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

	Ford	alen	ndar year 2019 or tax year beginning		, and ending		
	Nan	ne of	foundation		A Employer identification	n number	
	Ţ	ho	maston Savings Bank Fou	06-1483909	)		
	Nun	iber a	ind street (or P.O. box number if mail is not delivered to stree		Room/suite	B Telephone number	
			. Box 907			860-283-43	
			own, state or province, country, and ZIP or foreign $_{ m I}$ maston , ${ m CT}$ 06787	postal code		C If exemption application is p	ending, check here
			all that apply: Initial return	Initial return of a fo	ormer public charity	D 1. Foreign organization	s, check here
			Final return	Amended return		2 Foreign organizations me	eeting the 85% test
			Address change	Name change		2. Foreign organizations me check here and attach co	omputation
	H' C	_	type of organization. X Section 501(c)(3) e		D4	E If private foundation sta	
03	<u> </u>		ction 4947(a)(1) nonexempt charitable trust	Other taxable private found		under section 507(b)(1	
			· 1 —	ting method. X Cash	Accrual	F If the foundation is in a	
24	(II		Part II, col. (c), line 16)	Other (specify) mn (d) must be on cash bas	ıs )	under section 507(b)(1	)(b), check here
		rt.		(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements
	*1 %	ii eşt	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) )	expenses per books	income	income	for charitable purposes (cash basis only)
		1	Contributions, gifts, grants, etc., received	100,000.		N/A	
		2	Check If the foundation is not required to attach Sch. B				4.73588845 14548
		3	Interest on savings and temporary cash investments	680.	680	•	Statement 1
(PA		4	Dividends and interest from securities	194,296.	194,296	•	Statement 2
SCANNED OCT		5a	Gross rents				
<b>2</b>		b	Net rental income or (loss)				<del>LINEGALIA</del>
Ź	a	6a	Net gain or (loss) from sale of assets not on line 10	146,875.			ACTACH COLOR
m	Revenue	b	Gross sales price for all assets on line 6a 1,240,479.				
ب		7	Capital gain net income (from Part IV, fine 2)		146,875	YAWA S	1 5 2020
<b>]</b>		8	Net short-term capital gain			<u> </u>	
		9	Income modifications Gross sales less returns				JENSONA AND
€		_	and allowances	7-21-30 (1994)			
<b>©</b>			Less Cost of goods sold  Gross profit or (loss)		<u>vaanna jamaan kantana.</u> Kora-oraan kantan l	TO DESCRIBE ASSESSMENT OF THE SECOND	E IN CONTRACTOR AND
202			Other income		4000 Natività (Alegania, cario)		
83			Total. Add lines 1 through 11	441,851.	341,851		
2 0 2020 Batching Ogden	_	13	Compensation of officers, directors, trustees, etc	0.	0		0.
₹ <b>3</b>		14	Other employee salaries and wages				•
-6₹	·	15	Pension plans, employee benefits				
de di	enses	16a	Legal fees Stmt 3	6,000.	3,000		3,000.
3	Φ	b	Accounting fees Stmt 4	3,000.	1,500	•	1,500.
>	Exp	C	Other professional fees				
S S	tive	17	Interest	10 751			
~	štra	18	Taxes Stmt 5	10,751.	0	•	0.
<b>6</b> 2	, ii	19	Depreciation and depletion				Particular de la Control de la
AUG 2 6 2020	Administrative	20 21	Occupancy Travel, conferences, and meetings	4,991.	0		4,991.
-	and A	22	Printing and publications	=,,,,,1.		+	1,,,,,
	gar	23	Other expenses Stmt 6	3,424.	0		3,424.
	Operating		Total operating and administrative	5,221			† · · · · · · · · · · · · · · · · · · ·
	Jera		expenses. Add lines 13 through 23	28,166.	4,500		12,915.
	ŏ	25	Contributions, gifts, grants paid	623,485.			623,485.
			Total expenses and disbursements.	-			
			Add lines 24 and 25	651,651.	4,500	<u>.                                    </u>	636,400.
		27	Subtract line 26 from line 12		2000	T 12/262	440 6 640
		а	Excess of revenue over expenses and disbursements	-209,800.	W. J. Wall		2004 Sec. 20
			Net investment income (if negative, enter -0-)		337,351		
	1	C	Adjusted net income (if negative, enter -0-)		374 X P 2 2 3 4 3 4 3 4 3 4 3 4 3 4 3 4 3 4 3 4	⊗ N/A	

923501 12-17-19 LHA For Paperwork Reduction Act Notice, see instructions.

Form **990-PF** (2019)

Thomaston Savings Bank Foundation, Inc.

1	مر ۾ نيڊو وٽ	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	Lna Ena	of year
Ę	<u>ant,</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	23,999.	47,379	47,379.
	l	Savings and temporary cash investments	13,797.	155,444	
		Accounts receivable	The second second		20-22-3
	ľ	Less: allowance for doubtful accounts			<u>/</u>
	4		5.890.43 - 100.00 - 1		70.9
	"	Pledges receivable			
	۔ ا	Less: allowance for doubtful accounts			
	į.	Grants receivable			<del> </del>
	6	Receivables due from officers, directors, trustees, and other	,		
	_	disqualified persons	A COMPANY OF THE COURSE STATE OF THE PARTY OF	CANAGE AT N. A SEPTEMBER 222 TO DESCRIBE A SERVICE AND	
	7	Other notes and loans receivable			
		Less: allowance for doubtful accounts	<del>                                     </del>		
sts	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
⋖	10a	Investments - U.S. and state government obligations			
	b	Investments - corporate stock			
	C	Investments - corporate bonds			
	11	Investments - land, buildings, and equipment basis			
		Less accumulated depreciation			
	12	Investments - mortgage loans	<u>-</u>		
	13	Investments - other Stmt 8	7,315,487.	8,157,469	8,157,469.
	14	Land, buildings, and equipment; basis			CAR CASE TRANS
		Less accumulated depreciation			
	15	Other assets (describe >			
		Total assets (to be completed by all filers - see the		-	
	'	instructions. Also, see page 1, item I)	7,353,283.	8,360,292	8,360,292.
_	17	Accounts payable and accrued expenses	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
	18	Grants payable			
"	19	Deferred revenue	-		
Liabilities	20			<del></del>	7286 - 328 - 464 1758
喜		Loans from officers, directors, trustees, and other disqualified persons  Mortgages and other notes payable			
Ë	21				\$264.1.1.00475.5 - XXXVII.1.11
	22	Other liabilities (describe)			1225;
	١.,	T. 18 188 (111 478 100)	0.	0	
_	23	Total liabilities (add lines 17 through 22)	U •	<u> </u>	• ####################################
		Foundations that follow FASB ASC 958, check here			
Balances		and complete lines 24, 25, 29, and 30.			
au	24	Net assets without donor restrictions			Trans.
Bal	25	Net assets with donor restrictions			
<u>p</u>		Foundations that do not follow FASB ASC 958, check here			
歪.		and complete lines 26 through 30.			
Net Assets or Fund	26	Capital stock, trust principal, or current funds	7,353,283.	8,360,292	•
ets	27	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0	
\ss	28	Retained earnings, accumulated income, endowment, or other funds	0.	0	
et/	29	Total net assets or fund balances	7,353,283.	8,360,292	
Ž					3,000
	30	Total liabilities and net assets/fund balances	7,353,283.	8,360,292	
	**************************************	Analysis of Changes in Net Assets or Fund E			
£ 1%	art)	Allalysis of Changes in Net Assets of Fund i	Dalatices		
1	Total	net assets or fund balances at beginning of year - Part II, column (a), line	29		
	(mus	st agree with end-of-year figure reported on prior year's return)		1	7,353,283.
2	Enter	amount from Part I, line 27a		2	
		r increases not included in line 2 (itemize)	See St	atement 7 3	1,216,809.
		lines 1, 2, and 3		4	0 0 6 0 0 0 0
		eases not included in line 2 (itemize)		5	
		net assets or fund balances at end of year (line 4 minus line 5) - Part II. c	olumn (b) line 29		8,360,292.

orm 990-PF (2019) Tho:	maston	Savings Ba	ank For	undation	,	Inc	•	0 (	6-148:	3909	Page 3
Part IV Capital Gains	and Losse	s for Tax on In	vestment	Income							
(a) List and describe	the kind(s) of p	roperty sold (for exam	ple, real estat	e,	(0)1	low ac - Purch - Dona	quired (	c) Date a (mo., da	cquired	( <b>d</b> ) Dat (mo., d	
	renouse; or co	mmon stock, 200 shs.	MLC Co.)		D	- Dona	tion	(1110., 40	ay, yı.)	(1110., 0	ay, yı.,
<u>a</u>	G. L.			<u>.</u>							
See Attached	Statem	ent			_						
<u> </u>					-						
<u> </u>		·			_			-			
e	(f) Doorg	ciation allowed	(a) Cos	t or other basis	<u> </u>		<b>.</b>	/h) G:	ain or (loss)		
(e) Gross sales price	. , ,	allowable)		xpense of sale			(		(f) minus (	g))	
a		,		·				· · · · · · · · · · · · · · · · · · ·			
<u>b</u>					$\dashv$		_				
<u> </u>								•			
d											
e 1,240,479.				1,093,60	4.					146	,875.
Complete only for assets showing	ig gain in colun	in (h) and owned by the					(1) (	Sains (C	ol. (h) gain	minus	·
(i) FMV as of 12/31/69	(j) Ad	justed basis f 12/31/69	(k) Ex	cess of col (ı) col. (ı), ıf any			còl. (	k), but n Losses	ot less than (from col. (f	1-0-) <b>or</b>	
a					寸						
b					_						
C					一						
d					T		, ,				
е										146	,875.
		∫ If gain, also enter	ın Part I. line	7	٦		-				
Capital gain net income or (net ca	ipital loss)	If (loss), enter -0-	in Part I, line	7	<i>}</i>	2				146	<u>,875.</u>
Net short-term capital gain or (los	ss) as defined in	•					-				
If gain, also enter in Part I, line 8,		1 0001.0110 1222(0) 0.11	. (o).		)						
If (loss), enter -0- in Part I, line 8						3			N/A		
Part V   Qualification U	Inder Sect	ion 4940(e) for	Reduced	Tax on Net	Inv	estm	ent Inco	me			
For optional use by domestic private	e foundations s	ubject to the section 4	940(a) tax on	net investment in	come	<del>?</del> )					
section 4940(d)(2) applies, leave the	hie nart hlank										
section 4540(u)(2) applies, leave it	ilis part blank.									_	
Vas the foundation liable for the sec				-	lods					Yes	X No
"Yes," the foundation doesn't qualif	•								-		
Enter the appropriate amount in	each column fo	r each year; see the in	structions be	ore making any e	ntries	i.		<del></del>		78\	
(a) Base period years	.   ,	(b)	ributions	Net value of no	(c)		uca accate			(d) ution ratio	<i>(.</i> 1)
Calendar year (or tax year beginni	ng in) A	djusted qualifying dist		Net value of flo				ļ	(col. (b) dıv		
2018			9,153.	<del></del>			9,547.	ļ			79557
2017			1,624.	<u> </u>			5,036.	ļ			87128
2016			0,223.				4,123.	ļ			04051
2015			8,349.				3,604.	-			89071 10831
2014		5 / :	9,231.			, 44	6,260.	<del>                                     </del>		• 1	10021
										1	70638
Total of line 1, column (d)				<b>. .</b>	<b>.</b> .			2		• 4	70030
Average distribution ratio for the			n line 2 by 5.0	), or by the numb	er or y	years		ا ۾ ا		0	94128
the foundation has been in existe	nce if less than	5 years						3		• 0	34120
		00407 D- 137 1						١. ١		0 127	,810.
Enter the net value of noncharitat	ole-use assets t	or 2019 from Part X, I	ine 5					4		0,131	, 610.
M. Walalan Ababas O								,		765	,996.
Multiply line 4 by line 3								5		705	, 330 .
Enter 10/ of not investment incom	no (10/ of Dort	Line 97h)						6		3	,374.
Enter 1% of net investment incon	ne (1% of Part	i, iiile 270)							-		, 3 / = •
Add lines F and C								7		760	,370.
Add lines 5 and 6								$\vdash \vdash \vdash$		- , , ,	, 5 / 0 •
Enter qualifican distributions for	n Dart VII. line	1						8		636	,400.
Enter qualifying distributions from			at - 1	lata de la la		n/ +-		ـــــ			, 200 •
If line 8 is equal to or greater than See the Part VI instructions.	n line 7, check t	ne box in Part VI, line	io, and comp	iete that part usin	g a 1	% tax r	ate.				
		-								orm QQA	<b>PF</b> (2019
23521 12-17-19									Г	JJJ-	(2013

923521 12-17-19

Form	990-PF (2019) Thomaston Savings Bank Foundation,			1483909		4
Pa	TLVI Excise Tax Based on Investment Income (Section 4940(a), 494	l0(b), 4940(e), or	4948 ·	- see instr	uctions)	
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" or	n line 1.				
	Date of ruling or determination letter (attach copy of letter if necessary-see	instructions)				71) V
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here and		1		6,747	•
	of Part I, line 27b		PD:			
С	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of Part I, li	ine 12, col. (b)				
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter		2		0	•
	Add lines 1 and 2	•	3		6,747	-
	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter	-0-)	4		0	_
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-	- /	5		6,747	-
6	Credits/Payments:			V 200	7.7	31
	2019 estimated tax payments and 2018 overpayment credited to 2019 6a	8,320				
	Exempt foreign organizations - tax withheld at source 6b	~ 0.				A
	Tax paid with application for extension of time to file (Form 8868)  6c	0 .				
	Backup withholding erroneously withheld 6d	0 .				
	Total credits and payments. Add lines 6a through 6d	<del>-</del>	7	189 at A	8,320	22
	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached		8		0	
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		9			÷
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		10		1,573	_
	· ·	, 573 . Refunded	11	· · · · · · · · · · · · · · · · · · ·	0	
	rt VII-A Statements Regarding Activities	, 5 / 5 *   Reluitueu	, ''			÷
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did	t it narticinate or intenien	e in	81.35	Yes No	_
··u	any political campaign?	The paracipant of intervent		1a	X	_
ь.	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the	e instructions for the defi	nıtınn	1b	X	
U	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any mater		1111011	Carr	7333 FF88	223
	distributed by the foundation in connection with the activities.	iais published of				
	Did the foundation file Form 1120-POL for this year?			1c	X	لعت
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			\ \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	7.3.2 178	Ĭ
u	(1) On the foundation. ► \$ 0. (2) On foundation managers ► \$	0 .		7.7		
	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imp		-			1
C	managers > \$ 0.	70580 OH 100H0309H		ç ,	Minut T. Million	
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?			2	X	ك
2	If "Yes," attach a detailed description of the activities.			1 * 1	Y 15.11	:8
2		articles of incorporation	or	g* (* )		. 4
v	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument,	articles of incorporation,	VI	3	ւ մասիսանական վտացին՝ <b>X</b>	
4.	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			4a	X	
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		N	/A 4b	<del>    ^</del>	-
	If "Yes," has it filed a tax return on Form 990-T for this year?		14	7 5	<del>    x</del>	_
0	Was there a liquidation, termination, dissolution, or substantial contraction during the year?  If "Yes," attach the statement required by General Instruction T			25.59	102-500 1000	<b>7</b>
6						
0	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either.	Y		Anothics		
	By language in the governing instrument, or      By total legislation that office well amond the governing instrument on that no mandatory directions	that conflict with the state	o law	i di		3
	By state legislation that effectively amends the governing instrument so that no mandatory directions     and the source of	tilat collingt with the sta	e law	6	X	52
-	remain in the governing instrument?	and (a) and Dark VII		7	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		87.5%		172
0.	Fater the atotal to which the favordation around assembly which it is received. Considerations			5 4 5 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
ва	Enter the states to which the foundation reports or with which it is registered. See instructions.			- Internation		
	CT  If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney Gen	unral (or deciments)				N
D	· · · · · · · · · · · · · · · · · · ·	ierai (or designate)		SE-1	X	2
_	of each state as required by General Instruction G? If "No," attach explanation	(3/0) 4040(3/5) 4 1	d	8b	1	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(		enuar	2550		
40	year 2019 or the tax year beginning in 2019? See the instructions for Part XIV. If "Yes," complete Part X			9	X X	
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their	r names and addresses		10	┸	

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Page 5

Thomaston Savings Bank Foundation, Inc.

Pа	int VII: Al Statements Regarding Activities (continued)			
			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		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
	Website address ▶ www.thomastonsavingsbank.com			
14	The books are in care of ▶ Rebekah Stokes  Telephone no. ▶ 860-2	33-1	874	
	Located at ▶ 203 Main Street, Thomaston, CT ZIP+4 ▶0	5787		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here		<b></b>	
	and enter the amount of tax-exempt interest received or accrued during the year	N	/A	
16	At any time during calendar year 2019, 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		Х
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the	8,455		
	foreign country			
Pε	art 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):	1000 1000 1000 1000 1000 1000 1000 100		
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	138A		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)	100		
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	10.5		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(5) Transfer any income or assets to a disqualified person (or make any of either available	19.33 A		
	for the benefit or use of a disqualified person)?		9	
	(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	31,1		
	termination of government service, if terminating within 90 days.)	1. 12.18		\$ 19 mg
	o 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	100		23000 230000
•	section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions  N/A	1b	236.2622	ش <b>ىنگ</b> ىندىكى.
	Organizations relying on a current notice regarding disaster assistance, check here	ESSE		
,	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected		7	
٠	before the first day of the tax year beginning in 2019?	1c	2000000	X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation	Q:: 122	9773A	25 Tu A
2	defined in section 4942(j)(3) or 4942(j)(5)):	13.7%		美统油
	a At the end of tax year 2019, did the foundation have any undistributed income (Part XIII, lines	2.5.77		
٠			; <b>3</b>	
	If "Yes," list the years , , , , , , , , , , , , , , , , , , ,			
	o Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect			
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement - see instructions ) N/A	2b		311123
	,	20	975B#6	24277
C	: If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
_	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
38				
t	b if "Yes," did it have excess business holdings in 2019 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			1.2
	of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Form 4720,	<b>10</b>		fizat.
	Schedule C, to determine if the foundation had excess business holdings in 2019.)  N/A	3b	<u> </u>	17
	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	**egestot	X
t	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that	20.00	20	
	had not been removed from jeopardy before the first day of the tax year beginning in 2019?	4b		X

Form 990-PF (2019) Thomaston Savings Bank F	oundation, In		06-14839	09 Page <b>6</b>
Part VIEB   Statements Regarding Activities for Which F	orm 4/20 May Be F	<b>Requirea</b> (contin	ued)	
<ul> <li>5a During the year, did the foundation pay or incur any amount to:</li> <li>(1) Carry on propaganda, or otherwise attempt to influence legislation (section</li> <li>(2) Influence the outcome of any specific public election (see section 4955); or</li> </ul>			es X No	Yes No
any voter registration drive? (3) Provide a grant to an individual for travel, study, or other similar purposes?	,	Ye	es X No es X No	
<ul> <li>(4) Provide a grant to an organization other than a charitable, etc., organization 4945(d)(4)(A)? See instructions</li> <li>(5) Provide for any purpose other than religious, charitable, scientific, literary,</li> </ul>			es X No	
the prevention of cruelty to children or animals?  b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify unc	er the exceptions described i	Y	es X No	
section 53 4945 or in a current notice regarding disaster assistance? See instru			N/A	5b       
Organizations relying on a current notice regarding disaster assistance, check he c. If the answer is "Yos" to question 5a(1), does the foundation claim exemption frexpenditure responsibility for the grant?  If "Yes," attach the statement required by Regulations section 53.4945-5(d).	om the tax bocause it mainta	incd I/A Yo	es No	
6a Did the foundation, during the year, receive any funds, directly or indirectly, to a personal benefit contract?		Y	es X No	
<ul> <li>b Did the foundation, during the year, pay premiums, directly or indirectly, on a p</li> <li>If "Yes" to 6b, file Form 8870.</li> <li>7a At any time during the tax year, was the foundation a party to a prohibited tax s</li> </ul>		. <b>\</b>	V Na	6b X
b If "Yes," did the foundation receive any proceeds or have any net income attribu				7b
8 Is the foundation subject to the section 4960 tax on payment(s) of more than \$		r		Link resident inches
excess parachute payment(s) during the year?	,,		es 🗶 No	
Part VIII Information About Officers, Directors, Trusto Paid Employees, and Contractors	ees, Foundation Ma	nagers, Highl	у	
1 List all officers, directors, trustees, and foundation managers and t	neir 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, other allowances
See Statement 9		0.	0.	0.
			`	
2 Compensation of five highest-paid employees (other than those inc	luded 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 devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				

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

Form 990-PF (2019) Thomaston Savings Bank Foundation	n, Inc.		<u>83909</u> Р	age 7
Part VIII Information About Officers, Directors, Trustees, Foundate Paid Employees, and Contractors (continued)	tion Managers	, Highly		
3 Five highest-paid independent contractors for professional services. If none, enter	"NONE."	= <del></del>		
(a) Name and address of each person paid more than \$50,000	(b) <sup>T</sup> )	pe of service	(c) Compens	sation
NONE				
		<del></del>	<del></del>	
	-			
Total number of others receiving over \$50,000 for professional services	_l		<b>&gt;</b>	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 number of organizations and other beneficiaries served, conferences convened, research papers produced.		as the	Expenses	
1 N/A				
2	<del></del>			
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 I $N/A$	lines 1 and 2.		Amnunt ———	
I N/A				
2		· · · - · · · · · · · · · · · · · · · ·	<del></del>	
All other program-related investments. See instructions			<u> </u>	
3				
Total. Add lines 1 through 3	·····	<b>•</b>		0.

Form 990-PF (2019) Thomaston Savings Bank Foundation, Inc. 06-1483909 Page 8 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: 8,109,905. a Average monthly fair market value of securities 1a 151,831. 1b b Average of monthly cash balances 1c c Fair market value of all other assets 1d 8,261,736. d Total (add lines 1a, b, and c) e Reduction claimed for blockage or other factors reported on lines 1a and 0 1c (attach detailed explanation) 1e 2 2 Acquisition indebtedness applicable to line 1 assets 8,261,736. 3 Subtract line 2 from line 1d 123,926. Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) 4 8,137,810. 5 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 406,891. Minimum investment return. Enter 5% of line 5 | Part XI | Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain and do not complete this part.) foreign organizations, check here 406,891. Minimum investment return from Part X, line 6 6,747 2a Tax on investment income for 2019 from Part VI, line 5 2a b Income tax for 2019. (This does not include the tax from Part VI.) 2b 6,747 2c c Add lines 2a and 2b 400.144. 3 3 Distributable amount before adjustments. Subtract line 2c from line 1 4 Recoveries of amounts treated as qualifying distributions 400,144. 5 Add lines 3 and 4 6 Λ. 6 Deduction from distributable amount (see instructions) 400,144. Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1. Part XII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: 636,400. a Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26 1a 16 b Program-related investments - total from Part IX-B Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes 2 Amounts set aside for specific charitable projects that satisfy the. 3a a Suitability test (prior IRS approval required) 3Ь b Cash distribution test (attach the required schedule) 636,400. 4 Qualifying distributions Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4

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

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment

income. Enter 1% of Part I, line 27b

Adjusted qualifying distributions. Subtract line 5 from line 4

4940(e) reduction of tax in those years.

Form **990-PF** (2019)

636,400.

5

6

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2018	(c) 2018	(d) 2019
1 Distributable amount for 2019 from Part XI,				
line 7				400,144.
2 Undistributed income, if any, as of the end of 2019				l
a Enter amount for 2018 only			0.	
b Total for prior years:				
,,		0.		
3 Excess distributions carryover, if any, to 2019:				
a From 2014 324,270.				
b From 2015 208, 419.				
c From 2016 297, 023.				
d From 2017 262, 246.				
e From 2018 249,487.	4 244 445			
f Total of lines 3a through e	1,341,445.			
4 Qualifying distributions for 2019 from				į į
Part XII, line 4: ►\$ 636,400.			^	
a Applied to 2018, 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	0.			
(Election required - see instructions)	<u> </u>			400,144.
d Applied to 2019 distributable amount	236,256.			400,144.
e Remaining amount distributed out of corpus	230,230.			<u> </u>
5 Excess distributions carryover applied to 2019 (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:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	1,577,701.			
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 2018. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2019. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2020				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election	0			
may be required - see instructions)	0.			
8 Excess distributions carryover from 2014	224 270			
not applied on line 5 or line 7	324,270.			
9 Excess distributions carryover to 2020. Subtract lines 7 and 8 from line 6a	1,253,431.			
	1,233,431.			
10 Analysis of line 9. a Excess from 2015 208, 419.				
a Excess from 2015 b Excess from 2016 297, 023.				
c Excess from 2017 262, 246.				
d Excess from 2018 249, 487.				
e Excess from 2019 236, 256.				
				5 000 DE (0040)

		Bank Founda		06-14	83909 Page 10
Part XIV Private Operating F	oundations (see in	structions and Part VII	A, question 9)	N/A	
1 a If the foundation has received a ruling of	r determination letter tha	t it is a private operating			_
foundation, and the ruling is effective fo	r 2019, enter the date of	the ruling	▶		
b Check box to indicate whether the found	dation is a private operati	ng foundation described i	n section	4942(j)(3) or 49	42(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum	(a) 2019	(b) 2018	(c) 2017	(d) 2016	(e) Total
investment return from Part X for					
each year listed					
<b>b</b> 85% of line 2a					
c Qualifying distributions from Part XII,				/	<del>-</del>
line 4, for each year listed					
d Amounts included in line 2c not		<del>                                     </del>			
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  3 Complete 3a, b, or c for the				<del>                                     </del>	
alternative test relied upon:			<b>/</b>		
a "Assets" alternative test - enter:		/	[		
(1) Value of all assets					<del></del>
(2) Value of assets qualifying					
under section 4942(j)(3)(B)(i)  b "Endowment" alternative test - enter					<del></del>
2/3 of minimum investment return					
shown in Part X, line 6, for each year					
listed		1		<del>                                     </del>	
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	1				
and 5 or more exempt organizations as provided in					\
section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from					
an exempt organization		l			
(4) Gross investment income					
Part XV Supplementary Info	rmation (Comple	ete this part only	if the foundation	n had \$5,000 or mo	ore in assets
at any time during	the year-see inst	ructions.)			
1 Information Regarding Foundation	on Managers:				
a List any managers of the foundation wh			ributions received by the	e foundation before the clos	se of any tax
year (but only if they have contributed r	nore than \$5,000) (See s	section 507(d)(2) )			
None					
b List any managers of the foundation wh	no own 10% or more of the	ne stock of a corporation (	or an equally large port	ion of the ownership of a pa	artnership or
other entity) of which the foundation ha					
None					
2 Information Regarding Contribut	ion. Grant. Gift. Loan	. Scholarship, etc., Pr	ograms:		
_ <u>~</u> _		• • • •	•	not accept unsolicited requ	ests for funds. If
the foundation makes gifts, grants, etc.					
a The name, address, and telephone num	ber or email address of t	he person to whom applic	ations should be addres	ssed:	<del></del>
James Nichol, 860-28					
203 Main Street, Tho		06787			
b The form in which applications should t			only include.		
Written one page bud				how funds w	ill be used
c Any submission deadlines:	19007 30103	200022	<u> </u>		
June 30					
d Any restrictions or limitations on award	e cuch ac hy accorranty	al areae charitable fields	kinds of institutions or	other factors	
No	s, such as by geographic	ما ما حمی با اما المالا الحالاة ,	ninus or mismonons, or	טנווסו ומטנטוס,	
110					
923601 12-17-19	<del></del>			<del></del>	Form <b>990-PF</b> (2019)
					: : (=010)

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Part XV Supplementary Information (continued)

3 Grants and Contributions Paid During the		Payment		
Recipient Recipient	If recipient is an individual,	1	T	
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
a Paid during the year	or substantial contributor	- roo.p.o.x		
a raid during the year				
See		Various	Detail Attached	
Detail Schedule Attached				623,485.
Schedule Actached		<del> </del>		023,403.
		1		
		-		
		1		
Total		J	▶ 3a	623,485.
b Approved for future payment				
None				
		†		
	+			
		1		
		1	<b>▶</b> 3b	•
Total			<b>▶</b> 3b	0.

Enter gross amounts unless otherwise indicated.	Unrelated t	Unrelated business income Exclude			(e)
	(a) Business	(b)	Exclu-	(d)	Related or exempt
1 Program service revenue:	code	Amount	sion code	Amount	function income
a					
b					
c					
d					
e					
f				·	
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments			14	680.	
4 Dividends and interest from securities			14	194,296.	
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					
7 Other investment income					
8 Gain or (loss) from sales of assets other					
than inventory			14	106,128.	40,747.
9 Net income or (loss) from special events					<u> </u>
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
a					
b					<u> </u>
c					
d					
e					
12 Subtotal. Add columns (b), (d), and (e)		(	0.	301,104.	40,747.
13 Total. Add line 12, columns (b), (d), and (e)				13	341,851.
(See worksheet in line 13 instructions to verify calculation	ns.)				
Part XVI-B Relationship of Activit	ies to the Accon	plishment of	Exempt Pu	ırposes	
Line No. Explain below how each activity for whice the foundation's exempt purposes (other				importantly to the accomp	lishment of
		<u>-</u> <u>-</u>			

▼	the foundation's exempt purposes (other than by providing funds for such purposes).
- 1	· · · · · · · · · · · · · · · · · · ·
	· · <del></del>
<del></del>	

19) Thomaston Savings Bank Foundation, Inc. 06-1483909
Information Regarding Transfers to and Transactions and Relationships With Noncharitable Exempt Organizations Part XVII

1 Did the or	rganization directly or indir	rectly engage in any o	of the followin	g with any other organization	on described in secti	on 501(c)		Yes	No
(other tha	n section 501(c)(3) organ	uzations) or in section	n 527, relating	to political organizations?					
a Transfers	from the reporting founda	ation to a noncharitat	ole exempt org	janization of:					
(1) Cash	1						1a(1)		X
(2) Other	r assets						1a(2)		X
<b>b</b> Other tran	nsactions.								
(1) Sales	s of assets to a noncharital	ble exempt organızat	ion				1b(1)		<u> </u>
(2) Purc	hases of assets from a no	ncharitable exempt o	rganization				1b(2)		Х
(3) Renta	al of facilities, equipment,	or other assets					1b(3)		Х
(4) Reim	bursement arrangements						1b(4)		X
(5) Loan	s or loan guarantees								X
		•	-						X
							لتنسا		X
			_		•			ets,	
				ed less than fair market valu	ie in any transaction	or sharing arrangement, sh	ow in		
					1 (4)				
(a)Line no	(b) Amount involved	(c) Name of		e exempt organization	(0) Description	of transfers, transactions, and s	haring ari	angeme	ents
			N/A	···					
			<del></del>						
					<del></del>		<del></del>		
					<del> </del>				
		<u> </u>			<del> </del>				
		l							
			•		<del>                                     </del>	· · · · · · · · · · · · · · · · · · ·			<del></del>
			-		<del></del>		_		
					+	<u> </u>		•	
2a Is the fou	ndation directly or indirect	tly affiliated with, or r	elated to, one	or more tax-exempt organi	zations described	·- <u>-</u>			
	•	•		or more tax exempt or guin			Yes	X	□No
<u> </u>			-	(b) Type of organization	<u> </u>	(c) Description of relationsh	ıp		
		<del></del>							
								_	
Under	r penalties of perjury, I declare	that I have examined this	s return, includin	ig accompanying schedules and	statements, and to the	best of my knowledge May	the IRS	iscuss	this
	relier, it is true, correct, and cor	Tiplete Declaration of pre	eparer jourer mai	in taxpayer) is based on all tillorit		<u> </u>	<u>vn</u> below	? See in	er str
	Scotton	<u> </u>	jen	3/11/20	. <i></i>	ee LX	Yes		JNo
Sıgı				Date '	Title				
	Print/Type preparer's na	ame	Preparer's s		Date				
D=:-!				15- Z	4/24/2020	' ' 1	070	0-0	
(other than section 50 t(c)(3) organizations) or in section 527, relating to political organizations?  1 Transless from the reporting foundation to a noncharitable exempt organization of:  (1) Cash  Other transactions.  (1) Sales of assets from a noncharitable exempt organization  (2) Purchases of assets from a noncharitable exempt organization  (3) Restal of facilities, equipment, or other assets  (4) Reimbursement arrangements  (5) Loans or loan guarantees  (6) Performance of services or membership or fundraising solicitations  (7) Sales are asset to any of the above is Yes, fromplete the following schedule. Column (b) is hould always show the fair market value of the goods, other assets, or services greened by the reporting foundation. If the foundation released ests than fair market value in any transaction or sharing arrangements in the property of the properting foundation released ests than fair market value in any transaction or sharing arrangements. All the above is Yes, complete the following schedule. Column (b) the value of the goods, other assets, or services general.  (a) Isane in foundation of the properties of the goods, other assets, or services general.  (b) Amount involved (c) Market in nonchartable exempt organization (d) Description of relationship.  (c) Description of relationship.  (d) Description of relationship.  (e) Description of relationship.  (e) Description of relationship.  (e) Description of relationship.  (f) Tries to the properties and all informations of all informa									
(1) Cash (2) Other assets (3) Other tansactions. (1) Sales of assets to a noncharitable exempt organization (2) Purchases of assets from a noncharitable exempt organization (3) Rental of facilities, equipment, or other assets (4) Reimbursement arrangements (5) Loans or loan guarantees (6) Performance of services or membership or fundraising solicitations c Sharing of facilities, equipment, mailing lists, other assets, or paid employees d if the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair or services given by the reporting foundation. If the foundation received less than fair market value in any transaction column (d) the value of the goods, other assets, or services received.  (a) Line no (b) Amount involved (c) Name of noncharitable exempt organization (d) Description  N/A  2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) (other than section 501(c)(3)) or in section 52??  b If "Yes," complete the following schedule.  (a) Name of organization (b) Type of organization N/A  Sign  Under penalties of perjuny, I declare that I have examined this return, including accompanying schedules and statements, and to the support of the state of the state of perjuny, I declare that I have examined this return, including accompanying schedules and statements, and to the support of the state of the state of perjuny, I declare that I have examined this return, including accompanying schedules and statements, and to the support of the state				Firm's EIN ► 06-05	1033	<b>∠</b> 6			
Use Uniy	Firmle address > 00	O m	1 am ^	4+1 D1					
						0.00 5	, , ,	111	
	на	rciora, C	T 00T0	<u>.                                    </u>			rm <b>99</b> (		(2010)

Part IV Capital Gains and Los	sses for Tax on Investment Income				
	describe the kind(s) of property soluck warehouse; or common stock, 20		(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo , day, yr.)	(d) Date sold (mo., day, yr.)
1a JPMorgan Diver	s Mid Cap Growth	Class	P	01/01/18	02/28/19
b T Rowe Price Re			P	01/01/18	
c Fidelity Mid Co	ap Value		P	01/01/18	03/20/19
d Blackrock Tota	l Return Institu	tional	P	01/01/18	
e Fidelity 500 I			P	01/01/18	
JPMorgan Diver		Class	P	01/01/18	
g PGIM Short-Term			P	01/01/18	
h T Rowe Price R			P	01/01/18	
Vanguard Explo		<u>.</u>	P	01/01/18	
	ecial Mid Cap Cl	I	P	12/31/18	09/05/19
k Capital Gains	Dividends				
1					
<u>m</u>					
<u>n</u>				-	
0				10 "	
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		) Gain or (loss) plus (f) minus (g)	
a 24,975.		19,960.			5,015.
b 20,000.		20,153.			-153.
c 375,456.		407,102.			-31,646.
d 243,275.		235,791.			7,484.
e 191,720.		144,690.			47,030.
f 35,975.		26,855.			9,120.
g 194,475.	<del></del>	193,678.			797.
h 30,100.		28,626.			1,474.
7,875.		6,894.			981.
10,500.		9,855.			645.
k 106,128.					106,128.
			· ···		
m n					
0			·		· ····
	g gain in column (h) and owned by	the foundation on 12/31/69	(1)1 o	sses (from col. (h))	
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	Gains (excess	of col. (h) gain over not less than "-0-")	col. (k),
a		,,,,,			5,015.
b			<del></del>		-153.
C			<del></del>		-31,646.
d			·		7,484.
e		"			47,030.
f			······		9,120.
g					797.
h					1,474.
<u></u>					981.
<u></u>					645.
k					106,128.
I					
m					
n					
0					
2 Capital gain net income or (net ca	pital loss) {   If gain, also enter   If (loss), enter "-C	r in Part I, line 7 )-" in Part I, line 7	2		146,875.
3 Net short-term capital gain or (los If gain, also enter in Part I, line 8,		nd (6):			
If (loss), enter "-0-" in Part I, line 8		<u> </u>	3	N/A	

# 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

2019

Name of the organization

Employer identification number

	Thomaston Savings Bank Foundation, Inc.	06-1483909
Organization type (chec	ck 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	S01(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 <b>General Rule</b> or a <b>Special Rule.</b> 1(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special	Rule See instructions
General Rule		
•	ation filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions tota any one contributor. Complete Parts I and II. See instructions for determining a contribu	
Special Rules		
sections 509(a) any one contrib	ation described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% supp (1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 1 butor, during the year, total contributions of the greater of (1) \$5,000, or (2) 2% of the am-EZ, line 1 Complete Parts I and II	6a, or 16b, and that received from
year, total cont	ation described in section 501(c)(7), (8), or (10) filing Form 990 or 990·EZ that received from the ributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or expuelty to children or animals. Complete Parts I, II, and III	
year, contributi is checked, ent purpose Don't	ation described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from sections exclusively for religious, charitable, etc., purposes, but no such contributions totaled are the total contributions that were received during the year for an exclusively religion complete any of the parts unless the <b>General Rule</b> applies to this organization because able, etc., contributions totaling \$5,000 or more during the year	I 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 E 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)	

Name of organization

Employer identification number

Thomaston Savings Bank Foundation, Inc.	
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06-1483909

Part I	Contributors (see instructions) Use duplicate copies of Part I if additional	ll space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	Thomaston Savings Bank  203 Main Street, PO Box 907  Thomaston, CT 06787	\$100,000.	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)

Name of organization

Employer identification number

# Thomaston Savings Bank Foundation, Inc.

06-1483909

	on Savings Bank Foundation, Inc.  oncash Property (see instructions) Use duplicate copies of Part	·	-1483909
(a) No. from Part I	(b)  Description of noncash property given  (c)  FMV (or estimate)  (See instructions)		(d) Date received
$- \frac{1}{2}$			
(a) No. From	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		s	
(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. rom Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
$-\begin{vmatrix} - \\ - \end{vmatrix}$			
(a) No. rom Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		     s	

Name of org	anization	<del></del>		Employer identification number	
Thomas	ton Savings Bank Found	ation, Inc.		06-1483909	
Part III	Exclusively religious, charitable, etc., contribut from any one contributor. Complete columns (a completing Part III, enter the total of exclusively religious, Use duplicate copies of Part III if additional	ions to organizations described in s through (e) and the following line ent charitable, etc., contributions of \$1,000 or	ry For organizations		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) [	Description of how gift is held	
		(e) Transfer of gift	<u> </u>		
	Transferee's name, address, a	nd ZIP + 4	Relationship o	f transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) [	Description of how gift is held	
		(e) Transfer of gift	t .		
-	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee		
.					
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) [	Description of how gift is held	
-					
-		(e) Transfer of gift	t		
-	Transferee's name, address, a	nd ZIP + 4	Relationship o	f transferor to transferee	
			-		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) [	Description of how gift is held	
-		(e) Transfer of gif	<u> </u>		
_	Transferee's name, address, a	nd ZIP + 4	Relationship o	f transferor to transferee	
1 -					

Form 990-PF Intere	st on Savi	ngs and Temp	porary	Cash Ir	nvestments	Statement	1
Source	(a Reve Per Bo	nue	(b) Net Investment Income		(c) Adjusted Net Income		
Savings / money mar		680.		680.			
Total to Part I, li		680.	680. 68				
Form 990-PF	Dividend	s and Inter	est fro	om Secui	rities	Statement	2
Source	Gross Amount	Capital Gains Dividend	Re	(a) evenue r Books	(b) Net Inves ment Inco		
Equity dividends	300,424	. 106,12	8.	194,296	. 194,29	96.	
To Part I, line 4	300,424	106,12	8.	194,296	194,29	96.	
Form 990-PF		Legal	Fees			Statement	3
Description		(a) Expenses Per Books	() Net In		(c) Adjusted Net Incom		
Legal and Consultin	g fees	6,000.		3,000.	-	3,0	000.
To Fm 990-PF, Pg 1,	ln 16a =	6,000.		3,000.		3,(	000.
Form 990-PF		Accounti	ng Fees	<del></del>		Statement	4
Description		(a) Expenses Per Books	Net In	o) nvest- Income	(c) Adjusted Net Incom		
Audit and tax prepa	ration —	3,000.		1,500.		1,5	500.
To Form 990-PF, Pg	1, ln 16b	3,000.		1,500.		1,5	500.

Form 990-PF	Tax	es 		_	Statement	5
Description	(a) Expenses Per Books	(b) Net Inve ment Inc		(c) Adjusted Net Incom		able
Taxes	10,751.		0.			0.
To Form 990-PF, Pg 1, ln 18 =	10,751.		0.			0.
Form 990-PF	Other E	xpenses			Statement	6
Description	(a) Expenses Per Books			(c) Adjusted Net Incom		able
Advertising & marketing Printing and Office Supplies Postage	2,705. 607. 112.		0. 0. 0.			705. 607. 112.
To Form 990-PF, Pg 1, ln 23	3,424.		0.		3,	424.
Form 990-PF Other Increases	in Net Ass	ets or Fu	nd Ba	alances	Statement	7
Description					Amount	
Change in fair value of inves	tments				1,216,	809.
Total to Form 990-PF, Part II	I, line 3				1,216,	809.
Form 990-PF	Other Inv	estments			Statement	8
Description		luation ethod	Вос	ok Value	Fair Mark Value	et
Mutual Funds		FMV	8	3,157,469.	8,157,	469.
Total to Form 990-PF, Part II	, line 13	-	8	3,157,469.	8,157,	469.

Part VIII - List of Officers, Directors Form 990-PF Statement 9 Trustees and Foundation Managers Employee Ben Plan Expense Title and Compen-Name and Address Contrib Account Avrg Hrs/Wk sation Stephen Lewis President & Trustee c/o the Foundation 1.00 0. 0. 0. Thomaston, CT 06787 James Nichol Secretary c/o the Foundation 0. 0. 0. 1.00 Thomaston, CT 06787 George Seabourne Chairman & Trustee c/o the Foundation 0.00 0. 0. 0. Thomaston, CT 06787 Rebekah Stokes Treasurer c/o the Foundation 1.00 0. 0. 0. Thomaston, CT 06787 Thomas Parisot Trustee 0. 0. c/o the Foundation 0.00 0. Thomaston, CT 06787 James Kaniewski Trustee c/o the Foundation 0. 0. 0. 0.00 Thomaston, CT 06787 Mark DiVenere Trustee c/o the Foundation 0.00 0. 0. 0. Thomaston, CT 06787 David Carlson Trustee c/o the Foundation 0.00 0. 0. 0. Thomaston, CT 06787 Carrie Zimyeski Trustee c/o the Foundation 0. 0. 0. 0.00 Thomaston, CT 06787 Susan Sadecki Trustee c/o the Foundation 0.00 0. 0. 0. Thomaston, CT 06787 Richard Bushka Trustee 0. c/o the Foundation 0.00 0. 0. Thomaston, CT 06787 Totals included on 990-PF, Page 6, Part VIII 0. 0. 0.