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990-PF

Repartment of the Treasury

Return of Private Foundation or Section 4947(a)(1) Nonexempt Charitable Trust Treated as a Private Foundation

OMB No 1545-0052

2008

		nue Service Note The foundation may be able			ate reporting	requirements					
Er o	alend	ar year 2008, or tax year beginning $12/01/08$, a	and ending $11/3$	0/09	, ,						
ଡ ି ପ	heck a	Ill that apply Initial return Final return	n Amende	ed return		Address change	Name change				
Ħ.	the IR	S Name of foundation			A Emp	loyer identification nun	nber				
<u> </u>	abel.	THE NEW HAMPSHIRE FOUNDAT:	ION FOR		30	-0011318					
% ,	erwise	INNOVATION			B Teler	phone number (see page 1	10 of the instructions)				
3		Number and street (or P O box number if mail is not delivere	d to street address)	Room/suite		2-634-2931	,				
	type.	C/O JP MORGAN SVCS INC PO				emption application is pend	ding check here				
	Specifi		2011 0000		D 1. Foreign organizations, check here						
	uction	and a second and a second	714-6089			•					
		HBWHIR 32 23			Ī	oreign organizations meet 5% test, check here and a					
		ype of organization X Section 501(c)(3) exempt private				. –					
			e private foundation			vate foundation status was er section 507(b)(1)(A), che					
		ket value of all assets at end J Accounting method	X Cash Acc	rual	ł						
of	year (f	from Part II, col (c), Uther (specify)				foundation is in a 60-mon					
lin	e 16)		be on cash basis)		unae	r section 507(b)(1)(B), che	eck nere				
Pa	ırt I	Analysis of Revenue and Expenses (The	(a) Revenue and	"		() ()	(d) Disbursements				
		total of amounts in columns (b), (c), and (d) may not necessarily	expenses per . books	(b) Net inco		(c) Adjusted net income	for charitable purposes				
		equal the amounts in column (a) (see pg 11 of the instructions))		}			(cash basis only)				
	1	Contributions, gifts, grants, etc , received (attach schedule)									
	2	Check ► X if the foundation is not required to attach Sch B			,						
Revenue	3	Interest on savings and temporary cash investments									
	4	Dividends and interest from securities	113		113	113					
	5a	Gross rents									
		Net rental income or (loss)	, ,,								
	b		<u></u>	<u> </u>	·····						
eu	6a	Net gain or (loss) from sale of assets not on line 10		ļ			<u> </u>				
ě	b	Gross sales price for all assets on line 6a		 							
œ	7	Capital gain net income (from Part IV, line 2)			0	 					
	8	Net short-term capital gain				0					
	9	Income modifications									
	10a	Gross sales less returns & allowances									
	b	Less Cost of goods sold		<u></u>							
	С	Gross profit or (loss) (attach schedule)									
	11	Other income (attach schedule)									
	12	Total. Add lines 1 through 11	113		113	113					
S	13	Compensation of officers, directors, trustees, etc									
 penses	14	Other employee salaries and wages									
 	15	Pension plans, employee benefits									
Z	16a	Legal fees (attach schedule)									
ZÚ.	b	Accounting fees (attach schedule)			RECE	IVED					
∞5	c	Other professional fees (attach schedule) STMT 1	62,100				62,100				
–ફૂં	17	Interest		120	ALIC 1	7 2010					
_ ਨੂ =		Taxes (attach schedule) (see page 14 of the instructions)		181	AUG 1	7 2010 0					
∄ :≣	18	Depreciation (attach schedule) and depletion				<u> </u>					
	19			1	JGDE	N. UT					
ᅜ	20	Occupancy		 							
₹2	21	Travel, conferences, and meetings									
<u>₹</u> ल	22	Printing and publications					525				
Operating and Administrative	23	Other expenses (att sch.) STMT 2	525	 			323				
Dia	24	Total operating and administrative expenses.	60 605		^		60 605				
ě		Add lines 13 through 23	62,625	<u> </u>	0	<u> </u>	62,625				
ŏ	25	Contributions, gifts, grants paid	0				0				
	26	Total expenses and disbursements. Add lines 24 and 25	62,625	 	0	0	62,625				
	27	Subtract line 26 from line 12									
	а	Excess of revenue over expenses & disbursements	-62,512	ļ							
	b	Net investment income (if negative, enter -0-)			113						
	c	Adjusted net income (if negative, enter -0-)	l	l		113	<u> </u>				

For Privacy Act and Paperwork Reduction Act Notice, see page 30 of the instructions.

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Fo	rmi 990	0-PF (2008) THE NEW HAMPSHIRE FOUNDATION FOR	30-00113	18	Page 2				
		Attached ashedular and assesses in the description religion	Beginning of year	E	nd of	yea	r		
_	Part I	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	-	(c)	Fair Market Value		
	1	Cash—non-interest-bearing	55.650	- 10			12 140		
	2	Savings and temporary cash investments	75,652	13,	140		13,140		
	3	Accounts receivable >							
		Less allowance for doubtful accounts ▶							
	4	Pledges receivable ▶							
		Less allowance for doubtful accounts ▶							
-	5	Grants receivable			\longrightarrow				
1	6	Receivables due from officers, directors, trustees, and other							
- 1		disqualified persons (attach schedule) (see page 15 of the							
		instructions)							
	7	Other notes and loans receivable (att. schedule)							
		Less allowance for doubtful accounts ▶							
इं	8	Inventories for sale or use		 ∣-					
Assets	9	Prepaid expenses and deferred charges							
Ä	10a	Investments—U S and state government obligations (attach schedule)							
j	b	Investments—corporate stock (attach schedule)							
	С	Investments—corporate bonds (attach schedule)							
	11	Investments—land, buildings, and equipment basis			-				
		Less accumulated depreciation (attach sch.)		-					
	12	Investments—mortgage loans							
	13	Investments—other (attach schedule)							
	14	Land, buildings, and equipment basis							
		Less accumulated depreciation (attach sch)							
	15	Other assets (describe ▶)							
	16	Total assets (to be completed by all filers—see the							
		instructions Also, see page 1, item I)	75,652	13,	140		13,140		
	17	Accounts payable and accrued expenses							
	18	Grants payable							
Liabilities	19	Deferred revenue							
	20	Loans from officers, directors, trustees, and other disqualified persons							
iab	21	Mortgages and other notes payable (attach schedule)							
	22	Other liabilities (describe >							
ı	23	Total liabilities (add lines 17 through 22)	0		0	i			
		Foundations that follow SFAS 117, check here							
S		and complete lines 24 through 26 and lines 30 and 31.							
ည	24	Unrestricted				į			
<u>a</u>	25	Temporarily restricted				į			
Ba	26	Permanently restricted				l			
or Fund Balances		Foundations that do not follow SFAS 117, check here				ĺ			
اج.		and complete lines 27 through 31.				Į			
ĭ	27	Capital stock, trust principal, or current funds	75,652	13,	140	ĺ			
S	28	Paid-in or capital surplus, or land, bldg , and equipment fund				}			
Net Assets	29	Retained earnings, accumulated income, endowment, or other funds				İ			
\s	30	Total net assets or fund balances (see page 17 of the				ŀ			
jt/		instructions)	75,652	13,	140	ĺ			
ž	31	Total liabilities and net assets/fund balances (see page 17				ĺ			
		of the instructions)	75,652	13,	140				
_	Part	· · · · · · · · · · · · · · · · · · ·							
		I net assets or fund balances at beginning of year—Part II, column (a), line 30 (mu	ist agree with						
		of-year figure reported on prior year's return)		L	1		75,652		
2		r amount from Part I, line 27a			2		-62,512		
		r increases not included in line 2 (itemize)▶			3				
		lines 1, 2, and 3			4		13,140		
		eases not included in line 2 (itemize) ▶			5				
		net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30		6		13,140		
_		· · · · · · · · · · · · · · · · · · ·					000 DE		

Part IV Capital Gains a	nd Losses for Tax on Investm	ent Income			
(a) List and descr 2-story brick war	(b) How acquired P—Purchase D—Donation	(c) Date acq (mo , day,			
1a N/A					
b					
<u>c</u>		<u></u>			
d					
<u>e</u>		1	L		
(e) Gross sales price	(f) Depreciation allowed (or allowable)	1	or other basis ense of sale		h) Gain or (loss) e) plus (f) minus (g)
_a					
b		ļ			
<u>c</u>		 			
d					
e Consolida color for constant observe	Land of the second state o	ioundation on 42/24/		.	
Complete only for assets snowin	g gain in column (h) and owned by the f		ess of col (ı)		ains (Col. (h) gain minus but not less than -0-) or
(i) F M V as of 12/31/69	as of 12/31/69	1 ' '	(j), if any		sses (from col (h))
a				··· ··· ·	
b				· · · · · ·	
С					
d					
е					
2 Capital gain net income or (net c	capital loss) If gain, also enter in			2	
3 Net short-term capital gain or (lo	ss) as defined in sections 1222(5) and (-			
If gain, also enter in Part I, line 8	s, column (c) (see pages 13 and 17 of th	e instructions)			
If (loss), enter -0- in Part I, line 8				3	
Part V Qualification U	nder Section 4940(e) for Redu	ced Tax on Net	Investment Inco	me	
If section 4940(d)(2) applies, leave the Was the foundation liable for the sec	e foundations subject to the section 494 his part blank ction 4942 tax on the distributable amou alify under section 4940(e) Do not comp	nt of any year in the		es 🗓 No	
1 Enter the appropriate amount in	each column for each year, see page 1	8 of the instructions t	before making any en	tries	
(a) Base period years Calendar year (or tax year beginnin	(b) Adjusted qualifying distribution		(c) e of nonchantable-use as	sets	(d) Distribution ratio of (b) divided by col (c))
2007		,512	39,	376	5.529943
2006		,634	114,	555	2.194706
2005	281	,482	115,2		2.442572
2004		,953	120,0		1.607808
2003	182	,754	78,4	108	2.330808
2 Total of line 1, column (d)				2	14.105837
-	5-year base period—divide the total on		•		
number of years the foundation I	has been in existence if less than 5 year	'S		3	2.821167
4 Enter the net value of noncharita	able-use assets for 2008 from Part X, lin	e 5		4	41,058
5 Multiply line 4 by line 3	5	115,831			
6 Enter 1% of net investment inco	6	1			
7 Add lines 5 and 6	. ,			7	115,832
8 Enter qualifying distributions from	n Part XII, line 4			8	62,625
	in line 7, check the box in Part VI, line 1	b, and complete that	part using a 1% tax r		
and the state of t	<u> </u>				Form 990-PF (2008

<u>Form</u>	990-PF (2008) THE NEW HAMPSHIRE FOUNDATION FOR 30-0011318			<u>P</u>	age 4
Pa	IRT VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the instr	uctions)			
1a	Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ and enter "N/A" on line 1				
	Date of ruling letter (attach copy of ruling letter if necessary—see instructions)				
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check	<u> </u>			2
	here ▶ and enter 1% of Part I, line 27b			.,,,	1 - 111-
c	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4%				
	of Part I, line 12, col (b)				
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)				0
3	Add lines 1 and 2				2
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)				0
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-	<u> </u>			0
6	Credits/Payments				
	·				
a					
þ	Exempt foreign organizations—tax withheld at source				
C	Tax paid with application for extension of time to file (Form 8868)				
d	Backup withholding erroneously withheld 6d				
7	Total credits and payments Add lines 6a through 6d	ļ			<u> 166</u>
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8				
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed				
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	<u> </u>			<u> 164</u>
11	Enter the amount of line 10 to be Credited to 2009 estimated tax ▶ 164 Refunded ▶ 11	<u> </u>			
Pa	rt VII-A Statements Regarding Activities				
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it			Yes	No
	participate or intervene in any political campaign?		1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19				
	of the instructions for definition)?		1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials				
	published or distributed by the foundation in connection with the activities.				
_	Did the foundation file Form 1120-POL for this year?		1c		x
C	\cdot		-10		
ď	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year				
	(1) On the foundation > \$ (2) On foundation managers > \$				
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on				
	foundation managers > \$		_		7.7
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		2		<u>X</u>
	If "Yes," attach a detailed description of the activities				
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of				
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		3		<u> </u>
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4a		<u> </u>
þ	If "Yes," has it filed a tax return on Form 990-T for this year?	N/A	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		5		<u> </u>
	If "Yes," attach the statement required by General Instruction T.				
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either				
	By language in the governing instrument, or				
	By state legislation that effectively amends the governing instrument so that no mandatory directions that				
	conflict with the state law remain in the governing instrument?		6	x	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV		7	х	
8а	Enter the states to which the foundation reports or with which it is registered (see page 19 of the		·		
Ja	instructions) NH				
L	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General				
b	· · · · · · · · · · · · · · · · · · ·		PL	x	
^	(or designate) of each state as required by General Instruction G? If "No," attach explanation		8b	-	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3)				
	or 4942(j)(5) for calendar year 2008 or the taxable year beginning in 2008 (see instructions for Part XIV on			"	
	page 27)? If "Yes," complete Part XIV		9	X	
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their				
	names and addresses		10		<u> </u>
		Fo	m 99	v-PF	(2008)

orm	990-PF (2008) THE NEW HAMPSHIRE FOUNDATION FOR 30-0011318		<u>.</u>		F	Page 5
Pa	art VII-A Statements Regarding Activities (continued)					
1	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 page 20 of the instructions)			11	<u> </u>	X
2	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before					
	August 17, 2008?			12	<u> </u>	X
3	Did the foundation comply with the public inspection requirements for its annual returns and exemption application	?חי		13	X_	<u> </u>
	Website address ► N/A					
4	•	ne no	▶ 302-6	34-	293	1
	PO BOX 6089					
	2004.04 47 112.112.117, 22	IP+4	▶ 19714	-60	89	_
5	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—Check here					▶ ∐
	and enter the amount of tax-exempt interest received or accrued during the year		15			
Pa	urt VII-B Statements Regarding Activities for Which Form 4720 May Be Required					
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.				Yes	No
1a	During the year did the foundation (either directly or indirectly)	-				
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	Yes	X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a	٦				
	disqualified person?	Yes	X No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	Yes	X No X No X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	_ Yes	X No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for	_				
	the benefit or use of a disqualified person)?	Yes	X No			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if					
	the foundation agreed to make a grant to or to employ the official for a period after	_				
	termination of government service, if terminating within 90 days)	Yes	X No			
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulation	IS				
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)?		N/A	1b		<u> </u>
	Organizations relying on a current notice regarding disaster assistance check here		▶ ∐			
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that		_			
	were not corrected before the first day of the tax year beginning in 2008?		N/A	1c	<u> </u>	
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private					
	operating foundation defined in section 4942(j)(3) or 4942(j)(5))					
а	At the end of tax year 2008, did the foundation have any undistributed income (lines 6d and	_	r=			
	6e, Part XIII) for tax year(s) beginning before 2008?	_ Yes	X No			
	If "Yes," list the years ▶ 20 , 20 , 20 , 20					
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 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 page 20 of the instructions)		N/A	2b	ļ.,	ļ
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here					
	▶ 20 , 20 , 20 , 20					
3a	Did the foundation hold more than a 2% direct or indirect interest in any business	_				
	enterprise at any time during the year?	Yes	X No			
b	If "Yes," did it have excess business holdings in 2008 as a result of (1) any purchase by the foundation or					
	disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the					
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse					
	of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the				l	
	foundation had excess business holdings in 2008)		N/A	3b	<u> </u>	
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?			<u>4a</u>	ļ	X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its				1	
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 200	8?		4b		X
			F	orm 95	ルーピト	(2008)

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Pa	art VII-B Statements Regarding Activities for Which Fo	rm 4720 May Be	Required (cor	ntinued)	·····	,						
5a	During the year did the foundation pay or incur any amount to (1) Carry on propaganda, or otherwise attempt to influence legislation (section) influence the outcome of any specific public election (see section 4955), directly or indirectly, any voter registration drive?		. –	es X No								
	(3) Provide a grant to an individual for travel, study, or other similar purposes		Y	es X No								
	(4) Provide a grant to an organization other than a charitable, etc., organization section 509(a)(1), (2), or (3), or section 4940(d)(2)? (see page 22 of the in	nstructions)	Y	es X No								
	(5) Provide for any purpose other than religious, charitable, scientific, literary educational purposes, or for the prevention of cruelty to children or anima		□ Y	es X No								
b	If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify un		escribed in									
	Regulations section 53 4945 or in a current notice regarding disaster assistance (see page 22 of the instructions)?											
	Organizations relying on a current notice regarding disaster assistance check here											
С	If the answer is "Yes" to question 5a(4), does the foundation claim exemption	from the tax		_								
	because it maintained expenditure responsibility for the grant? N/A Yes No If "Yes," attach the statement required by Regulations section 53 4945-5(d)											
6a	Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums										
	on a personal benefit contract?		□ Y	es X No								
b	Did the foundation, during the year, pay premiums, directly or indirectly, on a	personal benefit contr	act?		6b	X						
	If you answered "Yes" to 6b, also file Form 8870			_								
7a	At any time during the tax year, was the foundation a party to a prohibited tax	shelter transaction?	_ [] Y	es X No		<u> </u>						
b		utable to the transaction	on?	N/A	7b	<u></u>						
Pa	art VIII Information About Officers, Directors, Trustees, I	Foundation Mana	agers, Highly	Paid Employe	es,							
	and Contractors	·										
1 L	List all officers, directors, trustees, foundation managers and their compen	sation (see page 22	of the instruction	s).								
	(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) Exp account, allowar	ense other nces						
SE	EE STATEMENT 3											
			· · ·									
2	Compensation of five highest-paid employees (other than those included If none, enter "NONE."	on line 1—see page	23 of the instruc	tions).								
	(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) Exp account, allowar	other						
NC	DNE											
				<u> </u>								
		-										
Tota	I number of other employees paid over \$50,000			For	<u>▶ </u> m 990-PI	F (2008)						

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Part VIII	Information About Office	cers, Directors, Trustees, Foundation	on Managers, Highly Paid Em	
	and Contractors (contin			
3 Five high	est-paid independent contracto	ers for professional services (see page 23 of	the instructions). If none, enter "NON	IE."
		h person paid more than \$50,000	(b) Type of service	(c) Compensation
	SOUTHERTON	NEWARK		
C/O JPM	PO BOX 6089	DE 19714-6089	CONSULTING	54,900
				
		•		
				
Total number of	others receiving over \$50,000 fo	or professional services		▶ 0
Part IX-A	Summary of Direct Cl			
		ties during the tax year. Include relevant statistical info	ormation such as the number	Expenses
				
1 N/A				
2	· · · · · · · · · · · · · · · · · · ·		· · · · · · · · · · · · · · · · · · ·	
-			•	
3				
 				
4				
B. 452 B			-64	
Part IX-B		-Related Investments (see page 23		
1 N/A	largest program-related investments	made by the foundation during the tax year on lines 1	and 2	Amount
I N/A		•	·	
2				
-				
All other program	n-related investments. See page 24 of	the instructions		· · · · · · · · · · · · · · · · · · ·
3	, -			

▶

Total. Add lines 1 through 3

Amounts set aside for specific charitable projects that satisfy the

Enter 1% of Part I, line 27b (see page 26 of the instructions)

Adjusted qualifying distributions. Subtract line 5 from line 4

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

Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income

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

Suitability test (prior IRS approval required)

Cash distribution test (attach the required schedule)

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62,625

3a

3b

4

5

6

	1990-PF (2008) IRE NEW HAMP			30-00113	<u> </u>	Page	-
F-8	urt XIII Undistributed Income	(see page 20 01		(5)	(5)	/4/	-
		V 1	(a) Corpus	(b) Years prior to 2007	(c) 2007	(d) 2008	
1	Distributable amount for 2008 from Part 3	ΧI,	Colpus	rears prior to 2007	2007	2006	-
_	line 7	-4 2007	<u></u>			<u></u>	_
2	Undistributed income, if any, as of the en	na of 2007					
	Enter amount for 2007 only		ļ				4
	Total for prior years 20, 20		<u></u>	-			-
3	Excess distributions carryover, if any, to	2008					
	From 2003						
	From 2004		-				
	From 2005		4				
-	From 2006		4				
	From 2007		4				
	Total of lines 3a through e			 			-
4	Qualifying distributions for 2008 from Par	t XII,	İ				
	line 4 ▶ \$						
	Applied to 2007, but not more than line 2						~
b	Applied to undistributed income of prior y	•					
	required—see page 26 of the instructions	•					_
С	Treated as distributions out of corpus (El						
	required—see page 26 of the instructions	s)					
d	Applied to 2008 distributable amount					ļ	_
е	Remaining amount distributed out of corp	ous					_
5	Excess distributions carryover applied to	2008		 			_
	(If an amount appears in column (d), the	same					
	amount must be shown in column (a))						
6	Enter the net total of each column as						
	indicated below:						
а	Corpus Add lines 3f, 4c, and 4e Subtrac	ct line 5					_
b	Prior years' undistributed income Subtra	ct]				
	line 4b from line 2b						_
c	Enter the amount of prior years' undistrib	uted					
	income for which a notice of deficiency h	as been			<u></u>		
	issued, or on which the section 4942(a) to	ax has					
	been previously assessed						_
d	Subtract line 6c from line 6b Taxable						•
	amount—see page 27 of the instructions						_
е	Undistributed income for 2007 Subtract	line					
	4a from line 2a Taxable amount-see pa	age					
	27 of the instructions						_
f	Undistributed income for 2008 Subtract	lines		, , , , , , , , , , , , , , , , , , , ,			
	4d and 5 from line 1. This amount must be	oe .					
	distributed in 2009						_
7	Amounts treated as distributions out of co	orpus					
	to satisfy requirements imposed by section	on					
	170(b)(1)(F) or 4942(g)(3) (see page 27 of	of the					
	instructions)						_
8	Excess distributions carryover from 2003	not					
	applied on line 5 or line 7 (see page 27 o	f the					
	instructions)						
9	Excess distributions carryover to 2009						
	Subtract lines 7 and 8 from line 6a						_
0	Analysis of line 9						
a	Excess from 2004						
b	Excess from 2005						
С	Excess from 2006]				
đ	Excess from 2007						
е	Excess from 2008]				

P	art XIV Private Operating Fo	undations (see pa	age 27 of the inst	ructions and Part	VII-A, question 9)	
1a	If the foundation has received a ruling or	determination letter th	at it is a private operat	ing		
	foundation, and the ruling is effective for	2008, enter the date o	f the ruling			N/A
þ	Check box to indicate whether the found	ation is a private opera	ting foundation descri	ped in section X 49	942(j)(3) or 4942	2(j)(5)
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		(e) Total
	income from Part I or the minimum	(a) 2008	(b) 2007	(c) 2006	(d) 2005	
	investment return from Part X for					
	each year listed	113	1,158	5,733	4,649	11,653
b	85% of line 2a	96	984	4,873	3,952	9,905
С	Qualifying distributions from Part XII,					
	line 4 for each year listed	62,625	220,524	251,693	281,528	816,370
d	Amounts included in line 2c not used directly					
	for active conduct of exempt activities					
е	Qualifying distributions made directly					
	for active conduct of exempt activities					
	Subtract line 2d from line 2c	62,625	220,524	251,693	281,528	816,370
3	Complete 3a, b, or c for the					
	alternative test relied upon					
а	"Assets" alternative test—enter					
	(1) Value of all assets					· · · · · · · · · · · · · · · · · · ·
	(2) Value of assets qualifying under					
	section 4942(j)(3)(B)(i)					
þ	"Endowment" alternative test—enter 2/3 of					
	minimum investment return shown in Part					
	X, line 6 for each year listed	1,369	1,329	3,822	3,841	10,361
С	"Support" alternative test—enter				1	
	(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					
Pŧ	irt XV Supplementary Inform	nation (Complete	this part only if	the foundation h	ad \$5,000 or more	in assets
	at any time during the	e year—see page	27 of the instruc	tions.)		
1	Information Regarding Foundation Ma	nagers:				
а	List any managers of the foundation who	have contributed mor	e than 2% of the total	contributions received	by the foundation	
	before the close of any tax year (but only	y if they have contribute	ed more than \$5,000)	(See section 507(d)(2))	
	N/A					
b	List any managers of the foundation who	own 10% or more of t	he stock of a corporat	on (or an equally large	portion of the	
	ownership of a partnership or other entity	y) of which the foundat	ion has a 10% or grea	ter interest		
	N/A					
2	Information Regarding Contribution, G	Grant, Gift, Loan, Scho	larship, etc., Progran	ns:		
	Check here ▶ X if the foundation onl	y makes contributions	to preselected charitat	ole organizations and o	loes not accept	
	unsolicited requests for funds. If the four	ndation makes gifts, gr	ants, etc. (see page 28	of the instructions) to	individuals or	
	organizations under other conditions, co	mplete items 2a, b, c,	and d			
а	The name, address, and telephone num	ber of the person to wh	nom applications shoul	d be addressed.		
	N/A	•				
b	The form in which applications should be N/A	e submitted and inform	ation and materials the	ey should include:		
С	Any submission deadlines N/A					
d	Any restrictions or limitations on awards	such as by geographi	cal areas charitable fi	elds, kinds of institution	ns, or other factors	
_	N/A	, , , , , , , , , , , , , , , ,	and the second s	-,		
		 				Form 990-PF (2008

DAA

Part XV Supplementary Information (Co	ontinuea)			
3 Grants and Contributions Paid During the	Year or Approved for F			
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	·	<u> </u>	
a Paid during the year				
N/A				
			1	
			1	
			1	
			i i	
			1	
			1	
			1	
			}	
			1	
			1	
Total		<u> </u>	▶ 3a	
Total		T	Ja	
b Approved for future payment $\mathbf{N/A}$				
11/12				
		İ		
Total			▶ 3b	

DAA

5. 500 3	Analysis of Income-Producing Acts unless otherwise indicated		d business income	Excluded b	y section 512, 513, or 514	(e)
		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See page 28 of
Program servic			-			the instructions)
b		_	·			
c		-				
				- -		
f		-		+ +		
· ———	contracts from government agencies					
-	ies and assessments					
	ings and temporary cash investments					
	interest from securities			14	113	
	me or (loss) from real estate					
	nanced property			- -		
	ne or (loss) from personal property					
Other investme						
	rom sales of assets other than inventory					
	(loss) from special events			+ +		
•	(loss) from sales of inventory			+ +		
	a		·	+ - +		
		-				
e						
	columns (b), (d), and (e)			0	113	1
	12, columns (b), (d), and (e)				13	
e worksheet in I art XVI-B	ne 13 instructions on page 28 to verify calculated Relationship of Activities to the		ent of Evemnt	Purnoses		
E	explain below how each activity for which incom					
ine No I	he accomplishment of the foundation's exempt					
	age 28 of the instructions)					·····
N/A						
				•		
				•	•	

orr	n 990-PF (HAMPSH							001					Pa	age 13
P	art XVII			_	arding T	ransf	ers To a	nd Tran	sactio	ns ar	nd Rela	tions	hips Wi	ith N	oncha	ritable		
	5			Organiz				'allan										T
1					lirectly enga er than sect												Yes	No
	organiza) or the t	Code (otne	er than seci	1011 50	r(c)(s) orga	amzauons) OI III SE	cuon 5	ızı, relati	ng to pu	Dillicai					
-	•		he reno	rtina found	dation to a r	onchai	ritable eve	mnt organ	uzation o	f								
a	(1) Casi		ne repoi	iting round	adion to a i	iononai	IIIabic cxci	inproigan	iization o	•						1a(1)	1	x
	(2) Othe		e								•					1a(2)		X
ь	Other tra															1.5757	<u> </u>	
_				noncharit	able exemp	t organ	nization									15(1)	1	x
					oncharitable	-		ation								1b(2)	$\overline{}$	X
	• •				, or other as											1b(3)		X
	• •			angement												1b(4)	$\overline{}$	X
	(5) Loar			-												1b(5)		X
			-		embership	or fund	raising sol	citations								1b(6)		X
c	Sharing	of facilit	ies, equ	ipment, m	nailing lists,	other a	assets, or p	aid emplo	yees							1c		X
	_				ıs "Yes," co					mn (b)	should a	lways s	how the f	air ma	ırket	 		
	value of	the goo	ds, othe	r assets, o	or services	given b	y the repo	rting orga	nızatıon	If the f	oundatio	n receive	ed less th	nan fai	r marke	et		
	value in	any tran	saction	or sharing	arrangem	ent, sho	ow in colum	nn (d) the	value of	the go	ods, othe	er assets	s, or serv	ices re	eceived			
	(a) Line no) (b) Amour	nt involved	(c) Nan	ne of nor	nchantable e	exempt orga	nization	(d)	Descri	otion of tr	ansfers, tra	ansacti	ons, and	sharing arrang	ements	1
N/	A				<u> </u>													
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28			•	•	ctly affiliated						-	zations				П	es X	No I
					Code (othe	r than s	section 50	1(c)(3)) or	in section)II 52 <i>1</i> !	•					י ע	es <u>r</u>	9 MO
	If "Yes,"				nequie	7	(b) T			1			(a) Das		of rolet	enchin		
	N/A	(a) Na	ame or or	ganization	.	_	(b) Type o	organizad	ION	 			(c) Des	cription	i oi reiau	onsnip		
	11/12				· · · · · · · · · · · · · · · · · · ·	+												
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						1				†								
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	Under nei	nalties of	penury I	declare tha	it I have exan	nned the	is return incl	luding acco	mpanying	schedu	les and sta	tements.	and to the	e best c	of my kno	wledge and		
	belief, it is	s/tijue, co	rrect and	complete	Deglaration o	f prepare	er (other than	n taxpayer	or fiduciar	y) is bas	ed on all i	nformatio	n of which	prepar	er has a	ny knowledge		
		HT.	/2	III-t	9/4			1.	_71	15/	10		TREA	ASU	RER			
4.	∦Slgn:	ature of o	officer or t	ruste	T			(K	Date	"" 	7	7	Title		- 11			
ere		·		/					,	_	Date				Ĩ	Preparer's ident	ıfyıng	
Ī	, I			1							,	,	Check i	f		number (see Si	gnature	on
Sign Here	er's	Prepar	er's	\rightarrow	1	•				İ	1/	1/10	self-em	ployed		page 30 of the ii		
ဟ	Paid Preparer's Use Only	signati	ure	De	e Ale	m	2				1/1	110				P0055	<u>9584</u>	4
	Pre Us	Firm's	name (or	yours if	J. P.			SERVI	CES	INC.	• '	/						
		self-en	nployed),	address,			X 6089									22-218		
		and ZII	P code		NEWA	DE :	-608	9					Phone no	302-63	4 - 3	824		

Phone no 302-634-3824 Form **990-PF** (2008)

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Z:23 PM	Page 1
UL02/7L//	

FOUNDALION FOR	Federal Statements	
Q40384002 THE NEW HAMPSHIKE FOUNDATION FOR	30-0011318	FYE: 11/30/2009

	Charitable Purpose	\$ 7,200	\$ 62,100		Charitable Purpose	v.	75 450	\$ 525
I Fees	Adjusted Net		0	S	Adjusted Net			0
Statement 1 - Form 990-PF, Part I, Line 16c - Other Professional Fees	Net estment	ئ	· · · · · · · · · · · · · · · · · · ·	Statement 2 - Form 990-PF, Part I, Line 23 - Other Expenses	et tment	₩		·ν."
art I, Line 16c - (Net Investment	ጭ	w.	PF, Part I, Line 2	Net Investment	ᡐ		w.
Form 990-PF, Pa	Total	7,200 54,900	62,100	t 2 - Form 990-F	Total		75	525
<u>Statement 1 - F</u>	Description	CONSULTANT - JOHN VOREL IT CONSULTANT - MATT SOUTHERTON	TOTAL \$=	Statement	Description	EXPENSES	NH AG FILING FEE MISC. EXPENSE	TOTAL \$=

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/12/2010	
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Page 2

Q40384002 THE NEW HAMPSHIRE FOUNDATION FOR 30-0011318
FYE: 11/30/2009

Statement 3 - Form 990-PF, Part VIII, Line 1 - List of Officers, Directors, Trustees, Etc.

Name and Address	Title	Average Hours	Compensation	Benefits	Expenses
GORDON J HUMPHREY C/O JPM PO BOX 6089 NEWARK DE 19714-6089	PRESIDENT	3	0	0	0
PATRICIA G HUMPHREY C/O JPM PO BOX 6089 NEWARK DE 19714-6089	TREASURER	m	0	0	0
SHARI DEMERS C/O JPM PO BOX 6089 NEWARK DE 19714-6089	VICE-PRES	m	0	0	0
JIM O'BRIEN C/O JPM PO BOX 6089 NEWARK DE 19714-6089	VICE-PRES	m	0	0	0
CRAIG SMITH C/O JPM PO BOX 6089 NEWARK DE 19714-6089	VICE-PRES	т	0	0	0
BRIAN MOUSHEGIAN C/O JPM PO BOX 6089 NEWARK DE 19714-6089	VICE-PRES	m	0	0	0

Form 8868 (Rev 4-2009)			Page 2		
If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II and check this box			▶ X		
Note. Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed For	m 8868		_		
If you are filing for an Automatic 3-Month Extension, complete only Part I (on page 1)					
Part # Additional (Not Automatic) 3-Month Extension of Time. Only file the original (r	o copie	s needed).		
Type or Name of Exempt Organization		r identificat			
print THE NEW HAMPSHIRE FOUNDATION FOR					
by the INNOVATION 30-0011318					
Number, street, and room or suite no. If a P.O. box, see instructions For IRS use only					
due date for filing the C/O JP MORGAN SVCS INC PO BOX 6089		•			
return See City, town or post office, state, and ZIP code. For a foreign address, see instructions					
instructions NEWARK DE 19714-6089					
Check type of return to be filed (File a separate application for each return):		_			
☐ Form 990		☐ Foi	m 6069		
Form 990-BL Form 990-T (sec 401(a) or 408(a) trust) Form 4720		Foi	m 8870		
Form 990-EZ Form 990-T (trust other than above) Form 5227					
STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously fi	led Form	8868.			
 The books are in the care of ▶ JP MORGAN SERVICES INC. 					
Telephone No ▶ 302-634-2931 FAX No ▶					
If the organization does not have an office or place of business in the United States, check this box			▶ []		
If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN)	S IS				
	nd attach	а			
list with the names and EINs of all members the extension is for					
4 I request an additional 3-month extension of time until 10/15/10					
5 For calendar year or other tax year beginning $12/01/08$, and ending $11/30/09$)				
		ing period			
7 State in detail why you need the extension					
ADDITIONAL INFORMATION IS REQUIRED IN ORDER TO FILE A	COMPL	ETE AN	D		
ACCURATE TAX RETURN.					
1.00014111 1111 1111 1111 1111 1111					
8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax,					
less any nonrefundable credits. See instructions	8a	\$	2		
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and					
estimated tax payments made. Include any prior year overpayment allowed as a credit and any					
amount paid previously with Form 8868	8b	\$	166		
c Balance Due. Subtract line 8b from line 8a Include your payment with this form, or, if required, deposit					
with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System) See instructions	8c	\$	0		
Signature and Verification					
Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of	my knowle	dge and belief			
it is true, correct, and complete, and that I am authorized to prepare this form	•				
Signature Title		Date ▶			

Form **8868** (Rev 4-2009)

Form 8868 (I	Rev 4-2009)			Page 2		
If you are	filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II and check this box			▶ X		
	omplete Part II if you have already been granted an automatic 3-month extension on a previously filed Form	8868		_		
 If you are 	filing for an Automatic 3-Month Extension, complete only Part I (on page 1)					
Part II	Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no	copie	s need	ed).		
Type or		mploye	er identifi	cation number		
print	THE NEW HAMPSHIRE FOUNDATION FOR					
File by the	INNOVATION 3	0-0	01131	.8		
extended due date for	Number, street, and room or suite no. If a P O box, see instructions	or IRS	use only			
filing the	C/O JP MORGAN SVCS INC PO BOX 6089					
return See	City, town or post office, state, and ZIP code. For a foreign address, see instructions					
instructions	NEWARK DE 19714-6089					
Check type	of return to be filed (File a separate application for each return)					
Form 9	90 X Form 990-PF			Form 6069		
Form 9	90-BL Form 990-T (sec 401(a) or 408(a) trust) Form 4720			Form 8870		
Form 9	90-EZ Form 990-T (trust other than above) Form 5227					
STOP! Do no	t complete Part II if you were not already granted an automatic 3-month extension on a previously filed	Form	8868.			
	s are in the care of ▶ JP MORGAN SERVICES INC.					
Telephor	e No ▶ 302-634-2931 FAX No ▶			_		
If the org	anization does not have an office or place of business in the United States, check this box			▶ ∐		
If this is i	or a Group Return, enter the organization's four digit Group Exemption Number (GEN)	S				
for the whole	group, check this box ▶ ☐ If it is for part of the group, check this box ▶ ☐ and	attach	а			
	ames and EINs of all members the extension is for					
4 I reque	st an additional 3-month extension of time until $10/15/10$					
5 For cal	endar year , or other tax year beginning $12/01/08$, and ending $11/30/09$					
6 If this t						
7 State	n detail why you need the extension					
ADD	ITIONAL INFORMATION IS REQUIRED IN ORDER TO FILE A CO	MPL	ETE A	AND		
ACC	URATE TAX RETURN.					
8a If this a	pplication is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax,			_		
<u>less</u> ar	y nonrefundable credits. See instructions	8a	\$	2		
b If this a	pplication is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and					
estima	ted tax payments made. Include any prior year overpayment allowed as a credit and any					
amoun	t paid previously with Form 8868	8b		166		
c Baland	e Due. Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit					
with_F	D coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions	8c	\$	0		
	Signature and Verification					
Under penaltie	s of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of m	y knowle	dge and be	elief,		
it is true, correc	t, and complete, and that I am authorized to prepare this form					
Signature 🕨	Title >		Date	e)		

Form **8868** (Rev 4-2009)