		4	84,900.
	reases not included in line 2 (itemize)		5	0.
	al net assets or fund balances at end of year (line 4 minus line 5) - Part II. co	lumn (h) line 20		84.900.

Part IV Capital Gains a	and Losses for 1	Tax on Investmen	t Income									
(a) List and describe the kind(s) of property sold (for example, real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)					(c) Date a (mo., d		(d) Date sold (mo., day, yr.)					
a				 	0.101.01.							
b NOI	NE											
C												
d												
<u>e</u>				L								
(e) Gross sales price	(f) Depreciation al (or allowable		st or other basis expense of sale				ain or (loss) s (f) minus (
<u>a</u>												
b c												
<u>d</u>												
е												
Complete only for assets showin	g gain in column (h) an	d owned by the foundation	n on 12/31/69.	_	(1	Gains (C	ol. (h) gain	minus				
(i) FMV as of 12/31/69	(j) Adjusted ba as of 12/31/6		xcess of col. (I) r col. (j), if any			(k), but r	not less than (from col. (1 -0-) or				
a												
b												
C												
d												
e				_								
Capital gain net income or (net ca	A -	ın, also enter ın Part I, line ss), enter -0- ın Part I, line		}	2							
Net short-term capital gain or (los	s) as defined in section:	s 1222(5) and (6):				-						
If gain, also enter in Part I, line 8,		, , , ,										
If (loss), enter -0- in Part I, line 8 Part V Qualification U	nder Section 40	MAN for Beduce	Tay on Net	Joyos	tmönt Inc	ome						
For optional use by domestic private												
or optional use by domestic private	Tourioations subject to	the section 4340(a) tax of	i net mvestment m	come.)								
f section 4940(d)(2) applies, leave th	us part blank.											
Vas the foundation liable for the sect	ion 4942 tax on the dist	ributable amount of any y	ear in the base per	iod?				Yes X No				
f "Yes," the foundation_doesn't qualify												
Enter the appropriate amount in e	ach column for each ye	ar; see the instructions be	fore making any e	ntries.								
(a) Base period years	A d	(b)	No.	(c)			Distrib	(d) ution ratio				
Calendar year (or tax year beginnin	ig in) Adjusted q	ualifying distributions	Net value of no	ncharita			(col. (b) dıv	ided by col. (c))				
2016		24,944.			84,983			.29351				
2015		27,679.			93,950		 	.29461				
2014	— 	29,068. 18,035.	<u> </u>		93,249.				116,039.			.31172
2013 2012		25,554.			36,839			.18674				
2012			<u> </u>		.30,033	+ -		*10074				
Total of line 1, column (d)						2		1.24202				
Average distribution ratio for the 5	5-year base period - divi	de the total on line 2 by 5.	O, or by the numbe	er of yea	rs	-						
the foundation has been in existen	ice if less than 5 years	•		•		3		.24840				
Enter the net value of noncharitable	le-use assets for 2017 f	rom Part X, line 5				4		81,223				
						1 1						
Multiply line 4 by line 3						5		20,176				
								0				
Enter 1% of net investment incom	ie (1% of Part I, line 27b))				6		0				
Add lines 5 and 6						,		20,176				
Add lines 5 and 6						7		20,176				
Enter qualifying distributions from	Part XII, line 4					8		24,495				
If line 8 is equal to or greater than See the Part VI instructions.	line 7, check the box in	Part VI, line 1b, and comp	plete that part usin	g a 1% t	ax rate.							

723521 01-03-18

Bay State Savings Charitable Form 990-PF (2017) Foundation, Inc.

Part			Ю(e), or 4	948 - se	ee instru	oito	ns)
1a Ex	empt operating foundations described in section 4940(d)(2), check here 🕨 🔛 and er	nter "N/A" on line 1.					
Da	te of ruling or determination letter: (attach copy of letter if nec	essary-see instructions	;)				
b Do	mestic foundations that meet the section 4940(e) requirements in Part V, check here	X and enter 1%)	1			0.
of	Part I, line 27b		h l				-
c All	other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4%	of Part I, line 12, col. (b). J				-
2 Tax	x under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; otl	hers, enter -0-)		2			0.
3 Ad	d lines 1 and 2			3			0.
4 Su	btitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; of	thers, enter -0-)		4			0.
5 Ta	x based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-			5			0.
6 Cre	edits/Payments:						
a 20	17 estimated tax payments and 2016 overpayment credited to 2017	6a	0.				
b Exe	empt foreign organizations - tax withheld at source	6b	0.				
c Tax	x paid with application for extension of time to file (Form 8868)	6c	0.				
d Ba	ckup withholding erroneously withheld	6d	0.				
7 To	tal credits and payments. Add lines 6a through 6d			7			0.
8 Ent	ter any penalty for underpayment of estimated tax. Check here 🔲 if Form 2220 is attac	ched		8			0.
9 Ta	x due. If the total of lines 5 and 8 is more than line 7, enter amount owed		•	9			0.
10 Ov	rerpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		▶	10			
_11_Ent	ter the amount of line 10 to be: Credited to 2018 estimated tax	R	efunded 🕨	11			
Part	VII-A Statements Regarding Activities						
1a Du	ring the tax year, did the foundation attempt to influence any national, state, or local legisl	lation or did it participati	or intervene	ın		Yes	No
any	y political campaign?				1a		X
b Dic	d it spend more than \$100 during the year (either directly or indirectly) for political purpos	es? See the instructions	s for the defin	ition	1b		X
If t	he answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies o	f any materials publishe	d or				
dıs	stributed by the foundation in connection with the activities.					ļ '	ļ
c Did	the foundation file Form 1120-POL for this year?				1c		X
d Ent	ter 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.				
e Ent	ter the reimbursement (if any) paid by the foundation during the year for political expendit	ture tax imposed on fou	ndation				
ma	anagers. ▶ \$ 0 •						
2 Has	s the foundation engaged in any activities that have not previously been reported to the IR	IS?			2		_X
If "	Yes," attach a detailed description of the activities.						
3 Has	s the foundation made any changes, not previously reported to the IRS, in its governing ir	nstrument, articles of inc	corporation, o	r	1		1
byl	laws, or other similar instruments? If "Yes," attach a conformed copy of the changes				3	- 1	X
4a Did	t the foundation have unrelated business gross income of \$1,000 or more during the year	7			4a		X
b if "	Yes," has it filed a tax return on Form 990-T for this year?			N/A	4b		
5 Wa	as 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	e the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied eit	ther:					
• E	By language in the governing instrument, or						
• E	By state legislation that effectively amends the governing instrument so that no mandatory	directions that conflict	with the state	law			
ren	nain in the governing instrument?				6	Х	
7 Did	the foundation have at least \$5,000 in assets at any time during the year? If "Yes," compl	lete Part II, col. (c), and	Part XV		7	X	
8a Ent	ter the states to which the foundation reports or with which it is registered. See instruction	ns. >					
M	AI				_		İ
b If ti	he answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the At	torney General (or desig	nate)		_		
of e	each state as required by General Instruction G? If "No," attach explanation				8b	Х	
9 ls t	the foundation claiming status as a private operating foundation within the meaning of sec	ction 4942(j)(3) or 4942	(j)(5) for calei	ndar			
yea	ar 2017 or the tax year beginning in 2017? See the instructions for Part XIV. If "Yes," comp	plete Part XIV			9		X
10 Did	t any persons become substantial contributors during the tax year? If "Yes," attach a schedul	e listing their names and ad	dresses		10		X
					Form 990)-PF	(2017)

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Part VII-A Statements Regarding Activities (continued)			
11. At any time during the year did the foundation, directly or indirectly, own a controlled earth, within the meaning of	-	Yes	No
11 At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions	11		х
12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?	 ''		 -
If "Yes," attach statement. See instructions	12	,	х
13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	 ^
Website address www.baystatesavingsbank.com	[13]		
14 The books are in care of ► Cheri E. Carty Telephone no. ► (508)	890	<u>- an</u>	78
Located at > 28 Franklin Street, Worcester, MA ZIP+4 >0	1608	70	,,,
15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here	1000		1 1
	N	/A	ـــا
and enter the amount of tax-exempt interest received or accrued during the year 16 At any time during calendar year 2017, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
securities, or other financial account in a foreign country?	16	163	X
·	-"		 ^
See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the	ŀ		
Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required			<u> </u>
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):	 	163	140
(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	1 1		
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)	\ \		
a disqualified person?			
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No	t l		ł
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	1 1		
(4) Pay compensation to, or pay or reinhouse the expenses of, a disqualified person? (5) Transfer any income or assets to a disqualified person (or make any of either available	1 1)
for the benefit or use of a disqualified person)?	1 1		1
,)		
(6) Agree to pay money or property to a government official? (Exception. Check "No"	, ,		
if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.) Yes X No			1
	[]		l
b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions N/A	1		-
. 🗖	16		
trigamment to your post of the second months of the	1 1		
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	1 4-1	-	χ̄
before the first day of the tax year beginning in 2017? Taxes on failure to distribute income (coston 4942) (does not apply for years the faundation was a private operation foundation.	10		
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 2017, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning	[
before 2017? Light Street and the end of tax year 2017, did the foundation have any undistributed income (lines od and 6e, Part XIII) for tax year(s) degining Yes X No			
	1 1		
If "Yes," list the years b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect	1 1		
	1 1	1	l
valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement - see instructions.) N/A	2b	-	
,	20		
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	1 1	1	
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time	1 1	ŀ	,
during the year? Yes X No		i	
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	1	ĺ	
of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,	1	}	
Form 4720, to determine if the foundation had excess business holdings in 2017.) N/A	3b		v
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		Х
		í	
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 2017?	46	ļ	X

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Part VII-B Statements Regarding Activities for Which	Form 4720 May Be I	Required (contin	ued)				
5a During the year, did the foundation pay or incur any amount to:				Yes	No		
(1) Carry on propaganda, or otherwise attempt to influence legislation (section)	on 4945(e))?	Y	es 🗶 No				
Influence the outcome of any specific public election (see section 4955);	or to carry on, directly or indir	,					
any voter registration drive?			es X No				
(3) Provide a grant to an individual for travel, study, or other similar purpose		Y	es X No				
(4) Provide a grant to an organization other than a charitable, etc., organization described in section							
4945(d)(4)(A)? See instructions							
(5) Provide for any purpose other than religious, charitable, scientific, literar	y, or educational purposes, or						
the prevention of cruelty to children or animals?			es 🗶 No		Ì		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify u		ın Regulations			ļ		
section 53.4945 or in a current notice regarding disaster assistance? See ins			N/A	5b	—		
Organizations relying on a current notice regarding disaster assistance, check	· · · · · ·						
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption							
expenditure responsibility for the grant?	T.	1/A Y	es L 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	o pay premiums on		□		1		
a personal benefit contract?		Y	es X No		\ v		
b Did the foundation, during the year, pay premiums, directly or indirectly, on a if "Yes" to 6b, file Form 8870.	personal benefit contract?		<u> </u>	6b	X		
•			ਢਾ				
7a At any time during the tax year, was the foundation a party to a prohibited tax		¥(es X No	71	├		
b If "Yes," did the foundation receive any proceeds or have any net income attril Part VIII Information About Officers, Directors, Trus		nogoro Highl	N/A	7b			
Paid Employees, and Contractors	stees, roundation wa	magers, migni	y				
1 List all officers, directors, trustees, and foundation managers and	their compensation.						
		(c) Compensation	(d) Contributions to	(e) Exp	ense		
(a) Name and address	(b) Title, and average hours per week devoted to position	(If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred	(e) Exp account allowa	, other		
	to position	onto o y	compensation	unoma			
	7			ľ			
See Statement 4	7	0.	0.		0.		
				 			
	7						
		1					
	7						
2 Compensation of five highest-paid employees (other than those in	cluded on line 1). If none,	enter "NONE."					
(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 compensation	(e) Exp account,	ense		
(a) Name and address of each employee paid more than \$60,000	devoted to position	(C) Compensation	and deterred compensation	allowa			
NONE							
				<u></u>			
		<u> </u>					
Total number of other employees paid over \$50,000					0		
	<u> </u>		Form	990-PF	(2017)		
					,		

Part VIII Information About Officers, Directors, Trustees, Foundation Manager Paid Employees, and Contractors (continued)	gers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter "NONE."		
	(b) Type of service	(c) Compensation
NONE	(=/_//	
		İ
Total number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities		▶ 0
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information	such as the	Expenses
number of organizations and other beneficiaries served, conferences convened, research papers produced, etc. N/A		LAPENSES
147.11		
2		
3		
4		
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2. 1 NONE		Amount
		0.
2		
All other program-related investments. See instructions.		
3 NONE		
		_
Total. Add lines 1 through 3	•	0.
1930, 100 miles 1 till 90011 9		Form 990-PF (2017)

Part X Minimum Investment Return (All domestic foundations must complete this p	part. Foreign foundations, see	e instructions.)
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	1a	82,460.
b Average of monthly cash balances	1b	82,460.
c Fair market value of all other assets	1c	
d Total (add lines 1a, b, and c)	1d	82,460.
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	82,460.
4 Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	1,237.
5 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	81,223.
6 Minimum investment return. Enter 5% of line 5	6	4,061.
Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operat foreign organizations, check here and do not complete this part.)	ing foundations and certain	
1 Minimum investment return from Part X, line 6	11	4,061.
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	4,061.
4 Recoveries of amounts treated as qualifying distributions	4	0.
5 Add lines 3 and 4	5	4,061.
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	4,061.
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	24,495
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)	l 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	24,495.
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	0.
6 Adjusted qualifying distributions. Subtract line 5 from line 4	6	24,495.
Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether 4940(e) reduction of tax in those years.		

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2016	(c) 2016	(d) 2017
1 Distributable amount for 2017 from Part XI,			 	
line 7	[4,061.
2 Undistributed income, if any, as of the end of 2017				
a Enter amount for 2016 only			0.	
b Total for prior years:		•		
,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,	\	0.		
3 Excess distributions carryover, if any, to 2017:				
a From 2012 b From 2013 12,243.	}			
c From 2014 24, 414.				
dFrom 2015 22,981.				r
e From 2016 20,695.				
f Total of lines 3a through e	99,063.			
4 Qualifying distributions for 2017 from				:
Part XII, line 4: ▶\$ 24,495.				
a Applied to 2016, but not more than line 2a			0.	
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2017 distributable amount				4,061.
e Remaining amount distributed out of corpus	20,434.			
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:				
8 Corpus Add lines 3f, 4c, and 4e Subtract line 5	119,497.			
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	ĺ			
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		Į.	0	
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2017. Subtract				
lines 4d and 5 from line 1. This amount must	İ	I		0.
be distributed in 2018 7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election		ļ		
'may be required - see instructions)	0.			
8 Excess distributions carryover from 2012				
not applied on line 5 or line 7	18,730.			
9 Excess distributions carryover to 2018.			·	
Subtract lines 7 and 8 from line 6a	100,767.			
10 Analysis of line 9;				
a Excess from 2013 12,243.	-			
b Excess from 2014 24,414.				
c Excess from 2015 22,981.	[
d Excess from 2016 20,695.	ĺ			
e Excess from 2017 20,434.	<u> </u>			5 - 000 PF (0047)

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Bay State Savings Charitable Form 990-PF (2017) Foundation, Inc. 80-0038576 Page 10 Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9) N/A 1 a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2017, enter the date of the ruling 4942(1)(5) b Check box to indicate whether the foundation is a private operating foundation described in section 4942(j)(3) or Tax year Prior 3 years 2 a Enter the lesser of the adjusted net (a) 2017 (b) 2016 (c) 2015 (d) 2014 (e) Total income from Part I or the minimum 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 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. Subtract line 2d from line 2c 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 c "Support" alternative test - enter: (1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(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 Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year-see instructions.) 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).) None 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. None 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., to individuals or organizations under other conditions, complete items 2a, b, c, and d. a The name, address, and telephone number or email address of the person to whom applications should be addressed: Cheri E. Carty, 508-890-9078 Bay State Savings Bank, 28 Franklin Street, Worcester, MA 01608 b The form in which applications should be submitted and information and materials they should include: See Statement 5 c Any submission deadlines; See Statement 5 d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors: See Statement 5

Part XV Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, show any relationship to Foundation Purpose of grant or Amount any foundation manager status of contribution Name and address (home or business) or substantial contributor recipient a Paid during the year African Community Education Program, N/A ÞС General Operating Inc. Support 484 Main Street, STE 355 Worcester, MA 01608 2,000. Dismas House of Massachusetts, Inc. N/A ÞС General Operating P.O. Box 30125 Support Worcester, MA 01603-0125 2,000. N/A Genesis Club House, Inc. ÞС General Operating 274 Lincoln Street Support Worcester, MA 01605-2106 2,000. Jeremiah's Inn, Inc. N/A ÞС General Operating P.O. Box 30035 Support Worcester, MA 01603-0035 2,000. Jewish Federation of Central N/A General Operating ₽C Massachusetts, Inc. Support 633 Salisbury Street Worcester, MA 01609-1120 2,000. See continuation sheet(s) ▶ 3a 24,100. **b** Approved for future payment None Total

	-		
Part XVI-A	Analysis of Income-Pro	ducing Activities	

	T Haralatad				
Enter gross amounts unless otherwise indicated.	(a) Business	(b) Amount	(C) Exclu- sion	(d) Amount	(e) Related or exempt function income
1 Program service revenue:	code	Amount	code	Amount	
a	-		+		
b	-		+		
C	.				
d	-				
e	-				
f			\bot		
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments			14	311.	
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 1				
7 Other investment income					
8 Gain or (loss) from sales of assets other					
than inventory					
9 Net income or (loss) from special events					<u>, </u>
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:	 				
a					
b			++		
C	·		++		
d	·				
е	·		-		
12 Subtotal. Add columns (b), (d), and (e)	·) 	311.	0.
13 Total. Add line 12, columns (b), (d), and (e)	L		<u> </u>	13	311.
(See worksheet in line 13 instructions to verify calculations.)				···	<u></u>
	 			<u> </u>	
Part XVI-B Relationship of Activities	to the Accor	nplishment of	Exempt F	Purposes	
Line No. Explain below how each activity for which income	ome is reported in	solumn (a) of Dart VI	I A contributo	d importantly to the secon	nlichment of
Abore the state of				a importantly to the accom	pusinnent of
the foundation's exempt purposes (other than	- by providing rand				
				_	
					
					
		·		_ 	
		 -	_		
			_		
		<u> </u>			
			·		
	<u> </u>				

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Part XVII	Information Re Exempt Organ		rs to a	nd Transactions a	and Relationsh	nips With Nonc	haritable	
1 Did the or			e followin	g with any other organizati	ion described in secti	on 501(c)		Yes No
	-			g to political organizations?		011 00 1(0)		
•	•	ation to a noncharitable e		• •				
(1) Cash	and reporting reality		, o p : O	gu			1a(1)	x
(2) Other	assets						1a(2)	X
b Other tran								
(1) Sales	of assets to a noncharita	ble exempt organization					1b(1)	X
		ncharitable exempt organ	iization				1b(2)	X
(3) Renta	al of facilities, equipment,	or other assets					1b(3)	X
(4) Reim	bursement arrangements	3					1b(4)	X
(5) Loan:	s or loan guarantees						1b(5)	X
(6) Perfo	rmance of services or me	embership or fundraising :	solicitatio	ns			1b(6)	X
•		uling lists, other assets, or	•	, ,			1c	X
			-	dule. Column (b) should a	•			ets,
				ed less than fair market val	lue in any transaction	or sharing arrangeme	nt, show in	
	(b) Amount involved	other assets, or services i		e exempt organization				
(a)Line no	(b) Amount involved	<u> </u>	N/A	e exempt organization	(u) Description	of transfers, transactions,	and snaring arra	Ingements
			N/A		 -			
					 -			
		 						
		 						
								
_								
								
	·							
						·		
	•	•	•	or more tax-exempt organ	izations described		<u> —</u>	□
	, , ,	on 501(c)(3)) or in section	1 5277				Yes	X No
_ b If "Yes," co	omplete the following sch (a) Name of org			(b) Type of organization	т	(c) Description of relat	ionehin	
	N/A	<u></u>		(b) Type of organization	 -	(c) Description of relat	ionamp	
					 	-		
					 	·····		
					 			
_					 			
				ng accompanying schedules an			May the IHS d	iscuss this
Sign and be	elief, it is true, correct, and cor	mplete Declaration of preparer	r (other tha	n taxpayer) is based on all infor	mation of which preparer	has any knowledge	return with the shown below?	preparer
Here	Mesi	P Cook		14-26-18	Trea	surer	X Yes	☐ No
Sigr	nature of officer or trustee	- Court		Date	Title			
	Print/Type preparer's na	ame Pre	parer's s	ignature	Date		TIN	
			/	// \	1	self- employed		
Paid	Nicholas E			100	04/23/18		P01310	
Preparer	Firm's name ► BAK	ER NEWMAN &	NOY	ES		Firm's EIN ► 01	-04945	26
Use Only	F				<u>, — </u>	<u> </u>		
				T, SUITE 970	J	100	7\ EEC	2000
	BO	STON, MA 02	TIO			Phone no. (61	7) 556	- 3900 - PF (2017)
							FORM SIGNI	ェデモ (ソロコノ)

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

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

► Attach to Form 990, Form 990-EZ, or Form 990-PF.
Go to www.irs.gov/Form990 for the latest information.

Bay State Savings Charitable

OMB No 1545-0047

2017

Employer identification number

Foundation, Inc. 80-0038576 Organization type (check one). Filers of: Section: Form 990 or 990-EZ J 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 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. Don't 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 isn't covered by the General Rule and/or the Special Rules doesn't 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 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2017)

Name of organization

Bay State Savings Charitable

Foundation Inc.

Employer identification number

80-0038576

round	ation, inc.		1-00385/6			
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	Bay State Savings Bank 28 Franklin Street Worcester, MA 01606	\$\$	Person X Payroll			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
			Person Payroll Noncash (Complete Part II for noncash contributions.)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
		 \$	Person Payroll Noncash (Complete Part II for noncash contributions)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
723452 11-0	1-17	Schedule B (Form	Person Payroll Noncash (Complete Part II for noncash contributions) 990, 990-EZ, or 990-PF) (2017)			

Name of organization

Employer identification number

Bay State Savings Charitable Foundation, Inc.

80-0038576

Part II Noncash Property (see instructions) Use duplicate copies of Part II if additional space is needed (a) No. (d) FMV (or estimate) from Description of noncash property given Date received (See instructions.) Part i (a) (c) No. (d) FMV (or estimate) from Description of noncash property given Date received (See instructions.) Part I (a) (c) No. (d) (b) FMV (or estimate) from Description of noncash property given Date received (See instructions.) Part I (a) (c) No. (b) (b) FMV (or estimate) from Date received Description of noncash property given (See instructions.) Part i (a) (c) No. (d) (b) FMV (or estimate) from Description of noncash property given **Date received** (See instructions.) Part I (a) (c) No. (b) (d) FMV (or estimate) from Description of noncash property given **Date received** (See instructions.) Part I Schedule B (Form 990, 990-EZ, or 990-PF) (2017) 723453 11-01-17

Form 990-PF Interest on Savi	ngs and Tem	porary Cash	Investments	Statement 1	
Source	(a Reve Per B	nue Net	(b) Investment Income	(c) Adjusted Net Income	
Interest		311.			
Total to Part I, line 3					
Form 990-PF	Accounti	ng Fees		Statement 2	
Description	(a) Expenses Per Books	(b) Net Invest ment Incom			
Accounting Fees	900.	54	0.	360.	
To Form 990-PF, Pg 1, ln 16b	900.	54	0.	360.	
Form 990-PF	Other E	xpenses		Statement 3	
Description	(a) Expenses Per Books	(b) Net Invest ment Incom	-		
State Fees	35.		0.		
To Form 990-PF, Pg 1, ln 23	35.		0.	35.	
					

	Part VIII - List of Officers, Directors Trustees and Foundation Managers			Statement 4	
Name and Address	Title and Avrg Hrs/Wk	Compen- sation	Employee Ben Plan Contrib		
Jay Z. Aframe 28 Franklin Street Worcester, MA 01608	Director 1.00	0.	0.	0.	
John E. Graham 28 Franklin Street Worcester, MA 01608	Director 1.00	0.	0.	0.	
Lisa Piehler 28 Franklin Street Worcester, MA 01608	Director 1.00	0.	0.	0.	
George F. Sullivan, Jr. 28 Franklin Street Worcester, MA 01608	Director 1.00	0.	0.	0.	
Peter B. Alden 28 Franklin Street Worcester, MA 01608	President 1.00	0.	0.	0.	
Cheri E. Carty 28 Franklin Street Worcester, MA 01608	Treasurer 1.00	0.	0.	0.	
Diane Giampa 28 Franklin Street Worcester, MA 01608	Clerk 1.00	0.	0.	0.	
Totals included on 990-PF,	Page 6, Part VIII	0.	0.	0.	