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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

OMB No 1545-0052

Open to Public Inspection

Fo	r ca	alendar year 2012 or tax year be	ginning	1/1/2012 , a	nd ending	12	/31/2012		
Na	me c	of foundation	<u>-</u>		,	AE	mployer identification nu	mber	
ME	۱۸/ ۱	HAMPSHIRE BALL BEARINGS F	OLINDATION				02-6005	861	
		er and street (or P O box number if mail is n		dress)	Room/suite	ВТ	elephone number (see inst		
				,			(818) 407-	9300	
		INDEPENDENCE AVENUE town, state, and ZIP code				0 4	exemption application is pe		<u>_</u>
				0.4	04244 4222	"	exemption application is pe	mung, check here	
		SWORTH		CA	91311-4323	┧	F	al bara	. □
G	Ch	neck all that apply:		I return of a former	public charity	D 1.	Foreign organizations, che	ck nere	▶□
		Final ret		nded return		2.	Foreign organizations mee	_	. —
		Address	<u></u>	e change			check here and attach con	nputation	▶∐
Н	Ch	neck type of organization [.] 🔲 Sec	tion 501(c)(3) exe	mpt private foundati	on	E If	private foundation status w	as terminated	
	Se	ection 4947(a)(1) nonexempt char	itable trust 🔲 C	Other taxable private	foundation	ur	nder section 507(b)(1)(A), c	heck here	▶□
$\overline{}$	Fai	air market value of all assets at en	J Accounting i	method: X Casl	h Accrual	FIF	the foundation is in a 60-m	onth termination	
•		year (from Part II, col. (c),	Other (sp			u	nder section 507(b)(1)(B), c	heck here	
	line	e 16) ► \$ 125,4	45 (Part I, column (d	i) must be on cash bas	sis)				
Pa	rt I	Analysis of Revenue and Ex	penses (The total of	(a) Revenue and			(1) 44 -4-4 -4	(d) Disbursem	
		amounts in columns (b), (c), and (d) may	not necessarily equal	expenses per	(b) Net investmincome	nent	(c) Adjusted net income	for charitabl purposes	
		the amounts in column (a) (see instruction	ons))	books	I III III		I III III III III III III III III III	(cash basis of	
	1	1 Contributions, gifts, grants, etc., receive	d (attach schedule)	24,000	See Stmt 5				
	2		•						
	3	_	•	84		84	See Stmt 6		
	4								
	5	5 a Gross rents			~-~				
		b Net rental income or (loss)	·						
Revenue	6	6 a Net gain or (loss) from sale of ass	ets not on line 10						
ē		b Gross sales price for all assets on line 6							
ě	7								
Œ	8	_							
	9	_ · · · · · ·							
	10	0 a Gross sales less returns and allowance:	, I ·	-	·				
	``	b Less Cost of goods sold							
	ļ	c Gross profit or (loss) (attach sched	iule) .						
2013	11								
20	12	2 Total. Add lines 1 through 11		24,084		84	0		
<u>=</u>	13		s trustees etc	2,,00	 .			-	
AN SON	14	•							
≥ë	15								
§ §	16	6 a Legal fees (aftach schedule)	 						
ŽX ŽXŽ	1	b Accounting-fees-(attach-schedule)				•			
Administrative I					İ				
at :	17	- 131 WAY 7 8 /1113 TO	,						
st	18	1 1 1 1 1 1 2 2	. *	75		75	See Stmt 4		
] 	19	l l	1						
Ē	20	1 ']				· · · · · ·		
ĕ	21	· · · · · · · · · · · · · · · · · · ·							
and	22		·	- · · · · · · · · · · · · · · · · · · ·					
ਰ	23	- · · · · · · · · · · · · · · · · · · ·		· 	<u> </u>				
Operating	24	The state of the s					· · ·		
ati	<u> </u>	Add lines 13 through 23 .	·	75	;	75	o		0
ĕ	25	_			See Stmt 3				5,250
ŏ	26	-	dd lines 24 and 25	15,325	1	75	0		5,250
_	27			10,320	<u>'</u>			<u>_</u> '	3,200
	21		dichumomanta	8,759	1		•		i
	1	a Excess of revenue over expenses and b Net investment income (if negation)		0,738		9			
	1	c Adjusted net income (if negative	•						

Б	4 11	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions.)	Beginning of year	End o	t year
ra	rt li	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	2,315	1,991	
	2	Savings and temporary cash investments	114,371	123,454	123,454
	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 (attach schedule) (see instructions) .			
	7	Other notes and loans receivable (attach schedule)			·
		Less allowance for doubtful accounts			
10	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges		Ť	
SS	1 *	A Investments—U S and state government obligations (attach schedule)		<u> </u>	··
⋖		D Investments—corporate stock (attach schedule)			
		• • • • • • • • • • • • • • • • • • • •			
	١	c Investments—corporate bonds (attach schedule)			
	11	Investments—land, buildings, and equipment basis			
		Less accumulated depreciation (attach schedule)			
	12	Investments—mortgage loans	_		
	13	Investments—other (attach schedule)			
	14	Land, buildings, and equipment basis ▶			
		Less accumulated depreciation (attach schedule)			
	15	Other assets (describe)			
	16	Total assets (to be completed by all filers—see the			
		instructions Also, see page 1, item I)	116,686	125,445	125,445
	17	Accounts payable and accrued expenses .			
G	18	Grants payable			
ţ.	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
jak	21	Mortgages and other notes payable (attach schedule)			
_	22	Other liabilities (describe)			
	23	Total liabilities (add lines 17 through 22)	0	0	
		Foundations that follow SFAS 117, check here			
es		and complete lines 24 through 26 and lines 30 and 31.			
2	24	Unrestricted		İ	
<u>E</u>		Temporarily restricted	-		
ä	26				
nd	20	Permanently restricted Foundations that do not follow SFAS 117, check here			
Net Assets or Fund Balances		Foundations that do not follow SFAS 117, check here and complete lines 27 through 31.			
7	27	Capital stock, trust principal, or current funds	116,685	125,445	
Ś	27	Paid-in or capital surplus, or land, bldg, and equipment fund	110,000	120,440	
set	28				
Š	29 30	Retained earnings, accumulated income, endowment, or other funds	116,685	125,445	
ĭ		Total net assets or fund balances (see instructions)	110,000	120,440	
ž	31	Total liabilities and net assets/fund balances (see instructions)	146 605	105 445	
D			116,685	125,445	
	1 W	Analysis of Changes in Net Assets or Fund Balances	20 (must see see the		
1		net assets or fund balances at beginning of year—Part II, column (a), line	30 (must agree with		440.005
_		of-year figure reported on prior year's return)		· 1	116,685
		r amount from Part I, line 27a		2	8,759
		r increases not included in line 2 (itemize)		3	40= 444
		ines 1, 2, and 3 .	•	. 4	125,444
		eases not included in line 2 (itemize)		5	
6	Total	net assets or fund balances at end of year (line 4 minus line 5)-Part II, c	olumn (b), line 30 .	6	125 444

Part IV Capital Gains and	Losses for Tax on Inve	<u>stme</u>	<u>nt Incoi</u>	<u>ne</u>			
(a) List and describe the k	ind(s) of property sold (e.g., real esta or common stock, 200 shs MLC Co			(b) How acquired P—Purchase D—Donation		Date acquired no , day, yr)	(d) Date sold (mo , day, yr)
1a							
b							
c							·
d							
е							
(e) Gross sales price	(f) Depreciation allowed (or allowable)			other basis nse of sale			or (loss)) minus (g)
a						1-7-	
b							
С							
d				···			
e							
Complete only for assets showin	g gain in column (h) and owned	by the	foundation	on on 12/31/69		(i) Gains (Col	(h) gain minus
(I) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69			ss of col (i) (j), if any		• • •	less than -0-) or om col (h))
a			•				
b							·
С							
d							
e					<u> </u>		
2 Capital gain net income or (n	et capital loss) $\begin{cases} If gain, a \\ If (loss), \end{cases}$			rt I, line 7	2		0
3 Net short-term capital gain of	r (loss) as defined in section	is 122	2(5) and	(6):			
If gain, also enter in Part I, lir							
in Part I, line 8				<u> J</u>	3		0
Part V Qualification Unde	r Section 4940(e) for Re	duce	d Tax o	n Net Investm	ent Ir	ncome	
If section 4940(d)(2) applies, lea Was the foundation liable for the If "Yes," the foundation does not	section 4942 tax on the dis				n the b	ase period?	Yes X No
	nt in each column for each				e mak	ing any entrie	S.
(a)	(b)			(c)	i		(d)
Base period years	Adjusted qualifying distribution	ns	Net value	of nonchantable-use a	ssets		nbution ratio
Calendar year (or tax year beginning in)		5,000		111	5,403	(0) (0)	vided by col (c)) 0 216632
2011		1,500			3,642		0.105852
<u>2010</u> 2009		7,000			3,809		0.103032
2009		2,750			5,374		0.238535
2007		5,250	-		9,904		0.169625
2001		J,200 ₁			7,00 1		0.100020
2 Total of line 1, column (d)3 Average distribution ratio for						2	0.902693
the number of years the foun						3	0.180539
4 Enter the net value of noncha	arıtable-use assets for 2012	from I	Part X, III	ne 5		4	119,249
5 Multiply line 4 by line 3						5	21,529
6 Enter 1% of net investment in	ncome (1% of Part I, line 27	'b) .			.	6	
7 Add lines 5 and 6					.	7	21,529
8 Enter qualifying distributions	from Part XII, line 4				. [8	15,250
If line 8 is equal to or greater the Part VI instructions.	than line 7, check the box i	in Part	VI, line	b, and complete	that p	part using a 1	% tax rate. See

Pa	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948	—se	<u>e instru</u>	ction	s)	
1 a	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)				ļ	
Ł	Domestic foundations that meet the section 4940(e) requirements in Part V, check	_1				
	here ▶ ☐ and enter 1% 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-)	2_	<u> </u>		0	
3	Add lines 1 and 2	3_			0	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	4	<u> </u>			
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-	5			0	
6	Credits/Payments		ļ			
_	2012 estimated tax payments and 2011 overpayment credited to 2012 . 6a					
	Exempt foreign organizations—tax withheld at source Tax paid with application for extension of time to file (Form 8868)					
			:			
7	Backup withholding erroneously withheld . 6d 6d	7		ł	0	
8	Enter any penalty for underpayment of estimated tax. Check here	8			ᅴ	
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9			0	
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10			0	
11	Enter the amount of line 10 to be Credited to 2013 estimated tax Refunded	11			0	
Pa	rt VII-A Statements Regarding Activities					
					Yes	No
1 2	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it				163	X
	participate or intervene in any political campaign?	•		1a		
	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the definition)?			1 _b	1	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		Х
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year					
	(1) On the foundation ▶\$ (2) On foundation managers ▶\$					
6	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed					
	on foundation managers > \$					
2				2		X
	If "Yes," attach a detailed description of the activities					
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles					
	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes .		•	3		<u> X</u>
4 a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?.			4a		_X_
t	If "Yes," has it filed a tax return on Form 990-T for this year?			-	N/A	
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 applications that applications are supplied to the second of the second					
7	that conflict with the state law remain in the governing instrument?	d D.		7	X	
7 2 -	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), a	iiiu Pa	ii XV		-	
0 6	Enter the states to which the foundation reports or with which it is registered (see instructions)					
ŀ	olf 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	Х	
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 2012 or the taxable year beginning in 2012 (see instructions for Part XIV)? If "Yes,"					
	complete Part XIV			9		Х
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing	•	-			
	their names and addresses . See Stmt 5.			10	\mathbf{x}	

Form 990-PF (2012) **NEW HAMPSHIRE BALL BEARINGS FOUNDATION** 02-6005861 Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued) 5a During the year did the foundation pay or incur any amount to X No (1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? (2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive? (3) Provide a grant to an individual for travel, study, or other similar purposes? (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)? (see instructions) (5) Provide for any purpose other than religious, charitable, scientific, literary, or X No educational purposes, or for 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 under the exceptions described in Regulations section 53 4945 or in a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance check here c 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? 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 | X | No premiums on a personal benefit contract? Yes b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If "Yes" to 6b, file Form 8870 X No 7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, Part VIII and Contractors 1 List all officers, directors, trustees, foundation managers and their compensation (see instructions). (b) Title, and average (c) Compensation (d) Contributions to (e) Expense account. (if not paid, enter (a) Name and address hours per week employee benefit plans other allowances devoted to position and deferred compensation Gary Yomantas President 9700 Independence Avenue Chatsworth, CA 91 n Treasurer James B Petersen 9700 Independence Avenue Chatsworth, CA 91 0 Richard Conner Secretary 9700 Independence Avenue Chatsworth, CA 91 Gary Groleau / Donna Marcin Trustees 9700 Independence Avenue Chatsworth, CA 91 2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). 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			<u>></u>	

Part VIII Information About Officers, Directors, Trustee	es, Foundation Managers, Highly Pai	d Employees,
and Contractors (continued)	(and instructions) If name onton "NONE"	
3 Five highest-paid independent contractors for professional services		(a) Componentia
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional service	s	
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevithe number of organizations and other beneficiaries served, conferences convened, research		Expenses
1		
2		
3	•••••	
4		
Part IX-B Summary of Program-Related Investments (se		
Describe the two largest program-related investments made by the foundation during the tax	x year on lines 1 and 2	Amount
1		
2		
All other program-related investments. See instructions	•	
3		
		
Total. Add lines 1 through 3		l c

Form **990-PF** (2012)

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

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

income Enter 1% of Part I, line 27b (see instructions)

Adjusted qualifying distributions. Subtract line 5 from line 4

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

5

6

5

6

17,990

12,065

6,072 19,230

9,288

10

Analysis of line 9

a Excess from 2008.

b Excess from 2009 c Excess from 2010

d Excess from 2011

e Excess from 2012

	n 990-PF (2012) NEW HAMPSHIRE BALL B				02-600	
	rt XIV Private Operating Foundations (N/A
1 a	If the foundation has received a ruling or determine			_		
	foundation, and the ruling is effective for 2012, en		_	•		
	 Check box to indicate whether the foundation is a Enter the lesser of the adjusted net 	private operating for	undation described		4942(J)(3) or	4942(J)(5)
2 a	income from Part I or the minimum	Tax year		Prior 3 years		(e) Total
	investment return from Part X for each	(a) 2012	(b) 2011	(c) 2010	(d) 2009	
	year listed			 		0
	85% of line 2a			-		0
С	Qualifying distributions from Part XII, line 4 for each year listed					0
-	Amounts included in line 2c not used directly			 	 -	0
	for active conduct of exempt activities .					0
е	Qualifying distributions made directly for active conduct of exempt activities					
3	Subtract line 2d from line 2c		<u> </u>	 		0
	Complete 3a, b, or c for the alternative test relied upon: "Assets" alternative test—enter					
	(1) Value of all assets			<u> </u>	ļ	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					0
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				-	0
	and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					0
	(3) Largest amount of support from an exempt organization .					0
	(4) Gross investment income					0
Pa	rt XV Supplementary Information (Co	•	_	undation had \$5	,000 or more in	
	assets at any time during the ye		tions.)			
1	Information Regarding Foundation Mana		00/ 6/1 4 4 4			
а	List any managers of the foundation who have co before the close of any tax year (but only if they h				the foundation	
NC	NE		·	, , , , , , , , , , , , , , , , , , , ,		
	List any managers of the foundation who own 10%	% or more of the stoo	k of a corporation	(or an equally large p	ortion of the	
<u>NC</u>	ownership of a partnership or other entity) of which	h the foundation has	a 10% or greater i	nterest		
2	Information Regarding Contribution, Gran	nt, Gift, Loan, Sch	nolarship, etc., I	Programs:		
	Check here In the foundation only makes unsolicited requests for funds. If the foundation mother conditions, complete items 2a, b, c, and d			•	•	
а	The name, address, and telephone number or e-r	nail of the person to	whom applications	should be addressed	<u> </u>	
	SEE STATEMENT 7					
b	The form in which applications should be submitted	ed and information a	nd materials they s	hould include.		
	SEE STATEMENT 7					
c	Any submission deadlines.					
	CEE STATEMENT 7					
	SEE STATEMENT 7 Any restrictions or limitations on awards, such as	by geographical are:	as, charitable fields	s. kinds of institutions	or other	
	factors	= ,	,	.,	•	
	SEE STATEMENT 7					

3	Grants and Contributions Paid During th	e Year or Approved	for Future I	Payment	
	Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
	Name and address (home or business)	or substantial contributor	recipient		
а	Paid during the year				
	SEE STATEMENT 3				15,250
		}			
		1			
			1		
_	Total		<u> </u>	▶ 3a	15,250
b	Approved for future payment				
	Total			▶ 3b	0

	IVILIES				
Enter gross amounts unless otherwise indicated	Unrelated but	siness income	Excluded by section	on 512, 513, or 514	(e)
	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income
1 Program service revenue					(See instructions)
a <u>N/A</u>					
b					
С					
d					
e					
f			_		_
g Fees and contracts from government agencies		_			
2 Membership dues and assessments .					
3 Interest on savings and temporary cash investments					
4 Dividends and interest from securities					
5 Net rental income or (loss) from real estate:	T WAR THE	教が、経験	通信運用	調の対象の概念	网络印刷
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					
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory .					
11 Other revenue. a					•
b		-			
G					
d					
e					
12 Subtotal Add columns (b), (d), and (e)	PARTICIPATION !	0	CONTRACTOR OF STREET	0	C
4	2530000	0	200×30000000	40	0
		0	I shake the state of the state of		
13 Total. Add line 12, columns (b), (d), and (e)					
13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities to the Additional Explain below how each activity for which income	complishment	of Exempt Poumn (e) of Part X	urposes VI-A contributed in	. 13	C
13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities to the Ad Line No. Explain below how each activity for which inconthe accomplishment of the foundation's exempt	complishment	of Exempt Poumn (e) of Part X	urposes VI-A contributed in	. 13	C
13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities to the Additional Explain below how each activity for which income	complishment	of Exempt Poumn (e) of Part X	urposes VI-A contributed in	. 13	C
13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities to the Ad Line No. Explain below how each activity for which inconthe accomplishment of the foundation's exempt	complishment	of Exempt Poumn (e) of Part X	urposes VI-A contributed in	. 13	C
13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities to the Ad Line No. Explain below how each activity for which inconthe accomplishment of the foundation's exempt	complishment	of Exempt Poumn (e) of Part X	urposes VI-A contributed in	. 13	C
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Form 990-PF (2012) NEW HAMPSHIRE BALL BEARINGS FOUNDATION 02-6005861

Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable **Exempt Organizations**

				ingage in any of the f						res	NO
in	section	501(c) of the Code	(other than s	section 501(c)(3) orga	anızations) o	r in sec	tion 527, relatin	g to political			
org	ganizati	ons?		_							
	-		foundation to	a noncharitable ever	mnt organiza	tion of					
	ansters Cash			a noncharitable exe					1a(1)		Х
٠,			• • • •						1a(1)		x
٠.		assets							14(2)	قعيد	
		nsactions:	-b						15/41		V
				empt organization .					1b(1)		- ^
٠,				able exempt organiza					1b(2)		<u>X</u> _
				er assets					1b(3)		X
		_							1b(4)		<u>X</u>
									1b(5)		X
٠.				nip or fundraising soli					1b(6)		X
c Sh	aring o	f facılıtıes, equipme	ent, mailing lis	sts, other assets, or p	aid employe	es			1c		_X_
d Ift	he ansv	wer to any of the at	ove is "Yes,"	complete the followi	ng schedule.	Colum	n (b) should alv	ays show the f	air mark	et	
va	lue of th	ne goods, other ass	sets, or service	es given by the repo	rting foundati	on. If th	ne foundation re	ceived less tha	n fair ma	arket	
va	lue in a	ny transaction or sl	haring arrang	ement, show in colur	nn (d) the va	lue of th	he goods, other	assets, or serv	ices rec	eived	
(a) Line	по	(b) Amount involved	(c) Name	of noncharitable exempt or	ganization	(d) Des	scription of transfers	transactions, and s	haring arra	angem	ents
· /		<u></u>			-						
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	<u> </u>							0			
				ated with, or related t				itions	ر ا م	l Nia	
		· · · · · · · · · · · · · · · · · · ·	•	other than section 50	1(c)(3)) or in	section	527?	🗀	Yes X	INO	
D IT		omplete the followi	ng scheaule.				1				
		(a) Name of organization		(b) Type of o	organization		(c)	Description of relati	onsnip		
										-	
				_				·- ·- ·-			
			<u> </u>		· · · · · · · · · · · · · · · · · · ·						
				-							
							<u>l</u>				
				this return, including accompanyi				rledge and belief, it is tru	е,		
Sign	correct	, and complete Declaration of	preparer (other than	taxpayer) is based on all information	uon of which prepare	r nas any ki	nowleage	May the IRS	discuss th	ıs retur	n T
	1.	1711		51,1.				with the prep			
Here	` ₹	4/10		-1'/13	<u>Treasure</u>	er		instructions)?	' 🔲 Ye	s 🗌	No
	Sigi	nature of efficer or truster	9	Date	Title						
		Print ype preparer's na	ame	Preparer's signature			Date		PTIN		
Paid								Check if			
Prep	arer	<u> </u>					l	self-employed	<u> </u>		
-	Only	Firm's name						Firm's EIN			
	,	Firm's address						Phone no			_

Schedule B

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

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

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

OMB No 1545-0047

2012

Employer identification number

NEW HAMPSHIRE BALL BE	ARINGS FOUNDATION	02-6005861				
Organization type (check 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 four	ndation				
	527 political organization					
Form 990-PF	X 501(c)(3) exempt private foundation					
	4947(a)(1) nonexempt charitable trust treated as a private foundation	íon				
	501(c)(3) taxable private foundation					
General Rule X For an organization	7), (8), or (10) organization can check boxes for both the General Rule ar filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 ne contributor. Complete Parts I and II.					
Special Rules						
sections 509(a)(1) a	For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.					
For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use <i>exclusively</i> for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III						
the year, contribution total to more than \$1 year for an exclusive	(7), (8), or (10) organization filing Form 990 or 990-EZ that received from as for use <i>exclusively</i> for religious, charitable, etc., purposes, but these composes, one of this box is checked, enter here the total contributions that were really religious, charitable, etc., purpose. Do not complete any of the parts upgration because it received nonexclusively religious, charitable, etc., contributions.	ontributions did not eceived during the nless the General Rule ributions of \$5,000 or more				

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2 of its Form 990; or check the box on line H of its Form 990-EZ or on Part I, line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization
NEW HAMPSHIRE BALL BEARINGS FOUNDATION

Employer identification number 02-6005861

Part I	Contributors (see instructions). Use duplicate copies	s of Part I if additional space is n	eeded
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	NEW HAMPSHIRE BALL BEARINGS, INC. 9700 INDEPENDENCE AVENUE CHATSWORTH CA 91311 Foreign State or Province: Foreign Country:	\$24,000	Person X Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	Foreign State or Province Foreign Country	\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	Foreign State or Province Foreign Country	\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	Foreign State or Province Foreign Country	\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	Foreign State or Province: Foreign Country	\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	Foreign State or Province ⁻ Foreign Country	\$	Person Payroll Oncash Complete Part II if there is a noncash contribution)

Name of organization
NEW HAMPSHIRE BALL BEARINGS FOUNDATION

Employer identification number 02-6005861

Part II	Noncash Property (see instructions). Use duplicate co	pies of Part II if additional spa	ce is needed
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	

	ganization IPSHIRE BALL BEARINGS FOUNDATION			02-6005861		
Part III		ndividual cor	tributions to section			
	Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations total more than \$1,000 for the year. Complete columns (a) through (e) and the following line entry.					
	For organizations completing Part III, enter					
	contributions of \$1,000 or less for the year	r. (Enter this i	nformation once. See i	nstructions) ▶ \$ 0		
	Use duplicate copies of Part III if additional	space is nee	eded.			
(a) No. from Part I	(b) Purpose of gift	(c)	Use of gift	(d) Description of how gift is held		
		(e) T	ransfer of gift			
	Transferee's name, address, and Z	IP + 4	Relations	hip of transferor to transferee		
	For Prov Country					
(a) No. from Part I	(b) Purpose of gift	(c)	Use of gift	(d) Description of how gift is held		
		(e) T	ransfer of gift			
		(0)	.u.iorov ov g			
	Transferee's name, address, and Z	<u>IP + 4</u>	Relations	hip of transferor to transferee		
	For Prov Country			•••••		
(a) No.						
from Part I	(b) Purpose of gift	(c)	Use of gift	(d) Description of how gift is held		
. 4161						
	(a) Transfer of cits					
	(e) Transfer of gift					
	Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee					
				•••••		
	For Prov Country			•••••		
(a) No.						
from Part I	(b) Purpose of gift	(c)	Use of gift	(d) Description of how gift is held		
		 				
	(a) Transfer of aiff					
	(e) Transfer of gift					
	Transferee's name, address, and Z	IP + 4	Relations	hip of transferor to transferee		
	The state of the s					
				• • • • • • • • • • • • • • • • • • • •		
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FINANCIAL STATEMENTS STATEMENT OF FINANCIAL POSITION AS OF 12/31/2012

	BOOK VALUE	FAIR MARKET VALUE
ASSETS:		
CITIZENS CHECKING ACCOUNT CITIZENS MONEY MARKET ACCOUNT	\$ 1,991 123,454	\$ 1,991 123,454
TOTAL ASSETS	125,445	125,445
LIABILITIES	_ 0 -	- 0 -
	\$ 125,445	\$ 125,445

FINANCIAL STATEMENTS STATEMENT OF OPERATION AS OF 12/31/2012

RECEIPTS AND GAINS:	
CONTRIBUTION RECEIVED INTEREST EARNED	\$ 24,000
TOTAL RECEIPTS AND GAINS	24,084
DISBURSEMENTS AND LOSSES:	
TAXES GRANTS	(75) (15,250)
TOTAL DISBURSEMENTS AND LOSSES	(15, 325)
NET YEAR-TO-DATE	8,759
BEGINNING CAPITAL	 116,686
ENDING CAPITAL	\$ 125,445

STATEMENT 3

NEW HAMPSHIRE BALL BEARINGS FOUNDATION
FINANCIAL STATEMENTS
STATEMENT OF GRANTS
AS OF 12/31/2012

		FOUNDATION	PURPOSE		
		STATUS OF	OF		
	DATE	RECEIPIENT	GRANT	AM	AMOUNT
Boys and Girls Club of Simi Valley	3-29	PUBLIC	OPERATIONS	Ś	250
Boys and Gırls Club of West Valley	3-29	PUBLIC	OPERATIONS		250
Bags4Kids Foundation	3-29	PUBLIC	OPERATIONS		250
Youth Educational Sports Scholarship	3-29	PUBLIC	OPERATIONS		200
Monadnock Babe Ruth Baseball	3-29	PUBLIC	OPERATIONS		200
Pepperdine University	3-29	PUBLIC	OPERATIONS		3,000
Spaulding Youth Center Foundation	3-29	PUBLIC	OPERATIONS		1,500
Regional Center for Advanced Manufacturing Education	3-29	PUBLIC	OPERATIONS		2,500
Monadnock at Home	11-02	PUBLIC	OPERATIONS		200
Marıposa Museum	11-02	PUBLIC	OPERATIONS		200
Peterborough Human Services Fund	11-02	PUBLIC	OPERATIONS		200
Laconia School District	11-02	PUBLIC	OPERATIONS		2,500
New Hampshire Charitable Foundation	11-02	PUBLIC	OPERATIONS		2,500
TOTAL				\$	\$ 15,250

PART I - ANALYSIS OF REVENUES AND EXPENSES
LINE 18 - TAXES
AS OF 12/31/2012

PART I, LINE 18 - TAXES:

FEDERA	AL E	EXCIS	SE TAX		
STATE	OF	NEW	HAMPSHIRE	ANNUAL	FEE

Ş	-
	75
\$	75

PART VII-A - STATEMENTS REGARDING ACTIVITIES
LINE 10 - SUBSTANTIAL CONTRIBUTOR
AS OF 12/31/2012

PART VII-A, LINE 10 - SUBSTANTIAL CONTRIBUTOR:

NEW HAMPSHIRE BALL BEARINGS, INC. STATE OF NEW HAMPSHIRE ANNUAL FEE

\$ 24,000

Contributions		
January	\$	2,000
February		2,000
March		2,000
April		2,000
May		2,000
June		2,000
July		2,000
August		2,000
September		2,000
October		2,000
November		2,000
December		2,000
Total	\$\$	24,000

FINANCIAL STATEMENTS
INTEREST INCOME
AS OF 12/31/2012

	VA	VALUE	
MONTH			
January	\$	10	
February		8	
March		9	
April		9	
May		9	
June		9	
July		5	
August		5	
September		5	
October		5	
November		5	
December		5	
Total	\$	84	
IOLAI	<u> </u>	04	

PART XV - SUPPLEMENTARY INFORMATION
LINE 2 - INFORMATION REGARDING CONTRIBUTION, GRANT, SUBSTANTIAL
CONTRIBUTOR GIFT, LOAN, SCHOLARSHIP, ETC., PROGRAMS
AS OF 12/31/2012

PART XV, LINE 2 - INFORMATION REGARDING CONTRIBUTION, GRANT, GIFT, LOAN, SCHOLARSHIP, ETC., PROGRAMS

a. GRANT REQUESTS SHOULD BE ADDRESSED TO:

RICHARD CONNER, TRUSTEE
NEW HAMPSHIRE BALL BEARINGS, INC.
9700 INDEPENDENCE AVENUE
CHATSWORTH, CA 91311

- b. GRANT REQUEST SHOULD BE IN WRITING AND SUPPORTED BY FINANCIAL STATEMENTS AND/OR DESCRIPTIONS.
- C. GRANT REQUESTS ARE GENERALLY ACTED ON MONTHLY, NO LESS THAN QUARTERLY.
- d. GRANTS ARE MADE ONLY TO CHARITABLE ORGANIZATIONS FAVORING THOSE BENEFITTING AREAS OF SUBSTANTIAL NHBB EMPLOYMENT, (PETERBOROUGH, JAFFREY, AND LACONIA, NH AND CHATSWORTH, CA) BUT NOT LIMITED THERETO. GRANT AMOUNTS DEPEND ON FUNDS AVAILABLE AND REQUESTOR'S NEED, CAUSE, MANAGEMENT QUALITY AND FINANCIAL STATUS.

LINES NOT COMPLETED PER SPECIAL RULES FOR FOUNDATIONS SOLELY ENGAGED IN GRANT MAKING ACTIVITY.