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Form **990-PF**

Department of the Treasury

Internal Revenue Service

Return of Private Foundation

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

Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements.

2010

OMB No 1545-0052

24 Total operating and administrative expenses. Add lines 13 through 23 96,430. 8. 0. 96,422 25 Contributions, gifts, grants paid 0. 0. Total expenses and disbursements. Add lines 24 and 25 96,430. 8. 0. 96,422	F	r ca	ien	dar year 2010, or tax year beginning DEC	1, 2010	, and ending	NOV 30, 2011	
Name of foundation	G	Ch	eck	all that apply: initial return	Initial return of a fo	ormer public charity	Final return	
THE NEW HAMPSHIRE FOUNDATION FOR INNOVATION Number and sive to 9 P O Dux runneer final a not convened to street address) Room/runneer final a not convened to street and street Picture final fi	_			Amended return	Address chan	ge _ <u></u>	Name change	
TINNOVATION Application Comparison C	Į.	lame	e of	foundation			A Employer identification	number
South Street Process				THE NEW HAMPSHIRE FOU	NDATION FOR			
Section 4972 Converting to a pending, drived, here CONCORD, NH 0.3301				INNOVATION			30-0011318	
CRy or town, state, and ZIP code CONCORD, NH 03301 H. Check type of organization: X Section 501(c)(3) exempt private foundation Section 4947(a)(1) nonexempt charatable trust Other taxable private foundation Far market value of all assets and or layar A counting method. X Cash Accrual (from Part II, col. (c), line 16) S 21, 388 (Part I, col. min (c) must be on cash basis.) Part Analysis of Revenue and Expenses A col. (c) A col	1	dumb	er aı	,	address)	Room/suite	B Telephone number	
CONCORD, NH 0.3301 N Control type of organizations. (Light Section 501(c)(3) exempt private foundation Section 4947(a)(1) noncempt charable trust Other taxable private foundation Farr market value of all assets at end of year J Accounting method. Exact Accrual (from Part I, cot. (c), kin et 16) Other (specify) The other taxable private foundation If I Control type I Accounting method. Exact Accrual (from Part I, cot. (c), kin et 16) Other (specify) Section 507(b)(1)(A), check here I Other (specify) Section 507(b)(A) Other (specify) Section 507(b)(A								
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Farr market value of all assets at end of year Accounting method: Cash Accounting method: Other (specify) Ot	H						check here and attach co	mputation
Compare to the comp	ا_						E If private foundation sta	tus was terminated
Part I Analysis of Revenue and Expenses I Part I Pa	- 1			· · · · · · · · · · · · · · · · · · ·	_			
Part I Analysis of Revenue and Expenses (a) Revenue and expenses per books (b) Net investment income (c) Adjusted net income						haere ì		
1 Contributions, gifts, grants, etc., received 2 Check	Г							
1 Contributions, gifts, grants, etc., received 2 Check	Ļ	ш		(The total of amounts in columns (b), (c), and (d) may not	expenses per books		(c) Adjusted fiet income	for charitable purposes
2 Circles	_	Т	1				-	(Casil basis only)
3 case in revenements	<u></u>		2				· · · · · · · · · · · · · · · · · · ·	` ` `
A Dividends and interest from securities S			3	Interest on savings and temporary				
Sa Gross rents		Ì	4		8.	8.	8.	STATEMENT 1
Section Control Cont			5a	Gross rents				, ,
Section Control Cont	A	ļ	b	Net rental income or (loss)	-			
10 and allowances b Less Cost of goods sold c Gross profit or (loss) 11 Other income 12 Total. Add lines 1 through 11 80,008.			6a				٠	
10 and allowances b Less Cost of goods sold c Gross profit or (loss) 11 Other income 12 Total. Add lines 1 through 11 80,008.	رين اين	Ž	b	Gross sales price for all assets on line 6a				
10 and allowances b Less Cost of goods sold c Gross profit or (loss) 11 Other income 12 Total. Add lines 1 through 11 80,008.	Z	e Ve	7	Capital gain net income (from Part IV, line 2)		0.		,
10 and allowances b Less Cost of goods sold c Gross profit or (loss) 11 Other income 12 Total. Add lines 1 through 11 80,008.	4	"	8	Net short-term capital gain		<u>-</u> .	0.	,
10 and allowances b Less Cost of goods sold c Gross profit or (loss) 11 Other income 12 Total. Add lines 1 through 11 80,008.	\mathcal{O}		9					27.
c Gross profit or (loss) 11 Other income 12 Total Add lines 1 through 11 80,008. 8. 8. 8. 13 Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees b Accounting fees 5 TMT 2 1,300. 0. 0. 1,300 c Other professional fees 5 TMT 3 94,830. 8. 0. 94,822 91 Taxes 19 Depreciation and depletion 19 Other professional fees 19 Depreciation and depletion 20 Other professional fees 19 Depreciation and depletion 21 Urayel, conferences, and meetings 22 Printing and publications 23 Other professions 24 Total operating and administrative expenses. Add lines 13 through 23 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. Add lines 24 and 25 96,430. 8. 0. 96,422	U J	1	0 a	and allowances			'	
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26 Total expenses and disbursements. Add lines 24 and 25 96,430. 8. 0. 96,422		밀	23 (· · · · · · · · · · · · · · · · · · ·	300.	0.	0.	300.
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26 Total expenses and disbursements. Add lines 24 and 25 96,430. 8. 0. 96,422		Ö,		· ·		8.	0.	
Add lines 24 and 25 96, 430. 8. 0. 96, 422		12		· 1	0.			0.
		2	O		0E 130	0	^	96 422
	-	٠,	7		30,430.	•••	0.	70,424.
a Excess of revenue over expenses and disbursements —16,422.		4			-16 422		-	- 3
b Net investment income (if negative, enter -0-)				-		n.		
c Adjusted net income (if negative, enter -0-)							8.	

THE NEW HAMPSHIRE FOUNDATION FOR Form 990-PF (2010) 30-0011318 Page 2 INNOVATION Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only Beginning of year End of year (a) Book Value (b) Book Value (c) Fair Market Value 1 Cash - non-interest-bearing........ 37,810. 21,388. 2 Savings and temporary cash investments 21,388. 3 Accounts receivable ▶ Less: allowance for doubtful accounts 4 Pledges receivable ► Less: allowance for doubtful accounts 5 Grants receivable 6 Receivables due from officers, directors, trustees, and other disqualified persons 7 Other notes and loans receivable . .. ▶ Less: allowance for doubtful accounts 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Investments - U.S. and state government obligations b Investments - corporate stock 11 Investments - land, buildings, and equipment basis Less accumulated depreciation 12 Investments - mortgage loans 13 Investments - other 14 Land, buildings, and equipment basis ▶ Less accumulated depreciation 15 Other assets (describe ► 37,810. 21,388. 16 Total assets (to be completed by all filers) 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue $20\,$ Loans from officers, directors, trustees, and other disqualified persons 21 Mortgages and other notes payable 22 Other liabilities (describe 0. 23 Total liabilities (add lines 17 through 22) Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31. 24 Unrestricted 25 Temporarily restricted 26 Permanently restricted Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. 37,810. 21,388 0. 28 Paid-in or capital surplus, or land, bldg., and equipment fund 0 0 29 Retained earnings, accumulated income, endowment, or other funds 37,810. 21,388 30 Total net assets or fund balances 37,810. 21,388 31 Total liabilities and net assets/fund balances Part III Analysis of Changes in Net Assets or Fund Balances

_	Total net assets or fund balances at beginning of year - Part II, column (a), line 30	Т		
•		١.		27 010
	(must agree with end-of-year figure reported on prior year's return)			37,810.
2	Enter amount from Part I, line 27a	2		-16,422.
3	Other increases not included in line 2 (itemize)	3		0.
4	Add lines 1, 2, and 3	4	Γ	21,388.
	Decreases not included in line 2 (itemize)	5		0.
6	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6		21,388.

30-0011318 Page 3

(a) List and descr	ibe the kır	nd(s) of property sold (e.g., or common stock, 200 shs.	real estate,	income	(b) I	How ac - Purc - Dona		(c) Date ac (mo., day	cquired y, yr.)	(d) Date sold (mo., day, yr.)
1a										
b NOI	NE				↓					
<u>c</u>										
<u>d</u>		·			╄					
<u>e </u>					<u> </u>	· -			<u> </u>	<u> </u>
(e) Gross sales price	(f) E	epreciation allowed (or allowable)		st or other basis expense of sale					in or (loss) (f) minus (
<u>a</u>										
<u>b</u>										
<u>c</u>		<u> </u>								
<u>d</u>			-		-					
Complete only for assets showin	0 03ID ID 0	l wall banks bas (h) amilia	ne foundation	on 12/31/60			(1)	Causa (Ca	l (h) anın	
Complete only for assets showin		· · · · · · · · · · · · · · · · · · ·					col.	Gams (Co (k), but no	L (h) gain ot less thai	minus 1 -0-) or
(i) F.M.V. as of 12/31/69		j) Adjusted basis as of 12/31/69		cess of col. (ı) col. (ı), ıf any					from col. (
_										
a b			 							
C		-							·	
d				 					-	
e										
<u>. c </u>			D. 41 line		╗		ĺ			
2 Capital gain net income or (net ca	prtal loss)	$ \begin{cases} \text{ If gain, also enter} \\ \text{If (loss), enter -0-} \end{cases} $	in Part I, line in Part I, line	<i>7</i>	. 👌	2				
3 Net short-term capital gain or (los If gain, also enter in Part I, line 8,			d (6):		}					
If (loss), enter -0- in Part I, line 8 Part V Qualification U	nder S	ection 4940(e) for	Peduced	Tay on Nat	Liny	3 Octn	cent Inc	ome.		
If section 4940(d)(2) applies, leave the Was the foundation liable for the sect if "Yes," the foundation does not qual 1. Enter the appropriate amount in 6	ion 4942 ify under s	tax on the distributable am section 4940(e). Do not coi	nplete this pa	ırt.						Yes X No
(a) Base period years		(b)	_		(c))		1	Dietrih	(d) ution ratio
Calendar year (or tax year beginnii	ng in)	Adjusted qualifying dist	ributions	Net value of no	onchá	ritable-	-use assets	(0	cor (p) qiv	ided by col. (c))
2009		7	5,352.			6	3,946	•		1.178369
2008			2,625.				1,058			1.525281
2007			0,512.				9,876			5.529943
2006			1,63 4.				4,655			2.194706
2005	<u></u>	28	1, <u>482.</u>	<u> </u>		11	5,240	•		2.442572
2 Total of line 1, column (d)								2		12.870871
3 Average distribution ratio for the state the foundation has been in existent		M		or by the numbe				3		2.574174
4 Enter the net value of noncharitab	ne-use as:	sels for 20 to from Part X, f	nie o					4		19,485.
5 Multiply line 4 by line 3								5		50,158.
6 Enter 1% of net investment incom	ne (1% of	Part I, line 27b)						6		0.
7 Add lines 5 and 6							•••	7		50,158.
8 Enter qualifying distributions from								8		96,422.
If line 8 is equal to or greater than See the Part VI instructions.	line 7, ch	eck the box in Part VI, line	1b, and comp	olete that part usi	ng a 1	% tax	rate.		·	

THE NEW HAMPSHIRE FOUNDATION FOR

Form	990-PF (2010) INNOVATION 30-0011	318		Page 4
Pa	irt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see i	nstru	ctio	ns)
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.			
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)			•
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here X and enter 1%			0.
	of Part I, line 27b			
C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			0.
3	Add lines 1 and 2			0.
4	Subtrtle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-			0.
	Credits/Payments:	1		
а	2010 estimated tax payments and 2009 overpayment credited to 2010			
þ	Exempt foreign organizations - tax withheld at source			
C	Tax paid with application for extension of time to file (Form 8868)			
đ	Backup withholding erroneously withheld			
	Total credits and payments. Add lines 6a through 6d		1	64.
	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		1	64.
	Enter the amount of line 10 to be: Credited to 2011 estimated tax			0.
	rt VII-A Statements Regarding Activities		V	I NO.
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in	H . H	res	No
	any political campaign?	1a	-	X
D	Did it spend more than \$100 during the year (either directly) for political purposes (see 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?	10		X
a	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			
	(1) On the foundation. \blacktriangleright \$ 0. (2) On foundation managers. \blacktriangleright \$ 0.			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. > \$ 0 •			
9	managers. • \$ \$ Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		x
2	If "Yes," attach a detailed description of the activities.	-		
2	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or			
J	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3	-	x
42	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X
	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X
	If "Yes," attach the statement required by General Instruction T.			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:	`		
	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	Х	ļ
7	Did the foundation have at least \$5,000 in assets at any time during the year?	7	X	
	If "Yes," complete Part II, col. (c), and Part XV.			
8a	Enter the states to which the foundation reports or with which it is registered (see instructions) NONE			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)			
	of each state as required by General Instruction G? If "No," attach explanation	8b	X	L_
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			1
	year 2010 or the taxable year beginning in 2010 (see instructions for Part XIV)? If "Yes," complete Part XIV	9	X	L
_10	Did any persons become substantial contributors during the tax year? if "Yes," attach a schedule listing their names and addresses	10		X

	THE NEW HAMPSHIRE FOUNDATION FOR			
	990-PF (2010) INNOVATION 30-0011	<u>318</u>		Page 5
Pa	rt VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			
	section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		<u>X</u> _
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before			
	August 17, 2008?	12		<u>X</u>
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	_X	
	Website address ► N/A			
14	The books are in care of PATRICIA HUMPHREY Telephone no.			
	Located at ►89 SOUTH ST, CONCORD, NH ZIP+4 ►03	<u> 301</u>		
15	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	<u>N</u>	/A	
16	At any time during calendar year 2010, 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		<u>X</u>
	See page 20 of the instructions for exceptions and filing requirements for Form TD F 90-22.1. If "Yes," enter the name of			
	the foreign country	L		
Pa	rt 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?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)	١.		
	a disqualified person? Yes X No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(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			
	for the benefit or use of a disqualified person)?		١.	
	(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.)			,
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	İ		
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see page 22 of the instructions)?	1b		<u> </u>
	Organizations relying on a current notice regarding disaster assistance check here			
	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected		1	
	before the first day of the tax year beginning in 2010?	1c		X
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)):			
á	At the end of tax year 2010, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning	ļ		
	before 2010? Yes X No	-	1	
	If "Yes," list the years >			
ı	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.)	2b		
	c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
	>			,
3:	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time		1	
	during the year? Yes X No			
1	b If "Yes," did it have excess business holdings in 2010 as a result of (1) any purchase by the foundation or disqualified persons after			·
	May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose			
	of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,			
	Form 4720, to determine if the foundation had excess business holdings in 2010.) N/A	3b		
A	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
	b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that		T -	<u> </u>
	had not been removed from jeopardy before the first day of the tax year beginning in 2010?	4b	-	X
	the net peer tourise nour leaker of a said on a mar sel at an end law and an an a said at a said			

orm 990-PF (2010) INNOVATION			<u>30-00113</u>	<u> 18</u>	Page 6
Part VII-B Statements Regarding Activities for Which F	orm 4720 May Be R	equired (continu	ued)		
5a During the year did the foundation pay or incur any amount to:		 -	[.	ł	
(1) Carry on propaganda, or otherwise attempt to influence legislation (section		•	s 🗶 No		
(2) Influence the outcome of any specific public election (see section 4955); or	to carry on, directly or indire	ectly,		.	
any,voter registration drive?		<u> </u> Ye	s X No		
(3) Provide a grant to an individual for travel, study, or other similar purposes?	·	Ye	s X No		
(4) Provide a grant to an organization other than a charitable, etc., organization	described in section				
509(a)(1), (2), or (3), or section 4940(d)(2)?		Ye	s X No		1 .
(5) Provide for any purpose other than religious, charitable, scientific, literary,					
the prevention of cruelty to children or animals?			s X No	1	1 -
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	er the exceptions described (•			1
section 53.4945 or in a current notice regarding disaster assistance (see instruc			N/A	5b	
Organizations relying on a current notice regarding disaster assistance check he			▶□		
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption for					1 :
• • • • • • • • • • • • • • • • • • • •		/A Ye	s 🔲 No		
		/# <u> </u>	.5	Ì	
If "Yes," attach the statement required by Regulations section 53.4945					1 .
6a Did the foundation, during the year, receive any funds, directly or indirectly, to p			s X No	- 1	
a personal benefit contract?		L Y6	i	~	.
b Did the foundation, during the year, pay premiums, directly or indirectly, on a po	ersonal benefit contract?			6b	<u> </u>
If "Yes" to 6b, file Form 8870				-	
7a At any time during the tax year, was the foundation a party to a prohibited tax sl	helter transaction?	└ Y€	es LXL No L		
b If "Yes," did the foundation receive any proceeds or have any net income attribu				7b	
Part VIII Information About Officers, Directors, Truste	es, Foundation Ma	nagers, Highly	/		
Faid Employees, and Contractors					
List all officers, directors, trustees, foundation managers and their		(a) Componention	(d) Contributions to	1 (.) (5)	
(a) Name and address	(b) Title, and average hours per week devoted	(c) Compensation (If not paid.	(d) Contributions to employee benefit plans and deferred	accour	pense it, other
(a) Name and address	to position	(If not paid, enter -0-)	compensation	allow	ances
				}	
SEE STATEMENT 5		0.	0.	<u> </u>	0.
				1	
				<u> </u>	
				Ì	
			ŀ		
Compensation of five highest-paid employees (other than those inc	luded on line 1). If none,	enter "NONE."			
	(b) Title, and average		(d) Contributions to employee benefit plans	(e) E	xpense nt, other
(a) Name and address of each employee paid more than \$50,000	` hours per week devoted to position	(c) Compensation	employee benefit plans and deferred compensation	accour	nt, other /ances
NONE					
NOME					
		· · · · · · · · · · · · · · · · · · ·	-	+	
		 	 	+	
			1		
		 	 	 	
			-	 	
<u> </u>					
	L	<u> </u>	L	1	
Total number of other employees paid over \$50,000			>		0

THE NEW HAMPSHIRE FOUNDATION FOR

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Part VIII Information About Officers, Directors, Trustees, Found Paid Employees, and Contractors (continued)	ation Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, ent	er "NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
MATTHEW SOUTHERTON - 137 HANNAH NUTTER RD,		
CENTER BARNSTEAD, NH 03224	CONSULTING	75,900.
Total number of others receiving over \$50,000 for professional services) 1
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant star number of organizations and other beneficiaries served, conferences convened, research papers pr	tistical information such as the oduced, etc.	Expenses
1 N/A		
2		-
3		
4		
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year	on lines 1 and 2.	Amount
1 N/A		
2		
All other program-related investments. See instructions.		
3		
The Addition of the court O		0.
Total. Add lines 1 through 3		<u> </u>

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations, se	e instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
а	Average monthly fair market value of securities	1a	19,782.
b	Average of monthly cash balances	1b	
C	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	19,782.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	19,782.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	297.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	19,485.
6	Minimum investment return. Enter 5% of line 5	6	974.
Р	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and foreign organizations check here X and do not complete this part.)	d certain	
1	Minimum investment return from Part X, line 6	1	
2a	Tax on investment income for 2010 from Part VI, line 5 2a		
b	Income tax for 2010. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	
6	Deduction from distributable amount (see instructions)	6	<u> </u>
7_	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	96,422.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Surtability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	96,422.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		·
	income. Enter 1% of Part I, line 27b	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	96,422.
	Note. The amount on line 6 will be used in Part V. column (b), in subsequent years when calculating whether the foundation (qualifies for t	ne section

Form **990-PF** (2010)

4940(e) reduction of tax in those years.

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Part XIII Undistributed Income (see instructions)

	(a)	(b)	(c)	(d)
A Distributable association code (completely)	Corpus	Years prior to 2009	2009	2010
1 Distributable amount for 2010 from Part XI, line 7				0.
2 Undistributed income, if any, as of the end of 2010				<u> </u>
- Enter amount for 2000 only			0.	
b Total for prior years:				
,		0.		
3 Excess distributions carryover, if any, to 2010:				
a From 2005			,	
b From 2006				
c From 2007		`		
d From 2008	•			
e From 2009				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2010 from			•	
Part XII, line 4: ►\$ N/A				
a Applied to 2009, but not more than line 2a			0.	,
b Applied to undistributed income of prior				,
years (Election required - see instructions)		0.	<u> </u>	
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2010 distributable amount				0.
e Remaining amount distributed out of corpus	0.			
Excess distributions carryover applied to 2010 (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	0.			
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 2009. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2010. Subtract				
lines 4d and 5 from line 1. This amount must	-			
be distributed in 2011				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2005				, -
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2011.	_			
Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9:		_		
a Excess from 2006		•		
b Excess from 2007				
c Excess from 2008				
d Excess from 2009				
e Excess from 2010			L	5. 000 DE (0040)

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Part XIV Private Operating Fo	oundations (see instr	ructions and Part VII-	A, question 9)					
1 a If the foundation has received a ruling or	r determination letter that it	is a private operating						
foundation, and the ruling is effective for	2010, enter the date of the	ruling	•					
b Check box to indicate whether the found	lation is a private operating	foundation described in	section . X 4	94 <u>2(j)(3)</u> or 4942	?(j)(5)			
2 a Enter the lesser of the adjusted net								
income from Part I or the minimum	(a) 2010	(b) 2009	(c) 2008	(d) 2007	(e) Total			
investment return from Part X for			,					
each year listed	8.	22.	113.	1,158.	1,301.			
b 85% of line 2a	7.	19.	96.	984.	1,106.			
c Qualifying distributions from Part XII,								
line 4 for each year listed	96,422.	75,352.	62,625.	220,524.	454,923.			
d Amounts included in line 2c not		• • • • • • • • • • • • • • • • • • • •	,					
used directly for active conduct of								
exempt activities	0.	0.	0.	0.	0.			
e Qualifying distributions made directly								
for active conduct of exempt activities.								
Subtract line 2d from line 2c	96,422.	75,352.	62,625.	220,524.	454,923.			
3 Complete 3a, b, or c for the			- 1		, , , , , , , , , , , , , , , , , , ,			
alternative test relied upon: a "Assets" alternative test - enter:								
(1) Value of all assets					0.			
(2) Value of assets qualifying								
under section 4942(j)(3)(B)(i)					0.			
b "Endowment" alternative test - enter		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,						
2/3 of minimum investment return								
shown in Part X, line 6 for each year listed	649.	2,131.	1,369.	1,329.	5,478.			
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)					0.			
(2) Support from general public								
and 5 or more exempt organizations as provided in								
section 4942(j)(3)(B)(III)	İ				0.			
(3) Largest amount of support from								
an exempt organization					0.			
(4) Gross investment income		22.			22.			
Part XV Supplementary Info			f the foundation b	nad \$5,000 or mor	e in assets			
at any time during t	the year-see the in	structions.)						
1 Information Regarding Foundation	on Managers:							
a List any managers of the foundation wh			ibutions received by the fo	oundation before the close	of any tax			
year (but only if they have contributed in	nore than \$5,000). (See sec	ction 507(d)(2).)						
NONE			-					
b List any managers of the foundation wh			or an equally large portion	of the ownership of a part	mership or			
other entity) of which the foundation ha	s a 10% or greater interest.	•						
NONE				 .				
2 Information Regarding Contribut		• • • •	-					
Check here X if the foundation of the foundation makes gifts, grants, etc.								
	<u> </u>			ipiele nems za, u, c, and u				
a The name, address, and telephone num	ber of the person to whom	applications should be a	addressed:					
b The form in which applications should b	e submitted and information	on and materials they sh	ould include:					
c Any submission deadlines:	· · · · · · · · · · · · · · · · · · ·							
				hay factores	···			
d Any restrictions or limitations on award	s, such as by geographical	areas, charnadie tieids, i	หเกตร ชา เกรนเนนอกร, อา อน	HEL TACTORS.				

Form 990-PF (2010) Part XV Supplementary Information (continued)

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3 Grants and Contributions Paid During the Year or Approved for Future Payment Recipient Recipie							
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							
NONE							
			:				
Total Approved for future payment	·	<u> </u>	▶ 3a				
, , , , , , , , , , , , , , , , , , , ,							
NONE							
Total			▶ 3b				
Total			<u> </u>	rm 990-PF (20			

11

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Part XVI-A **Analysis of Income-Producing Activities**

Enter gross amounts unless otherwise indicated.	Unrelated	business income		ed by section 512, 513, or 514	(e)
•	(a) Business	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income
1 Program service revenue:	code		Code	,	
<u> </u>	 		 		
b	l		+ +		
<u> </u>	-		+ +		
d		· · · · · · · · · · · · · · · · · · ·	++		_
e			+-+		
f			↓		
g Fees and contracts from government agencies			1		
2 Membership dues and assessments					
3 Interest on savings and temporary cash	1				
investments					
4 Dividends and interest from securities		·	14	8.	
5 Net rental income or (loss) from real estate:					
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal					
property			1	İ	
7 Other investment income					
8 Gain or (loss) from sales of assets other					
then inventory	1		1 1		
9 Net income or (loss) from special events					
10.0		_	1		
10 Gross profit or (loss) from sales of inventory			+		
a b			+ +	-	
	 		1 1		
<u> </u>	 		+ +		
d	 				
e		0	++	8.	
12 Subtotal Add columns (b), (d), and (e)	L	<u> </u>	•		
13 Total. Add line 12, columns (b), (d), and (e)			• • •		8.
Part XVI-B Relationship of Activities to Line No. Explain below how each activity for which incomplete the foundation's exempt purposes (other than	me is reported in	n column (e) of Part XVI-			nplishment of
			- <u>-</u>		
					<u></u>
					
					
			•		
				· -	
			-		
		<u> </u>			
			-		
				_ _	
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THE NEW HAMPSHIRE FOUNDATION FOR

Form 990-PF (2010) INNOVATION

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Pa	rt XV	II Information Re Exempt Organ		isfers To a	and Trans	actions a	nd Relation	ships With No	oncharitabl	le	
1	Did the	organization directly or indir		of the following	a with any oth	er organizatio	n described in se	ction 501(c) of		Yes	No
•		de (other than section 501(c)			-			50 1(c) 01			110
2		ers from the reporting found				ondoar organ	izadono:				-
•	(1) Ca	• •			yamzadon oi.				1a(1	, l	X
		sh her assets							1a(2		X
h		ransactions:	•••••			•		•••	1812	-	<u> </u>
U			hla avamat araaniz	ston					15/1		X
		iles of assets to a noncharital irchases of assets from a noi						· · ·	1b(1	1	X
							· · · · · ·		1b(2		X
		ental of facilities, equipment,			•			• • • • • • •	. 1b(3		X
		embursement arrangements				•			1b(4		X
		ans or loan guarantees				• •	•		1b(5	1	
	• •	erformance of services or me	•	•	-			•	1b(6	4	X
		g of facilities, equipment, ma				 (h) ahauld ah	ahaw tha faw		1 <u>c</u>		Α
đ		nswer to any of the above is									
		ices given by the reporting for			eo iess than ia	ır market valu	ie in any transacti	on or snaring arrang	ement, snow in		
<u>/^\.</u>		(d) the value of the goods,	,		avamet erasi	umtion.	(4) -				
(a)L	ine no	(b) Amount involved	(c) Name o	of noncharitable	e exempt organ	IIZALIOII	(0) Descripti	on of transfers, transact	tions, and sharing	атталдет	ents
				N/A							
						_			 -		
			_								
		. _	ļ <u>-</u>								
		<u> </u>		<u>.</u>							
			ļ								
						·					
2a	Is the f	foundation directly or indirec	tly affiliated with, or	related to, one	or more tax-e	xempt organı	zations described				_
	ın sect	ion 501(c) of the Code (othe	r than section 501(d	c)(3)) or in sect	tion 527? _				Ye:	s 🔀	No
<u>b</u>	If "Yes,	complete the following sch	edule.		T						
		(a) Name of org	janization		(b) Type of	organization		(c) Description of	relationship		
_		N/A									
					_						
_			· · · · · · · · · · · · · · · · · · ·		<u> </u>		<u> </u>				
		Inder penalties of perjury, I declar							lge and belief, it is	true, com	ect,
	gn	and compléte Declaration of prepa	arectother than taxpaye	er or fiduciary) is Da	ased on all infort	nation of which	preparer has any kho	rwieage /			
H	ere 📗	XIIam	e TIY			3/12	112	Cha	Mma	~	
		Signature of officer or tri	ustee V			Dayte		Title			
		Print/Type preparer's na	ame	Preparer's s	ignature		Date	Check rf	PTIN		
		MURIEL D.	SCHADEE,	a	_	_ MA	R 0 1 2012	self- employed			
Pa	iid	CPA		Mum	e) 30fo	encea MA			P0035	<u> 20</u> 85	,
Pr	epare		HAN WECH	SLER &	COMPAN	Y, P.A		Fırm's EIN ▶			
Us	e On										
		Firm's address ► 70	COMMERC	TAL STR	EET. S	UITE 4	01				

Form **990-PF** (2010)

603-224-5357

Phone no.

CONCORD, NH 03301

Schedule B

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

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

▶ Attach to Form 990, 990-EZ, or 990-PF.

OMB No 1545-0047

2010

Employer identification number

	IE NEW HAMPSHIRE FOUNDATION FOR	30-0011318
Organization type (check o		
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a private foundation	
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundation	
	501(c)(3) taxable private foundation	
General Rule	(7), (8), or (10) organization can check boxes for both the General Rule and a Special Ru n filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in me	
Special Rules		
509(a)(1) and 170(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the reg b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the ij) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts I and II.	
aggregate contribu	c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contri itions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, cruelty to children or animals. Complete Parts I, II, and III.	
contributions for u If this box is check purpose. Do not co	c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributes exclusively for religious, chantable, etc., purposes, but these contributions did not agreed, enter here the total contributions that were received during the year for an exclusive complete any of the parts unless the General Rule applies to this organization because it e, etc., contributions of \$5,000 or more during the year.	gregate to more than \$1,000. ly religious, charitable, etc., received nonexclusively
but it must answer "No" on	hat is not covered by the General Rule and/or the Special Rules does not file Schedule E Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ, or on line 2 ng requirements of Schedule B (Form 990, 990-EZ, or 990-PF).	

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2010)

	orm 990, 990-EZ, or 990-PF) (2010)		Page 1 of 1 of Part I
	ganization EW HAMPSHIRE FOUNDATION FOR ATION.		oloyer identification number 30-0011318
Part I	Contributors (see instructions)		30-0011318
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	PATRICIA HUMPHREY 89 SOUTH STREET	\$ <u>80,000</u>	-
	CONCORD, NH 03301		(Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contribution	(d) S Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contribution	(d) S Type of contribution

023452 12-23-10 Schedule B (Form 990, 990-EZ, or 990-PF) (2010)

Payroll

(Complete Part II if there is a noncash contribution.)

of Part II

Name of organization

THE NEW HAMPSHIRE FOUNDATION FOR

INNOVATION

30-0011318

Part II 'Nor	ncash Pr	operty	(see instructions)
--------------	----------	--------	--------------------

	Noncash Property (see instructions)		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. om art I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. rom art 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
		\$	
(a) No. rom art 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
		 \$	

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	nization		Employer identification number
HE NE	W HAMPSHIRE FOUNDATION	FOR	
'AVON	TION		30-0011318
art III	Exclusively religious, charitable, etc., in more than \$1,000 for the year. Complet Part III, enter the total of exclusively religions \$1,000 or less for the year. (Enter this information)	e columns (a) through (e) and the ous, charitable, etc., contributions	
) No.			
rom Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-			
.			
-		(e) Transfer of gif	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 gif	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 gif	ft
	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
1			
—			
		(e) Transfer of gif	ft

FORM 990-PF DIVIDEND	S AND	INTER	EST FROM	SECUE	RITIES	ST	'ATEMENT	1
SOURCE		GROSS	AMOUNT		TAL GAINS	C	OLUMN (A) AMOUNT)
SECURITIES	•		8.		0.			8.
TOTAL TO FM 990-PF, PART I, I	.N 4		8.		0.			8.
FORM 990-PF	AC	COUNTI	NG FEES			ST	ATEMENT	2
DESCRIPTION	EXPE	A) NSES BOOKS	(B) NET INVE MENT INC		(C) ADJUSTED NET INCOM		(D) CHARITAE PURPOSE	
ACCOUNTING SERVICES		1,300.		0.		0.	1,300.	
TO FORM 990-PF, PG 1, LN 16B		1,300.		0.		0.	1,30	0.
FORM 990-PF C	THER	PROFES	SIONAL FI	EES		ST	ATEMENT	3
DESCRIPTION	EXPE	A) NSES BOOKS	(B) NET INVI MENT INC		(C) ADJUSTED NET INCOM		(D) CHARITAE PURPOSE	
CONSULTANTS INVESTMENT FEES	9	4,650. 180.	-	0.		0.	94,65	50. 72.
TO FORM 990-PF, PG 1, LN 16C =	9	4,830.		8.		0.	94,82	22.
FORM 990-PF	0	THER E	XPENSES			SI	ATEMENT	4
DESCRIPTION	EXPE	A) NSES BOOKS	(B) NET INVI MENT INC		(C) ADJUSTED NET INCOM		(D) CHARITAE PURPOSE	
WIRE FEES		300.		0.		0.	30	00.
TO FORM 990-PF, PG 1, LN 23		300.		0.		0.	30	00.

	LIST OF OFFICERS, DAND FOUNDATION MANAGE		STATI	EMENT 5
NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	
GORDON J HUMPHREY 89 SOUTH ST CONCORD, NH 03301	PRESIDENT 3.00	0.	0.	0.
PATRICIA G HUMPHREY 89 SOUTH ST CONCORD, NH 03301	TREASURER 3.00	0.	0.	0.
SHARI DEMERS 89 SOUTH ST CONCORD, NH 03301	VICE-PRESIDENT 3.00	0.	0.	0.
JIM O' BRIEN 89 SOUTH ST CONCORD, NH 03301	VICE-PRESIDENT 3.00	0.	0.	0.
CRAIG SMITH 89 SOUTH ST CONCORD, NH 03301	VICE-PRESIDENT 3.00	0.	0.	0.
BRIAN MOUSHEGIAN 89 SOUTH ST CONCORD, NH 03301	VICE-PRESIDENT 3.00	0.	0.	0.
TOTALS INCLUDED ON 990-PF, PAGE	E 6, PART VIII	0.	0.	0.