Form	990-T	E	Exempt Organization Bus			'ax Retur	'n	2012
	ment of the Treasury	F	(and proxy tax und	er sec	tion 6033(e))			pen to Public Inspection for 01(c)(3) Organizations Only
A	Check box if address changed	Ford	Name of organization ( Check box if name c	hanged a			D Employ	er identification number yees' trust, see
B Ex	cempt under section	Print	New Hampshire Charitab	le F	oundation		02	-6005625
	]501(C)(3)	_ or	Number, street, and room or suite no. If a P.O. box	k, see ins	structions.			ed business activity codes tructions)
	]408(e)220(e)	Туре	37 Pleasant Street					,
	408A530(a)		City or town, state, and ZIP code					
	]529(a)		Concord, NH 03301-400	5			5419	00
			p exemption number (see instructions)					
at e	end of year 508,157,558.	<b>G</b> Chec	k organization type X 501(c) corporatio	n L	501(c) trust	401(a) trus	:t	Other trust
H Des	scribe the organizatio	n's prim	ary unrelated business activity. ► Income	fron	n partnersh	ips		
			poration a subsidiary in an affiliated group or a pare				Yes	X No
			tifying number of the parent corporation.					
J The	e books are in care of	<b>i ▶</b> ]	Rebecca Carr		Teleph	one number 🕨	(603)	
Pa	rt I Unrelate	d Tra	de or Business Income		(A) Income	(B) Expens	ses	(C) Net
1 a	Gross receipts or sal	es						
b	Less returns and allo	wances	<b>c</b> Balance	1 c				
2	Cost of goods sold (	Schedule	e A, line 7)	2				
			rom line 1c	3				
			ch Schedule D)	4a				
			Part II, line 17) (attach Form 4797)	4b				
			sts	4c	202 122	C+m+	7	302,122.
			nips and S corporations (attach statement)	5	302,122.	Stmt	1	302,122.
	· ·		(0.1.1.1.5)	6				
			me (Schedule E)	7				
			and rents from controlled organizations (Sch. F)	8				4
9			on 501(c)(7), (9), or (17) organization	9				
10			ome (Schedule I)	10				
		-	e J)	11				and the second s
			ns; attach statement)	12				Market Control of the
			igh 12	13	302,122.			302,122.
	rt II Deduction	ons N	ot Taken Elsewhere (see instructions for utions, deductions must be directly connected	or limitat		e income)		•
14			irectors, and trustees (Schedule K)				. 14	
15	Salaries and wages						. 15	
16	Repairs and mainte	nance					. 16	
17	Bad debts						. 17	
18	Interest (attach stat	ement)					. 18	
19	Taxes and licenses						. 19	587.
20			e instructions for limitation rules) Stateme			ement 2	. 20	30,054.
21			562)				_	
22			n Schedule A and elsewhere on return				22b	
23							1 1	
24			ompensation plans					
25		•						
26	•		chedule I)				1 . 1	
27		-	chedule J)					
28 29	,		nes 14 through 28					30,641.
29 30			income before net operating loss deduction. Subtra					271,481.
31			n (limited to the amount on line 30)				1 1	
32			income before specific deduction. Subtract line 311					271,481.
33			ly \$1,000, but see instructions for exceptions)					1,000.
34	•		table income. Subtract line 33 from line 32. If line					
	of zero or line 32				·		34	270,481.

223701 CHA For Paperwork Reduction Act Notice, see instructions.

Form **990-T** (2012)

Part	111	Tax Computation			100000000000000000000000000000000000000				
35		nizations taxable as corporation	ons (see instruc	ctions for tax com	nputation).				Will approximate the state of t
-	_	olled group members (sections				and:			
		your share of the \$50,000, \$25		•					
		\$	(2)  \$	,	(3)  \$	,	1		
		organization's share of: (1) Ac		(not more than					
		dditional 3% tax (not more tha							
		ne tax on the amount on line 34						35c	88,738
36		s taxable at trust rates (see ins							
		Tax rate schedule or						36	
37							_	37	
38		native minimum tax						38	1, 500
39		. Add lines 37 and 38 to line 35						39	88,738
Part		Tax and Payments							
		gn tax credit (corporations atta	ch Form 1118:	trusts attach Fori	n 1116)	40a			
		credits (see instructions)							
		ral business credit. Attach Forn							
		t for prior year minimum tax (a						7	
		credits. Add lines 40a through						40e	
41		ract line 40e from line 39						41	88,738
42	Other	taxes. Check if from: For	rm 4255	Form 8611	Form 8697 Form	8866	Other (attach statement)	42	
43		tax. Add lines 41 and 42						43	88,738
		nents: A 2011 overpayment cre				1 1	100,770		
•	-	estimated tax payments							
		leposited with Form 8868					100,000		
		gn organizations: Tax paid or w				•••			
		up withholding (see instruction				1 1			
		it for small employer health ins							
		• •		-					
		Form 4136		ther		<b>44</b> q			
45		payments. Add lines 44a thro	uah 44a			have see a filter when		45	200,770
46	Estin	nated tax penalty (see instruction	ons). Check if Fo	orm 2220 is attac	hed ▶			46	
47		lue. If line 45 is less than the to						47	
48		payment. If line 45 is larger tha						48	112,032
49		the amount of line 48 you war						49	0
Part		Statements Regardir	ng Certain	Activities a	nd Other Informa	ation (see	instructions)		
1 A	t any tim	ne during the 2012 calendar yea	ar, did the orga	nization have an i	nterest in or a signature o	or other auth	ority over a financial a	ccount (bai	nk, Yes No
S	ecurities	, or other) in a foreign country?	? If "Yes," the or	rganization may h	ave to file Form TD F 90-	22.1, Report	of Foreign Bank and F	inancial	
Α	ccounts	. If "Yes," enter the name of the	foreign country	y here 🕨					X
2 D	uring the "Yes," se	tax year, did the organization receive e instructions for other forms the org	e a distribution from anization may hav	m, or was it the gran re to file	tor of, or transferor to, a foreig	n trust?			X
3 E	nter the	amount of tax-exempt interest	received or acc	rued during the t					
Sche	edule	A - Cost of Goods S	<b>old.</b> Enter me	ethod of invent	ory valuation $ ightharpoonup N$	/A			
1 lr	nventory	at beginning of year	1		6 Inventory at end of	fyear		6	
<b>2</b> P	urchase	s	2		7 Cost of goods sold	I. Subtract li	ne 6		
<b>3</b> C	ost of la	bor	3		from line 5. Enter h	nere and in P	art I, line 2	7	
<b>4a</b> A	dditional :	section 263A costs (att. statement)	4a		8 Do the rules of sec	tion 263A (w	vith respect to		Yes No
<b>b</b> 0	ther cos	ts (attach statement)	4b		property produced	or acquired	for resale) apply to		
<u>5</u> T		d lines 1 through 4b	5		the organization?				
	U	nder penalties of perjury, I declare the prect, and complete. Declaration of p	at I have examine	d this return, includi in taxpaver) is based	ng accompanying schedules a	and statements	s, and to the best of my kn v knowledge.	owledge and	belief, it is true,
Sign				1,7,7				vay the IRS	discuss this return with
Here				L	Presi	dent	t	he preparer s	shown below (see
		Signature of officer		Date	Title		<u> </u>	nstructions)?	X Yes No
		Print/Type preparer's name		Preparer's sign	ature	Date	Check	if PTIN	
Paid	i			77		10/-1	self- employed		101000
	oarer	Nicholas E. P		111		10/3/1	<b>ル</b>		1310283
-	Only	Firm's name ▶ Baker		a Noye	S		Firm's EIN	<u> </u>	-0494526
	- · · · · J		507		•				. 070 010
		Firm's address ► Por	tland,	ME 0411	2		Phone no.	(207	) 879-210

Form **990-T** (2012)

Schedule C - Rent Inco	me (From Real	Property a	nd Personal l	Propert	y Lease	d With Real Pro	perty)(see in	structions)
1. Description of property								
(1)								
(2)					,,			
(3)								
(4)								****
	2. Rent receiv	ed or accrued				3(a) Deductions direct	ly connected with t	ne income in
(a) From personal property (if rent for personal property 10% but not more the	is more than	of rent f	eal and personal propert for personal property ex e rent is based on profit	ceeds 50% c	entage or if	columns 2(a) a	and 2(b) (attach state	ement)
(1)			W-W-(W-					
(2)			· · · · · · · · · · · · · · · · · · ·					
_(3)								
(4)		ļ		<del></del>	0.	,		
Total	0.	Total			<u> </u>	(b) Total deductions.		
(c) Total income. Add totals of cold					0.	Enter here and on page 1,	_	0.
here and on page 1, Part I, line 6, c Schedule E - Unrelated			itt		0.	Part I, line 6, column (B)	💆	V •
Schedule E - Unrelated	Dept-Finance	income (s	ee instructions)			3. Deductions directly co	nnected with or all	ncahle
			2. Gross inc			to debt-final	nced property	
1. Description of	debt-financed property		or allocable financed p		(a)	Straight line depreciation (attach statement)	( <b>b)</b> Othe (attach	r deductions statement)
(1)								
(2)								
(3)								
(4)								
Amount of average acquisition debt on or allocable to debt-finance property (attach statement)	ed of or debt-fina	e adjusted basis allocable to anced property n statement)	6. Column by colu			7. Gross income reportable (column 2 x column 6)	(column 6	able deductions x total of columns ) and 3(b))
/1)				9/	/-			
(1)				9/				
(2)				9/				33551
(3)					6			
(4)						nter here and on page 1,	Enter here	and on page 1,
					F	art I, line 7, column (A).	1	7, column (B).
Totals					<b></b>	(	0.	0.
Total dividends-received deducti	ions included in colum	n 8					<b>&gt;</b>	0.
Schedule F - Interest, A	Annuities, Roya	lties, and F	Rents From C	ontrolle	ed Orga	<b>nizations</b> (see in:	structions)	
		Exe	empt Controlled C	)rganizatio	ons			
Name of controlled organizati	on <b>2</b> Employer ic num	entification N	3. let unrelated income ess) (see instructions)		<b>4</b> . of specified nents made	5. Part of column 4 included in the controrganization's gross in	olling   connect	uctions directly ed with income column 5
(1)								
(2)								
(3)								WANTED THE TOTAL CONTRACTOR OF
(4)								
Nonexempt Controlled Organiz	zations							
7. Taxable Income	8. Net unrelated incor		. Total of specified pay	ments	10, Part of	column 9 that is included	11. Deductions	
	(see instruction	s)	made		in the con	trolling organization's pross income	with income i	ri column 10
(1)								
(2)								
(3)								
(4)								
					Enter here	olumns 5 and 10. and on page 1, Part I, as 8, column (A).	Add column Enter here and o line 8, co	n page 1, Part I,
Totala						0.		0.
Totals					**************************************	<b>U</b> •1	FA	rm <b>990-T</b> (2012

Schedule G - Inves	stment In	come of a				rganiza		02-0	000002	D Page 4
	e instruction  Description o				2. Amount of income	directly	ductions connected		Set-asides	5. Total deductions and set-asides
(1)	unanananan (tanah yakiri menah Kisisana)					(attach s	statement)	(		(col. 3 plus col. 4)
(2)										
(3)						<del> </del>				
(4)										
					Enter here and on page 1	,				Enter here and on page 1,
					Part I, line 9, column (A).					Part I, line 9, column (B).
Totals	,,				0.	,				0.
Schedule I - Explo	ited Exer		Income,	Othe	r Than Advertis	ing Inco	ome			
Description of exploited activity	i	2. Gross elated business ncome from de or business	3. Expen directly conr with product of unrelated business in	nected ction ted	4. Net income (loss) from unrelated trade or business (column 2 minus column 3). If a gain, compute cols. 5 through 7.	from ac	es income tivity that unrelated es income	at	Expenses tributable to column 5	7. Excess exempt expenses (column 6 minus column 5, but not more than column 4).
(1)										
(2)						1				
(3)										
(4)			·····							
	p	er here and on age 1, Part I, ie 10, col. (A).	Enter here a page 1, Pa line 10, col	art I,						Enter here and on page 1, Part II, line 26.
Totals	▶	0.		0.						0.
Schedule J - Adve										
Part I Income Fr	om Perio	dicals Rep	orted on	a Con	solidated Basis	S				
				·····	4. Advertising gain	.		T		7. Excess readership
1. Name of period	lical	2. Gross advertising income		Direct sing costs	or (loss) (col. 2 minu col. 3). If a gain, comp cols. 5 through 7.	s <b>5</b> .0	irculation icome	6.1	Readership costs	costs (column 6 minus column 5, but not more than column 4).
(1)										
(2)										
(3)										
(4)										
Totals (carry to Part II, line	/5\\ <b>&gt;</b>		0.	0						0.
Part II Income Fr	om Perio	dicals Rep	orted on	a Sep	arate Basis (For	each peri	odical liste	d in Pa	rt II, fill in	<u></u>
columns 2 th	rough / on a	a line-by-line ba	isis.)					T		
1. Name of period	lical	2. Gross advertising income		Direct sing costs	4. Advertising gain or (loss) (col. 2 minu col. 3). If a gain, comp cols. 5 through 7.	s <b>5</b> .0	irculation ncome	6.	Readership costs	7. Excess readership costs (column 6 minus column 5, but not more than column 4).
(1)										
(2)										
(3)							***************************************			
(4)										
Totals from Part I			0.	0						0.
		Enter here and of page 1, Part I, line 11, col. (A)	page line 11	ere and on 1, Part I, I, col. (B).						Enter here and on page 1, Part II, line 27.
Totals, Part II (lines 1-5)			0.		• T		\			0.
Schedule K - Com	ipensatio	n of Office	rs, Direct	ors, a	na irustees (se	e instruction	ons) 3. Perce	nt of	A -	
	1. Name	**************************************			2. Title		time devo	ted to ss		ensation attributable related business
(1)							-	%		
(2)							-	%		
(3)							-	%		
(4)				ł			1	%		

Form **990-T** (2012)

Total. Enter here and on page 1, Part II, line 14 ...

## Form 4626 Department of the Treasury

## **Alternative Minimum Tax - Corporations**

Attach to the corporation's tax return.

OMB No. 1545-0175

Information about Form 4626 and its separate instructions is at www.irs.gov/form4626. Internal Revenue Service Employer identification number 02-6005625 New Hampshire Charitable Foundation Note: See the instructions to find out if the corporation is a small corporation exempt from the alternative minimum tax (AMT) under section 55(e). 270,481. Taxable income or (loss) before net operating loss deduction 1 Adjustments and preferences: a Depreciation of post-1986 property 2a b Amortization of certified pollution control facilities 2b c Amortization of mining exploration and development costs 2c d Amortization of circulation expenditures (personal holding companies only) 2d2e e Adjusted gain or loss 2f f Long-term contracts g Merchant marine capital construction funds 2g h Section 833(b) deduction (Blue Cross, Blue Shield, and similar type organizations only) 2h i Tax shelter farm activities (personal service corporations only) 2i Passive activities (closely held corporations and personal service corporations only) 2į 2k k Loss limitations 21 Depletion m Tax-exempt interest income from specified private activity bonds 2m n Intangible drilling costs 2n Other adjustments and preferences 270,481. Pre-adjustment alternative minimum taxable income (AMTI). Combine lines 1 through 20 Adjusted current earnings (ACE) adjustment: 270,481. a ACE from line 10 of the ACE worksheet in the instructions b Subtract line 3 from line 4a. If line 3 exceeds line 4a, enter the difference as a 0. 4b negative amount (see instructions) c Multiply line 4b by 75% (.75). Enter the result as a positive amount d Enter the excess, if any, of the corporation's total increases in AMTI from prior year ACE adjustments over its total reductions in AMTI from prior year ACE adjustments (see instructions). Note: You must enter an amount on line 4d (even if line 4b is positive) e ACE adjustment. If line 4b is zero or more, enter the amount from line 4c • If line 4b is less than zero, enter the smaller of line 4c or line 4d as a negative amount **4e** 270,481. Combine lines 3 and 4e. If zero or less, stop here; the corporation does not owe any AMT Alternative tax net operating loss deduction (see instructions) Alternative minimum taxable income. Subtract line 6 from line 5. If the corporation held a residual 270,481. interest in a REMIC, see instructions Exemption phase-out (if line 7 is \$310,000 or more, skip lines 8a and 8b and enter -0- on line 8c): a Subtract \$150,000 from line 7 (if completing this line for a member of a controlled 120,481. group, see instructions). If zero or less, enter -0-30,120. **b** Multiply line 8a by 25% (.25) c Exemption. Subtract line 8b from \$40,000 (if completing this line for a member of a controlled 9,880. 38 group, see instructions). If zero or less, enter -0-260,601. g Subtract line 8c from line 7. If zero or less, enter -0-52,120. 10 10 Multiply line 9 by 20% (.20) Alternative minimum tax foreign tax credit (AMTFTC) (see instructions) 11 11 52,120. Tentative minimum tax. Subtract line 11 from line 10 12 12 88,738. 13 Regular tax liability before applying all credits except the foreign tax credit 13 Alternative minimum tax. Subtract line 13 from line 12. If zero or less, enter -0-. Enter here and on 14

JWA For Paperwork Reduction Act Notice, see separate instructions.

Form 4626 (2012)

\* See also

Form 1120, Schedule J, line 3, or the appropriate line of the corporation's income tax return

Statement 4

217001

## Adjusted Current Earnings (ACE) Worksheet

	See ACE Worksheet In	istructions.		
A D C L LANGTI Fold the consent from the C	-f-F 4000			270,481.
1 Pre-adjustment AMTI. Enter the amount from line 3	of Form 4626		1	270,401.
2 ACE depreciation adjustment:		1 0- 1		
•		2a		
b ACE depreciation:	01-(4)	<del></del>		
(1) Post-1993 property				
(2) Post-1989, pre-1994 property				
(3) Pre-1990 MACRS property	1 1			
(4) Pre-1990 original ACRS property	2b(4)			
(5) Property described in sections				
168(f)(1) through (4)	i I			
(6) Other property	***************************************			
(7) Total ACE depreciation. Add lines 2b(1) thro	ugh 2b(6)	2b(7)		
c ACE depreciation adjustment. Subtract line 2b(7) fr	om line 2a		2c	
3 Inclusion in ACE of items included in earnings and	profits (E&P):	1 1		
a Tax-exempt interest income		3a		
<b>b</b> Death benefits from life insurance contracts		3b		
c All other distributions from life insurance contracts	(including surrenders)	3c		
d Inside buildup of undistributed income in life insura	nce contracts	3d		
e Other items (see Regulations sections 1.56(g)-1(c)	(6)(iii) through (ix)			
for a partial list)				
f Total increase to ACE from inclusion in ACE of item			3f	
4 Disallowance of items not deductible from E&P:				
a Certain dividends received		4a		
b Dividends paid on certain preferred stock of public				
under section 247				
under section 247 4b c Dividends paid to an ESOP that are deductible under section 404(k) 4c				
d Nonpatronage dividends that are paid and deductib				
1382(c)		4d		
e Other items (see Regulations sections 1.56(g)-1(d)				
partial list)		4e		
f Total increase to ACE because of disallowance of it			4f	
5 Other adjustments based on rules for figuring E&P				
		5a		
f Total other E&P adjustments. Combine lines 5a thr	5f			
,				
•				
8 Depletion 9 Basis adjustments in determining gain or loss from				
10 Adjusted current earnings. Combine lines 1, 2c, 3	i, 71, and of through 3. Litter the f	osak noro ana on mie 4a vi	10	270,481.

Form 990-T I	ncome (Loss) from Partnerships	Statement 1
Description		Amount
Forester Partners, LP Paul Capital Partners VII Park St. Capital Natural Davidson Kempner Institut Park St. Capital Natural Knightsbridge Compass Diversified Holdi Spur Ventures II, LP Weathergage Venture Capit Lyme Northern Forest Fund The Varde Fund VIII, LP The Varde Fund IX, LP The Varde Fund X(B), LP Oaktree Opportunities Fund Oaktree Opportunities Fund Truebridge-Kauffman Endow	Resource Fund II, LP ional Partners Resource Fund III, LP  ngs al, LP  d VIII, LP d VIIIB, LP ment Fund II, LP	315,842. -9,605. -9,699. 24. 17,017. -110. 1,529. -2. -5. -12,057. -258. -472. 172. -414. 113. 47.
Form 990-T	Contributions	Statement 2
Description/Kind of Prope	rty Method Used to Determine FMV	Amount
2012 Contributions	N/A	30,246,672.
Total to Form 990-T, Page	e 1, line 20	30,246,672.

Form 990-T	Contributions Summary		Statement	3
Qualified Contribution	ons Subject to 100% Limit			
Carryover of Prior Ye For Tax Year 2007 For Tax Year 2008 For Tax Year 2009 For Tax Year 2010 For Tax Year 2011	ears Unused Contributions 24,967,513 31,043,430 27,866,912 27,631,544 30,630,812			
Total Carryover Total Current Year 10	O% Contributions	142,140,211 30,246,672		
Total Contributions A		172,386,883 30,054		
Excess 10% Contribut Excess 100% Contribut Total Excess Contribu	tions	172,356,829 0 172,356,829		
Allowable Contribution	ons Deduction		30,	054
Total Contribution De	eduction		30,	054

Form 4626	AMT Contributions		Statement 4
Carryover of Prior Years Un For Tax Year 2007 For Tax Year 2008 For Tax Year 2009 For Tax Year 2010 For Tax Year 2011	nused Contributions	24,996,513 31,043,430 27,866,912 27,621,544 30,630,812	
Total Carryover Current Year Contributions			142,159,211 30,246,672
Total Contributions 10% of Taxable Income as Ad	djusted		172,405,883 30,054
Excess Contributions			172,375,829
Allowable Contributions			30,054
AMT charitable deduction Regular contribution deduc	tion		30,054 30,054
AMT contribution adjustmen	t		C