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Form **990**Department of the Treasury
Internal Revenue Service**Return of Organization Exempt From Income Tax**

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

▶ The organization may have to use a copy of this return to satisfy state reporting requirements.

OMB No 1545-0047

2009Open to Public
Inspection**A For the 2009 calendar year, or tax year beginning****and ending****B** Check if applicable

- ☐ Address change
☐ Name change
☒ Initial return
☐ Terminated
☐ Amended return
☐ Application pending

Please use IRS label or print or type

See Specific Instructions

C Name of organization**OPPORTUNITY FINANCE NETWORK**

Doing Business As

Number and street (or P.O. box if mail is not delivered to street address)

620 CHESTNUT STREET

Room/suite

572

City or town, state or country, and ZIP + 4

PHILADELPHIA, PA 19106**F Name and address of principal officer** **MARK PINSKY****SAME AS C ABOVE****D Employer identification number****20-5189202****E Telephone number****215-923-4754****G Gross receipts \$****46,204,244.****H(a) Is this a group return**

for affiliates?

☐ Yes☒ No**H(b) Are all affiliates included?**☐ Yes☐ No

If "No," attach a list (see instructions)

H(c) Group exemption number ▶**I Tax-exempt status:** ☒ 501(c) (3) (insert no) ☐ 4947(a)(1) or ☐ 527**J Website:** ▶ **WWW.OPPORTUNITYFINANCE.NET****K Form of organization:** ☒ Corporation ☐ Trust ☐ Association ☐ Other ▶**L Year of formation:** **2006** **M State of legal domicile:** **PA****Part I Summary**

Activities & Governance	1	Briefly describe the organization's mission or most significant activities	OFN'S MISSION IS TO LEAD THE OPPORTUNITY FINANCE SYSTEM TO SCALE THROUGH CAPITAL FORMATION,	
	2	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets		
	3	Number of voting members of the governing body (Part VI, line 1a)	3	10
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	10
	5	Total number of employees (Part V, line 2a)	5	29
	6	Total number of volunteers (estimate if necessary)	6	0
Revenue	7a	Total gross unrelated business revenue from Part VIII, column (C), line 12	7a	0.
	b	Net unrelated business taxable income from Form 990-T, line 34	7b	0.
	8	Contributions and grants (Part VIII, line 1h)		3,349,873.
	9	Program service revenue (Part VIII, line 2g)		2,937,891.
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		659,436.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		5,105.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		6,952,305.
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		838,246.
	14	Benefits paid to or for members (Part IX, column (A), line 4)		
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		2,313,146.
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶ 36,455.		
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)		3,958,460.
	18	Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)		7,109,852.
	19	Revenue less expenses Subtract line 18 from line 12		<157,547.>
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	Beginning of Current Year	90,323,867.
	21	Total liabilities (Part X, line 26)	End of Year	66,251,188.
	22	Net assets or fund balances Subtract line 21 from line 20		24,072,679.

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here

Signature of officer *Beth Lipson*Date **5-13-10****BETH LIPSON, CHIEF FINANCIAL OFFICER**

Type or print name and title

Paid Preparer's Use Only

Preparer's signature

Firm's name (or yours if self-employed), address, and ZIP + 4

Malin Mauch, CPA

Date

05/13/10Check if self-employed ☐

Preparer's identifying number (see instructions)

EIN ▶

Phone no. ▶ **(215) 979-8800**

May the IRS discuss this return with the preparer shown above? (see instructions)

☒ Yes☐ No

932001 02-04-10

LHA For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

Form **990** (2009)**SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION**

SCANNED JUL 14 2010

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Part III Statement of Program Service Accomplishments

1 Briefly describe the organization's mission: SEE SCHEDULE O FOR CONTINUATION
OFN'S MISSION IS TO LEAD THE OPPORTUNITY FINANCE SYSTEM TO SCALE
THROUGH CAPITAL FORMATION, POLICY, AND CAPACITY DEVELOPMENT. OFN'S
PROGRAMS FOCUS ON SUPPORTING COMMUNITY DEVELOPMENT FINANCIAL
INSTITUTIONS (CDFIS) AND THE LOW INCOME AND LOW WEALTH COMMUNITIES

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☐ Yes ☒ No

If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? ☐ Yes ☒ No

If "Yes," describe these changes on Schedule O.

4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

SEE SCHEDULE O FOR CONTINUATION(S)

4a (Code:) (Expenses \$ 4,562,074. including grants of \$ 850,000.) (Revenue \$ 2,310,757.)
FINANCIAL SERVICES: THE ORGANIZATION'S TWO PRIMARY LINES OF BUSINESS
UNDER FINANCIAL SERVICES ARE OFN'S FINANCING FUND AND CDFI ASSESSMENT
AND RATING SYSTEM (CARS).

FINANCING FUND: OFN PROVIDES FINANCING TO ITS CDFIS WHICH BENEFITS
MILLIONS OF LOW-INCOME AND LOW-WEALTH PEOPLE AND COMMUNITIES. THROUGH
OUR FINANCING FUND, WE PROVIDE BELOW-MARKET RATE LOANS AND INVESTMENTS
TO CDFIS, WHICH IN TURN PROVIDE LOANS AND INVESTMENTS TO INDIVIDUALS
AND ORGANIZATIONS THAT WOULD NOT OTHERWISE HAVE ACCESS TO REASONABLE
AND RELIABLE FINANCING. IN 2009, OFN PROVIDED \$20 MILLION IN FINANCING
TO CDFIS WHICH HELPED LOW-INCOME INDIVIDUALS AND COMMUNITIES IMPROVE
THEIR ECONOMIC POSITION THROUGH BUILDING AFFORDABLE HOUSING, CREATING

4b (Code:) (Expenses \$ 1,160,308. including grants of \$ <11,754.>) (Revenue \$ 627,134.)
KNOWLEDGE SHARING/HUMAN CAPITAL: OFN HAS WORKED TO IMPROVE THE
PERFORMANCE OF CDFIS SO THEY CAN BETTER SERVE LOW-INCOME, LOW-WEALTH
COMMUNITIES. OFN PROVIDES TRAINING AND CONSULTING TO ITS NETWORK OF
CDFIS. THIS TRAINING AND CONSULTING IMPROVES THE PERFORMANCE AND
SUSTAINABILITY OF THESE NON-PROFITS TO SERVE THEIR CLIENTELE OF
LOW-INCOME PEOPLE AND COMMUNITIES. OFN BEGAN SEVEN STRATEGIC CONSULTING
ENGAGEMENTS IN 2009, WITH TWO CARRYING FORWARD INTO 2010. THE
ENGAGEMENTS INCLUDED ORGANIZATIONAL ASSESSMENTS, MARKET ANALYSIS,
STRATEGIC PLANNING, AND TRAINING FOR FOUNDATION AND FINANCIAL
INSTITUTION STAFF IN UNDERWRITING CDFIS. OFN CONTINUED TO PROVIDE
CONSULTING SERVICES TO NATIVE COMMUNITIES FOLLOWING THE 2008 COMPLETION
OF ITS NATIVE COMMUNITIES FINANCING INITIATIVE (NCFI) CONTRACT WITH THE

4c (Code:) (Expenses \$ 617,917. including grants of \$) (Revenue \$)
POLICY: OFN PROVIDES ADVOCACY FOR POLICIES THAT BENEFIT LOW-INCOME AND
LOW-WEALTH PEOPLE AND COMMUNITIES. IN 2009, OFN ADVOCATED FOR CDFI FUND
APPROPRIATIONS, ENACTMENT OF GSE REFORM THAT SUPPORTS CDFI FINANCING
STRATEGIES, AND A FEDERAL GUARANTEE FOR BOND FINANCING THAT CDFIS CAN
USE.

4d Other program services. (Describe in Schedule O.)

(Expenses \$ 223,174. including grants of \$) (Revenue \$)

4e Total program service expenses **\$ 6,563,473.**

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	X	
2 Is the organization required to complete Schedule B, Schedule of Contributors?	X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I		X
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	X	
5 Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III		
6 Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I		X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III		X
9 Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV		X
10 Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V		X
11 Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable	X	
• Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.		
• Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.		
• Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII		
• Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.		
• Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X		
• Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X.		
12 Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII.		X
12A Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional	X	
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		X
14a Did the organization maintain an office, employees, or agents outside of the United States?		X
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I		X
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Part II		X
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part III		X
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I		X
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II		X
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III		X
20 Did the organization operate one or more hospitals? If "Yes," complete Schedule H		X

Part IV Checklist of Required Schedules (continued)

	Yes	No
21 Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	X	
22 Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>		X
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	X	
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25</i>		X
24b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
24c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
24d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>		X
25b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>		X
26 Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If "Yes," complete Schedule L, Part II</i>		X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? <i>If "Yes," complete Schedule L, Part III</i>		X
28 Was the organization a party to a business transaction with one of the following parties, (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
28a A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
28b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
28c An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>		X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>		X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	X	
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1</i>	X	
35 Is any related organization a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>		X
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>		X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?	X	

Note. All Form 990 filers are required to complete Schedule O.

Part V Statements Regarding Other IRS Filings and Tax Compliance

		Yes	No
1a Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable	1a 23		
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b 0		
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	X	
2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a 29		
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)	2b	X	
3a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a		X
b If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
b If "Yes," enter the name of the foreign country: _____ See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts			
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
c If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?	5c		
6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	6a		X
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7 Organizations that may receive deductible contributions under section 170(c).			
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		X
b If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		X
d If "Yes," indicate the number of Forms 8282 filed during the year	7d		
e Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h		
8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
9 Sponsoring organizations maintaining donor advised funds.			
a Did the organization make any taxable distributions under section 4966?	9a		
b Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10 Section 501(c)(7) organizations. Enter:			
a Initiation fees and capital contributions included on Part VIII, line 12	10a		
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b		
11 Section 501(c)(12) organizations. Enter:			
a Gross income from members or shareholders	11a		
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b		
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b		

Form 990 (2009)

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions

Section A. Governing Body and Management

	Yes	No
1a Enter the number of voting members of the governing body	1a	10
b Enter the number of voting members that are independent	1b	10
2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	X
3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3	X
4 Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4	X
5 Did the organization become aware during the year of a material diversion of the organization's assets?	5	X
6 Does the organization have members or stockholders?	6	X
7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a	X
b Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b	X
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a The governing body?	8a	X
b Each committee with authority to act on behalf of the governing body?	8b	X
9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9	X

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

	Yes	No
10a Does the organization have local chapters, branches, or affiliates?	10a	X
b If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	10b	
11 Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11	X
11A Describe in Schedule O the process, if any, used by the organization to review this Form 990		
12a Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	X
b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X
c Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	X
13 Does the organization have a written whistleblower policy?	13	X
14 Does the organization have a written document retention and destruction policy?	14	X
15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
a The organization's CEO, Executive Director, or top management official	15a	X
b Other officers or key employees of the organization	15b	X
If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)		
16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a	X
b If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16b	

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed ► **PA**

18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.
☐ Own website ☒ Another's website ☒ Upon request

19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public.

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization. ►
LAURIE CURRAN - 215-320-4317
620 CHESTNUT ST STE 572, PHILADELPHIA, PA 19106

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors**Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees**

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year. Use Schedule J-2 if additional space is needed.

• List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

• List all of the organization's **current** key employees. See instructions for definition of "key employee."

• List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

• List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's **former** directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

☐ Check this box if the organization did not compensate any current officer, director, or trustee.

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
MARY MATHEWS CHAIRMAN OF BOARD	2.00	X		X				0.	0.	0.
ALAN BRANSON TREASURER	2.00	X		X				0.	0.	0.
DAVID BECK BOARD MEMBER	2.00	X						0.	0.	0.
DOUG BYSTRY BOARD MEMBER	2.00	X						0.	0.	0.
KRISTI COKER BOARD MEMBER	2.00	X						0.	0.	0.
IGNACIO ESTEBAN BOARD MEMBER	2.00	X						0.	0.	0.
LORI GLASS BOARD MEMBER	2.00	X						0.	0.	0.
JEANNINE JACOKES BOARD MEMBER	2.00	X						0.	0.	0.
TRINITA LOGUE BOARD MEMBER	2.00	X						0.	0.	0.
MARY ROGIER BOARD MEMBER	2.00	X						0.	0.	0.
MARK PINSKY PRESIDENT & CEO	40.00			X				189,511.	0.	17,161.
BETH LIPSON CHIEF FINANCIAL OFFICER	24.00			X				73,741.	0.	240.
HELEN LEUNG CHIEF OPERATING OFFICER	40.00					X		150,360.	0.	5,818.
PAIGE CHAPEL EVP, CARS	40.00					X		155,360.	0.	2,050.
DONNA FABIANI EVP, KNOWLEDGE SHARING	40.00					X		127,222.	0.	8,729.
SANDRA KERR EVP, POLICY	40.00					X		109,415.	0.	6,499.
LINA PAGE EVP, STRATEGIC COMMUNICA	40.00					X		116,214.	0.	15,844.

Part VII

1b Total

921,823.

0.

56,341.

6

3 Did the organization list any **former** officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual

	Yes	No
3		X
4	X	
5		X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization.

2	Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization	1
---	--	---

Part VIII Statement of Revenue

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	1 a	Federated campaigns	1a				
	b	Membership dues	1b				
	c	Fundraising events	1c				
	d	Related organizations	1d				
	e	Government grants (contributions)	1e	2000000.			
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	1349873.			
	g	Noncash contributions included in lines 1a-1f \$					
	h	Total. Add lines 1a-1f			3,349,873.		
Program Service Revenue	2 a	INTEREST ON LOANS	Business Code 525990	1,949,607.	1,949,607.		
	b	TECHNICAL SERVICES	900099	439,942.	439,942.		
	c	TRAINING EVENTS	900099	332,505.	332,505.		
	d	MEMBERSHIP DUES	900099	175,837.	175,837.		
	e	TECH.SVCS.-NEW MKTS. T	900099	40,000.	40,000.		
	f	All other program service revenue					
	g	Total. Add lines 2a-2f			2,937,891.		
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)		580,700.			580,700.
	4	Income from investment of tax-exempt bond proceeds					
	5	Royalties					
	6 a	Gross Rents	(i) Real (ii) Personal				
	b	Less: rental expenses					
	c	Rental income or (loss)					
	d	Net rental income or (loss)					
	7 a	Gross amount from sales of assets other than inventory	(i) Securities (ii) Other 39330675				
	b	Less: cost or other basis and sales expenses	39251939				
	c	Gain or (loss)	78,736.				
	d	Net gain or (loss)		78,736.		78,736.	
	8 a	Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	a				
	b	Less: direct expenses	b				
	c	Net income or (loss) from fundraising events					
	9 a	Gross income from gaming activities. See Part IV, line 19	a				
	b	Less: direct expenses	b				
	c	Net income or (loss) from gaming activities					
	10 a	Gross sales of inventory, less returns and allowances	a				
	b	Less: cost of goods sold	b				
c	Net income or (loss) from sales of inventory						
Miscellaneous Revenue				Business Code			
11 a	PUBLICATIONS	900099	5,105.	5,105.			
b							
c							
d	All other revenue						
e	Total. Add lines 11a-11d		5,105.				
12	Total revenue. See instructions.			6,952,305.	2,942,996.	0.	659,436.

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	838,246.	838,246.		
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	288,549.	247,378.	20,996.	20,175.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	1,720,726.	1,487,042.	228,624.	5,060.
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	13,416.	11,573.	1,654.	189.
9 Other employee benefits	148,353.	130,786.	16,950.	617.
10 Payroll taxes	142,102.	124,921.	15,402.	1,779.
11 Fees for services (non-employees)				
a Management				
b Legal	3,704.		3,704.	
c Accounting	25,250.	21,997.	2,916.	337.
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other	784,374.	662,086.	122,288.	
12 Advertising and promotion	173,406.	173,272.		134.
13 Office expenses	234,924.	212,359.	20,878.	1,687.
14 Information technology	33,315.	31,001.	2,245.	69.
15 Royalties				
16 Occupancy	244,761.	214,202.	27,450.	3,109.
17 Travel	130,180.	115,917.	12,277.	1,986.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	371,728.	368,498.	3,230.	
20 Interest	1,148,495.	1,148,495.		
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	34,214.	29,681.	4,060.	473.
23 Insurance	26,594.	23,193.	3,051.	350.
24 Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				
a PROVISION FOR LOAN LOSS	650,762.	650,762.		
b EMPLOYMENT AGENCY FEE	37,186.	17,636.	19,550.	
c MISCELLANEOUS	31,160.	26,520.	4,202.	438.
d PLAN MANAGEMENT CONTRAC	24,419.	24,419.		
e PAYROLL SERVICE	3,988.	3,489.	447.	52.
f All other expenses				
25 Total functional expenses. Add lines 1 through 24f	7,109,852.	6,563,473.	509,924.	36,455.
26 Joint costs. Check here <input type="checkbox"/> if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				

Part X Balance Sheet

		(A) Beginning of year		(B) End of year	
Assets	1 Cash - non-interest-bearing		1	3,579,262.	
	2 Savings and temporary cash investments		2	11,738,542.	
	3 Pledges and grants receivable, net		3	7,429,848.	
	4 Accounts receivable, net		4	380,468.	
	5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5		
	6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L		6		
	7 Notes and loans receivable, net		7	54,628,310.	
	8 Inventories for sale or use		8		
	9 Prepaid expenses and deferred charges		9	27,689.	
	10a Land, buildings, and equipment - cost or other basis. Complete Part VI of Schedule D	10a	515,163.		
	b Less: accumulated depreciation	10b	462,857.	0.	
	11 Investments - publicly traded securities		11	11,936,376.	
	12 Investments - other securities. See Part IV, line 11		12	550,266.	
	13 Investments - program-related. See Part IV, line 11		13		
	14 Intangible assets		14		
	15 Other assets. See Part IV, line 11		15	800.	
16 Total assets. Add lines 1 through 15 (must equal line 34)		0.	16	90,323,867.	
Liabilities	17 Accounts payable and accrued expenses		17	187,188.	
	18 Grants payable		18		
	19 Deferred revenue		19	147,000.	
	20 Tax-exempt bond liabilities		20		
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21		
	22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22		
	23 Secured mortgages and notes payable to unrelated third parties		23	53,417,000.	
	24 Unsecured notes and loans payable to unrelated third parties		24		
	25 Other liabilities. Complete Part X of Schedule D		0.	25	12,500,000.
	26 Total liabilities. Add lines 17 through 25		0.	26	66,251,188.
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.				
	27 Unrestricted net assets		27	9,146,075.	
	28 Temporarily restricted net assets		28	14,926,604.	
	29 Permanently restricted net assets		29		
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.				
	30 Capital stock or trust principal, or current funds		30		
	31 Paid-in or capital surplus, or land, building, or equipment fund		31		
	32 Retained earnings, endowment, accumulated income, or other funds		32		
	33 Total net assets or fund balances		0.	33	24,072,679.
	34 Total liabilities and net assets/fund balances		0.	34	90,323,867.

Form 990 (2009)

Part XI Financial Statements and Reporting

1 Accounting method used to prepare the Form 990: ☐ Cash ☒ Accrual ☐ Other _____

If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O

2a Were the organization's financial statements compiled or reviewed by an independent accountant?

b Were the organization's financial statements audited by an independent accountant?

c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?

If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.

d If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both

☐ Separate basis ☒ Consolidated basis ☐ Both consolidated and separate basis

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

	Yes	No
2a		X
2b	X	
2c	X	
3a	X	
3b	X	

Form 990 (2009)

Department of the Treasury
Internal Revenue Service

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

OMB No. 1545-0047

2009

Open to Public Inspection

Name of the organization

OPPORTUNITY FINANCE NETWORK

Employer identification number

20-5189202

Part I	Reason for Public Charity Status (All organizations must complete this part.) See instructions.
---------------	--

The organization is not a private foundation because it is (For lines 1 through 11, check only one box.)

- 1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**

2 ☐ A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E.)

3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**

4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state _____

5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II)

6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**

7 ☐ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II)

8 ☐ A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II)

9 ☒ An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2).** (Complete Part III)

10 ☐ An organization organized and operated exclusively to test for public safety See **section 509(a)(4).**

11 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See **section 509(a)(3).** Check the box that describes the type of supporting organization and complete lines 11e through 11h

a ☐ Type I b ☐ Type II c ☐ Type III - Functionally integrated d ☐ Type III - Other

e ☐ By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).

f ☐ If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box _____

g ☐ Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

(i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?

(ii) A family member of a person described in (i) above?

(iii) A 35% controlled entity of a person described in (i) or (ii) above?

h ☐ Provide the following information about the supported organization(s).

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

[illegible]

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2009

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public support. Subtract line 5 from line 4						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
11 Total support. Add lines 7 through 10						
12 Gross receipts from related activities, etc. (see instructions)					12	
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ▶ <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

14 Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f))	14	%
15 Public support percentage from 2008 Schedule A, Part II, line 14	15	%
16a 33 1/3% support test - 2009. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ▶ <input type="checkbox"/>		
b 33 1/3% support test - 2008. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ▶ <input type="checkbox"/>		
17a 10% -facts-and-circumstances test - 2009. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ▶ <input type="checkbox"/>		
b 10% -facts-and-circumstances test - 2008. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ▶ <input type="checkbox"/>		
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ▶ <input type="checkbox"/>		

Schedule A (Form 990 or 990-EZ) 2009

Part III Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I.)**Section A. Public Support**

Calendar year (or fiscal year beginning in)▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")					3349873.	3349873.
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose					2937891.	2937891.
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5					6287764.	6287764.
7a Amounts included on lines 1, 2, and 3 received from disqualified persons					1075000.	1075000.
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						0.
c Add lines 7a and 7b					1075000.	1075000.
8 Public support (Subtract line 7c from line 6)						5212764.

Section B. Total Support

Calendar year (or fiscal year beginning in)▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9 Amounts from line 6					6287764.	6287764.
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources					580,700.	580,700.
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b					580,700.	580,700.
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)					5,105.	5,105.
13 Total support (Add lines 9, 10c, 11, and 12)					6873569.	6873569.
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here <input checked="" type="checkbox"/>						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2008 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2008 Schedule A, Part III, line 17	18	%

- 19a 33 1/3% support tests - 2009.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ☐
- b 33 1/3% support tests - 2008.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ☐
- 20 Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ☐

SCHEDULE C
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

OMB No 1545-0047

2009

Open to Public
Inspection

▶ **Complete if the organization is described below.**

▶ **Attach to Form 990 or Form 990-EZ.** ▶ **See separate instructions.**

If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part VI, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations. Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations. Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations. Complete Part I-A only.

If the organization answered "Yes," to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)). Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)). Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax), then

- Section 501(c)(4), (5), or (6) organizations: Complete Part III

Name of organization

OPPORTUNITY FINANCE NETWORK

Employer identification number

20-5189202

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

- 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV
- 2 Political expenditures ▶ \$ _____
- 3 Volunteer hours _____

Part I-B Complete if the organization is exempt under section 501(c)(3).

- 1 Enter the amount of any excise tax incurred by the organization under section 4955 ▶ \$ _____
- 2 Enter the amount of any excise tax incurred by organization managers under section 4955 ▶ \$ _____
- 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ☐ Yes ☐ No
- 4a Was a correction made? ☐ Yes ☐ No
- b If "Yes," describe in Part IV

Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ▶ \$ _____
- 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ▶ \$ _____
- 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b ▶ \$ _____
- 4 Did the filing organization file Form 1120-POL for this year? ☐ Yes ☐ No
- 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which payments were made. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-

For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.
LHA

Schedule C (Form 990 or 990-EZ) 2009

Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

- A Check ☐ if the filing organization belongs to an affiliated group.
 B Check ☐ if the filing organization checked box A and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals												
1a Total lobbying expenditures to influence public opinion (grass roots lobbying)															
b Total lobbying expenditures to influence a legislative body (direct lobbying)															
c Total lobbying expenditures (add lines 1a and 1b)															
d Other exempt purpose expenditures															
e Total exempt purpose expenditures (add lines 1c and 1d)															
f Lobbying nontaxable amount. Enter the amount from the following table in both columns															
<table border="1"> <thead> <tr> <th>If the amount on line 1e, column (a) or (b) is:</th> <th>The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </tbody> </table>		If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000	Over \$17,000,000	\$1,000,000.		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:														
Not over \$500,000	20% of the amount on line 1e														
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000														
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000														
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000														
Over \$17,000,000	\$1,000,000.														
g Grassroots nontaxable amount (enter 25% of line 1f)															
h Subtract line 1g from line 1a. If zero or less, enter -0-															
i Subtract line 1f from line 1c. If zero or less, enter -0-															
j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?		<input type="checkbox"/> Yes	<input type="checkbox"/> No												

4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.)

Lobbying Expenditures During 4-Year Averaging Period

Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

Schedule C (Form 990 or 990-EZ) 2009

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

	(a)		(b)
	Yes	No	Amount
1 During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
a Volunteers?		X	
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	X		
c Media advertisements?		X	
d Mailings to members, legislators, or the public?	X		30,896.
e Publications, or published or broadcast statements?		X	
f Grants to other organizations for lobbying purposes?		X	
g Direct contact with legislators, their staffs, government officials, or a legislative body?		X	
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		X	
i Other activities? If "Yes," describe in Part IV		X	
j Total. Add lines 1c through 1i			30,896.
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		X	
b If "Yes," enter the amount of any tax incurred under section 4912			
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

	Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?	1	
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2	
3 Did the organization agree to carryover lobbying and political expenditures from the prior year?	3	

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, line 3 is answered "Yes."

1 Dues, assessments and similar amounts from members	1	
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid):		
a Current year	2a	
b Carryover from last year	2b	
c Total	2c	
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
5 Taxable amount of lobbying and political expenditures (see instructions)	5	

Part IV Supplemental Information

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, and Part II-B, line 1i. Also, complete this part for any additional information.

Schedule D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

- ▶ Complete if the organization answered "Yes," to Form 990,
Part IV, line 6, 7, 8, 9, 10, 11, or 12.
▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2009

Open to Public
Inspection

Name of the organization

OPPORTUNITY FINANCE NETWORK

Employer identification number

20-5189202

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate contributions to (during year)		
3 Aggregate grants from (during year)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?		<input type="checkbox"/> Yes <input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?		<input type="checkbox"/> Yes <input type="checkbox"/> No

Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7

1 Purpose(s) of conservation easements held by the organization (check all that apply)

<input type="checkbox"/> Preservation of land for public use (e.g., recreation or pleasure)	<input type="checkbox"/> Preservation of an historically important land area
<input type="checkbox"/> Protection of natural habitat	<input type="checkbox"/> Preservation of a certified historic structure
<input type="checkbox"/> Preservation of open space	

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

	Held at the End of the Tax Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 8/17/06	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ _____

4 Number of states where property subject to conservation easement is located ▶ _____

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ▶ _____

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ \$ _____

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9 In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" to Form 990, Part IV, line 8

1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items

b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenues included in Form 990, Part VIII, line 1	▶ \$ _____
(ii) Assets included in Form 990, Part X	▶ \$ _____

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items:

a Revenues included in Form 990, Part VIII, line 1	▶ \$ _____
b Assets included in Form 990, Part X	▶ \$ _____

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items

(check all that apply)

a ☐ Public exhibitiond ☐ Loan or exchange programsb ☐ Scholarly researche ☐ Other _____c ☐ Preservation for future generations

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets

to be sold to raise funds rather than to be maintained as part of the organization's collection?

☐ Yes☐ No**Part IV Escrow and Custodial Arrangements.** Complete if organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?

☐ Yes☐ No

b If "Yes," explain the arrangement in Part XIV and complete the following table:

	Amount
1c	
1d	
1e	
1f	

c Beginning balance

d Additions during the year

e Distributions during the year

f Ending balance

2a Did the organization include an amount on Form 990, Part X, line 21?

☐ Yes☐ No

b If "Yes," explain the arrangement in Part XIV

Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

2 Provide the estimated percentage of the year end balance held as

a Board designated or quasi-endowment ▶ _____ %

b Permanent endowment ▶ _____ %

c Term endowment ▶ _____ %

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

(i) unrelated organizations

(ii) related organizations

	Yes	No
3a(i)		
3a(ii)		
3b		

b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

4 Describe in Part XIV the intended uses of the organization's endowment funds.

Part VI Investments - Land, Buildings, and Equipment. See Form 990, Part X, line 10

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment		515,163.	462,857.	52,306.
e Other				
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				52,306.

Schedule D (Form 990) 2009

Part VII Investments - Other Securities. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation. Cost or end-of-year market value
Financial derivatives		
Closely-held equity interests		
Other		
Total. (Col (b) must equal Form 990, Part X, col (B) line 12.) ►		

Part VIII	Investments - Program Related. See Form 990, Part X, line 13
------------------	---

[illegible]

Part IX	Other Assets. See Form 990, Part X, line 15
----------------	--

[illegible]**Total.** (Column (b) must equal Form 990, Part X, col (B) line 15)

Part X	Other Liabilities. See Form 990, Part X, line 25.
---------------	--

1.	(a) Description of liability	(b) Amount
	Federal income taxes	
	JP MORGAN CHASE EQUITY EQUIVALENT INVESTMENTS	9,500,000.
	WACHOVIA EQUITY EQUIVALENT INVESTMENT	3,000,000.
	Total. (Column (b) must equal Form 990, Part X, col (B) line 25.)	12,500,000.

2. FIN 48 Footnote. In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48.

Part XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	6,952,305.
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	7,109,852.
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3	<157,547.>
4	Net unrealized gains (losses) on investments	4	<125,785.>
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV.)	8	24,356,011.
9	Total adjustments (net). Add lines 4 through 8	9	24,230,226.
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10	24,072,679.

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains, and other support per audited financial statements	1	7,143,694.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains on investments	2a	<125,785.>
b	Donated services and use of facilities	2b	114,674.
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV.)	2d	202,500.
e	Add lines 2a through 2d	2e	191,389.
3	Subtract line 2e from line 1	3	6,952,305.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV.)	4b	
c	Add lines 4a and 4b	4c	0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	6,952,305.

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements	1	7,427,026.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	114,674.
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIV.)	2d	202,500.
e	Add lines 2a through 2d	2e	317,174.
3	Subtract line 2e from line 1	3	7,109,852.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV.)	4b	
c	Add lines 4a and 4b	4c	0.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	7,109,852.

Part XIV Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.

PART XI, LINE 8 - OTHER ADJUSTMENTS:

NET ASSETS FROM OPPORTUNITY FINANCE NETWORK EIN 04-2939243: 24356011.

PART XII, LINE 2D - OTHER ADJUSTMENTS:

FORGIVENESS OF INTEREST: 202500.

PART XIII, LINE 2D - OTHER ADJUSTMENTS:

Part XIV Supplemental Information *(continued)*

FORGIVENESS OF INTEREST: 202500.

SCHEDULE I
(Form 990)

Department of the Treasury
Internal Revenue Service

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.
▶ Attach to Form 990.

OMB No 1545-0047

2009

Open to Public
Inspection

Name of the organization

OPPORTUNITY FINANCE NETWORK

Employer identification number
20-5189202

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

☒ Yes ☐ No

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed. ▶ ☐

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NEW HAMPSHIRE COMMUNITY LOAN FUND 7 WALL STREET CONCORD, NH 03301	22-2524015	501(C)(3)	500,000.	0.			WACHOVIA NEXT AWARDS
FEDERATION OF APPALACHAIN HOUSING ENTERPRISES, INC. - P.O. BOX 908 - BEREA, KY 40403	31-0986871	501(C)(3)	250,000.	0.			WACHOVIA NEXT AWARDS
PACIFIC COMMUNITY VENTURES 51 FEDERAL ST., SUITE 402 SAN FRANCISCO, CA 94107	77-0485877	501(C)(3)	25,000.	0.			WACHOVIA NEXT AWARDS
SEEDCO FINANCIAL SERVICES, INC. 915 BROADWAY, 18TH FLOOR NEW YORK, NY 10010	59-3814814	501(C)(3)	25,000.	0.			WACHOVIA NEXT AWARDS
COMMUNITY & SHELTER ASSISTANCE CORP - 212 E. FIRST STREET - NEWBERG, OR 97132	93-0977842	501(C)(3)	25,000.	0.			WACHOVIA NEXT AWARDS
CITIZEN POTAWATOMI COMMUNITY DEV. CORP. - 1601 S. GORDON COOPER DRIVE - SHAWNEE, OK 74801	73-0945447		25,000.	0.			WACHOVIA NEXT AWARDS

2 Enter total number of section 501(c)(3) and government organizations

3 Enter total number of other organizations

▶ **5.**
▶ **1.**

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule I (Form 990) 2009

**SCHEDULE J
(Form 990)**

Department of the Treasury
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 23.

▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization

OPPORTUNITY FINANCE NETWORK

Employer identification number

20-5189202

Part I Questions Regarding Compensation

1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- | | |
|--|--|
| <input type="checkbox"/> First-class or charter travel | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef) |

b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain

2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?

3 Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director. Check all that apply.

- | | |
|--|---|
| <input type="checkbox"/> Compensation committee | <input type="checkbox"/> Written employment contract |
| <input type="checkbox"/> Independent compensation consultant | <input type="checkbox"/> Compensation survey or study |
| <input type="checkbox"/> Form 990 of other organizations | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

4 During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization

a Receive a severance payment or change-of-control payment?

b Participate in, or receive payment from, a supplemental nonqualified retirement plan?

c Participate in, or receive payment from, an equity-based compensation arrangement?

If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.

5 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of

a The organization?

b Any related organization?

If "Yes" to line 5a or 5b, describe in Part III

6 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of

a The organization?

b Any related organization?

If "Yes" to line 6a or 6b, describe in Part III

7 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III

8 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regs. section 53.4958-4(a)(3)? If "Yes," describe in Part III

9 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

Yes No

1b

2

4a

4b

4c

5a

5b

6a

6b

7

8

9

X

X

X

X

X

X

X

X

X

SCHEDULE O
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990

Complete to provide information for responses to specific questions on
Form 990 or to provide any additional information.
▶ Attach to Form 990.

OMB No 1545-0047

2009

Open to Public
Inspection

Name of the organization

OPPORTUNITY FINANCE NETWORK

Employer identification number
20-5189202

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

POLICY, AND CAPACITY DEVELOPMENT. OFN'S PROGRAMS FOCUS ON SUPPORTING
COMMUNITY DEVELOPMENT FINANCIAL INSTITUTIONS (CDFIS) AND THE LOW INCOME
AND LOW WEALTH COMMUNITIES THAT THEY SERVE IN THE AREAS OF AFFORDABLE
HOUSING, SMALL BUSINESS DEVELOPMENT AND VITAL COMMUNITY FACILITIES THAT
BENEFIT LOW-INCOME PEOPLE. OFN'S PROGRAMS AND SERVICES INCLUDE
FINANCIAL PRODUCTS AND SERVICES FOR CDFIS, TRAINING AND CONSULTING
SERVICES FOR THE INDUSTRY, AND POLICY WORK ON BEHALF OF THE INDUSTRY.

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

THAT THEY SERVE IN THE AREAS OF AFFORDABLE HOUSING, SMALL BUSINESS
DEVELOPMENT AND VITAL COMMUNITY FACILITIES THAT BENEFIT LOW-INCOME
PEOPLE. OFN'S PROGRAMS AND SERVICES INCLUDE FINANCIAL PRODUCTS AND
SERVICES FOR CDFIS, TRAINING AND CONSULTING SERVICES FOR THE INDUSTRY,
AND POLICY WORK ON BEHALF OF THE INDUSTRY.

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS

AND EXPANDING VITAL COMMUNITY SERVICES LIKE CHILDCARE, HEALTHCARE AND
SCHOOLS, AND STARTING AND GROWING SMALL BUSINESSES.

CARS: THE GOAL OF THE CARS RATING SYSTEM IS TO INCREASE AND FACILITATE
THE FLOW OF CAPITAL TO CDFIS WHO IN TURN PROVIDE CAPITAL TO PEOPLE AND
COMMUNITIES WHO DO NOT HAVE ACCESS TO CAPITAL; PROVIDE THE INDUSTRY
WITH GREATER CREDIBILITY AND TRANSPARENCY; AND HELP OPPORTUNITY
FINANCIAL INSTITUTIONS IMPROVE THEIR PERFORMANCE SO THEY HAVE AN EVEN
GREATER IMPACT ON DISADVANTAGED COMMUNITIES. A TOTAL OF 21 CDFIS

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule O (Form 990) 2009

932211
02-03-10

SCHEDULE O

(Form 990)

Department of the Treasury
Internal Revenue Service**Supplemental Information to Form 990**Complete to provide information for responses to specific questions on
Form 990 or to provide any additional information.
▶ Attach to Form 990.

OMB No. 1545-0047

2009Open to Public
Inspection

Name of the organization

OPPORTUNITY FINANCE NETWORK

Employer identification number

20-5189202

PARTICIPATED IN THE CARS RATINGS PROCESS IN 2009, WHICH PROVIDES A
RATING FOR THE CDFI ON FINANCIAL PERFORMANCE AND IMPACT.

FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS

CDFI FUND. DIRECTLY, AND IN PARTNERSHIP WITH FIRST NATIONS OWEESTA
CORPORATION, OFN WORKED WITH FOUR NATIVE CDFIS OR START-UP CDFIS. OTHER
PRODUCTS AND SERVICES THAT IMPROVE THE PERFORMANCE OF CDFIS INCLUDE AN
ANNUAL TRAINING CONFERENCE, PUBLICATIONS, AND OTHER KNOWLEDGE SHARING
ACTIVITIES.

IN 2008, OFN EXPENSED \$141,123 IN GRANTS FOR THE CDFI DATA PROJECT BUT
HAD TO BACK OUT A PORTION OF THE EXPENSE (\$11,754) IN 2009 BECAUSE ONE
OF THE CDP PARTNERS DID NOT COMPLETE THE REQUIRED ACTIVITY TO RECEIVE
THEIR GRANT.

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

EXTERNAL RELATIONS: EXTERNAL RELATIONS IS OFN'S STRATEGIC
COMMUNICATIONS ACTIVITY WHICH PROVIDE MARKETING AND PUBLIC RELATIONS
EFFORTS FOR OFN AND THE COMMUNITY DEVELOPMENT FINANCE INDUSTRY.
EXPENSES \$ 223174. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.

FORM 990, PART VI, SECTION A, LINE 6: PER OFN'S BYLAWS, THERE IS ONE
CLASS OF MEMBERSHIP AVAILABLE TO PRIVATE, NON-GOVERNMENTAL, MISSION-DRIVEN
FINANCIAL INSTITUTIONS THAT MEET THE QUALIFICATIONS FOR MEMBERSHIP. EACH
MEMBER IS ENTITLED TO BE REPRESENTED AT ANY MEETING OF THE MEMBERS BY UP TO
TWO DELEGATES, WHO SHALL BE EITHER AN EMPLOYEE OF OR A BOARD MEMBER OF THE

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Schedule O (Form 990) 2009

932211
02-03-10

SCHEDULE O

(Form 990)

Department of the Treasury
Internal Revenue Service**Supplemental Information to Form 990**Complete to provide information for responses to specific questions on
Form 990 or to provide any additional information.
▶ Attach to Form 990.

OMB No 1545-0047

2009Open to Public
Inspection

Name of the organization

OPPORTUNITY FINANCE NETWORK

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MEMBER. THE PRESENCE IN PERSON OF DELEGATES REPRESENTING AT LEAST ONE-THIRD OF THE MEMBERS SHALL CONSTITUTE A QUORUM FOR THE TRANSACTION OF BUSINESS. WHEN A QUORUM IS PRESENT AT ANY MEETING, THE MAJORITY OF THE VOTES PRESENT WILL DECIDE ANY QUESTION BROUGHT BEFORE THE MEETING. EACH MEMBER IS ENTITLED TO TWO VOTES ON EACH MATTER MATTER SUBMITTED TO A VOTE OF THE MEMBERS. ALL VOTING, EXCEPT ELECTIONS FOR DIRECTORS WHICH SHALL BE BY WRITTEN BALLOT, MAY BE BY VOICE VOTE OR BALLOT. AT LEAST TWO-THIRDS OF THE DIRECTORS SHALL BE ELECTED BY THE MEMBERS. UP TO ONE-THIRD OF THE DIRECTORS MAY BE APPOINTED BY THE BOARD OF DIRECTORS. NOMINATIONS FOR CANDIDATES FOR DIRECTOR MAY BE MADE BY A WRITTEN NOTICE TO THE NOMINATING COMMITTEE AND MUST BE ENDORSED BY NOT LESS THAN TWO (2) MEMBERS AND DELIVERED AT LEAST SIXTY (60) DAYS BEFORE THE ELECTION. ALL NOMINATIONS SO MADE BY MEMBERS SHALL BE PRESENTED TO THE MEMBERSHIP FOR CONSIDERATION.

NEW BYLAWS MAY BE ADOPTED, OR THE EXISTING BYLAWS MAY BE AMENDED OR REPEALED, BY THE AFFIRMATIVE VOTE OF A MAJORITY OF THE VOTES REPRESENTED AND VOTING AT A DULY HELD MEETING OF MEMBERS AT WHICH A QUORUM IS PRESENT.

FORM 990, PART VI, SECTION A, LINE 7A: SEE EXPLANATION FOR PAGE 6, PART VI, LINE 6

FORM 990, PART VI, SECTION A, LINE 7B: SEE EXPLANATION FOR PAGE 6, PART VI, LINE 6

FORM 990, PART VI, SECTION B, LINE 11: PRIOR TO FILING FORM 990, THE CHIEF FINANCIAL OFFICER AND THE VP, ACCOUNTING REVIEW THE FORM FOR ACCURACY AND

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule O (Form 990) 2009

932211
02-03-10

SCHEDULE O

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Department of the Treasury
Internal Revenue Service**Supplemental Information to Form 990**Complete to provide information for responses to specific questions on
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THEN FORWARD IT TO THE PRESIDENT AND CEO FOR REVIEW. IN ADDITION, THE ORGANIZATION SENDS AN ELECTRONIC COPY OF THE FORM 990 TO ITS BOARD OF DIRECTORS. THIS IS PRIMARILY FOR INFORMATIONAL PURPOSES AND TO ALLOW FOR ADDITIONAL COMMENTS FROM THE BOARD, BUT DOES NOT REQUIRE ACTION FROM THE BOARD.

FORM 990, PART VI, SECTION B, LINE 12C: EACH YEAR THE BOARD OF DIRECTORS SIGNS A POTENTIAL CONFLICT OF INTEREST STATEMENT WHICH STATES THAT THEY DO NOT HAVE A POTENTIAL CONFLICT OF INTEREST AS COVERED BY THE OPPORTUNITY FINANCE NETWORK'S CONFLICT OF INTEREST POLICY. IF THE BOARD MEMBER (OR ANY RELATED PARTY) IS INVOLVED IN TRANSACTIONS WITH OFN INCLUDING BUT NOT LIMITED TO LOAN AND GRANT APPLICATIONS TO OFN, AND CONSULTING CONTRACTS WITH OFN, THE BOARD MEMBER DISCLOSES THIS IN A SEPARATE STATEMENT.

FORM 990, PART VI, SECTION B, LINE 15: THE COMPENSATION FOR THE PRESIDENT & CEO IS DETERMINED THROUGH AN ANNUAL PERFORMANCE REVIEW CONDUCTED BY THE BOARD OF DIRECTORS. THE EXECUTIVE & PERSONNEL COMMITTEE OF THE BOARD MANAGES THIS PROCESS BY REVIEWING THE PRESIDENT AND CEO'S PERFORMANCE AGAINST SET GOALS. THEY USE A DOCUMENTED PROCESS OF SELF ASSESSMENT AND PERFORMANCE REVIEW. THIS COMMITTEE MEETS TO DEVELOP RECOMMENDATIONS WHICH ARE PRESENTED TO THE FULL BOARD FOR DECISION. THE FULL BOARD CONDUCTS AN EXECUTIVE SESSION WITH THE CEO & PRESIDENT TO DISCUSS HIS PERFORMANCE REVIEW AND COMPENSATION ACTION, AND TO DETERMINE GOALS FOR THE FOLLOWING YEAR. THESE RESULTS ARE DOCUMENTED FOR THE RECORDS. THE EXECUTIVE & PERSONNEL COMMITTEE AND THE BOARD OF DIRECTORS CONSISTS OF INDUSTRY PEERS WHO ARE WELL ACQUAINTED AND UP-TO-DATE ON COMPENSATION COMPARABILITY IN THE

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INDUSTRY. THEY MAY FROM TIME TO TIME SEEK CONFIRMATION OF INDUSTRY DATA AS
THEY DEEM APPROPRIATE.

FORM 990, PART VI, SECTION C, LINE 19: THE ORGANIZATION MAKES ITS
GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS
AVAILABLE TO THE PUBLIC UPON REQUEST.

FORM 990, PART VII CONTACT ADDRESSES FOR OFFICERS, DIRECTORS, ETC:

MARY MATHEWS - 202 W. SUPERIOR STREET, SUITE 311, DULUTH, MN 55802

ALAN BRANSON - 4 OLD RIVER PLACE, SUITE A, JACKSON, MS 39202

DAVID BECK - 301 W. MAIN STREET, DURHAM, NC 27701-3619

DOUG BYSTRY - 23861 EL TORO ROAD, STE. 401, LAKE FOREST, CA 92360-4733

KRISTI COKER - 130 EAST MACARTHUR, SUITE 206, SHAWNEE, OK 74804

IGNACIO ESTEBAN - 501 NORTH MAGNOLIA AVE., SUITE 100, ORLANDO, FL 32801

LORI GLASS - 1025 CONNECTICUT AVE. N.W., STE. 900, WASHINGTON, DC 20036

JEANNINE JACOKES - 1801 K STREET NW, SUITE M-100, WASHINGTON, DC 20006

TRINITA LOGUE - ONE NORTH LA SALLE, SUITE 700, CHICAGO, IL 60602

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MARY ROGIER - 870 MARKET STREET, SUITE 677, SAN FRANCISCO, CA 94102

FORM 990, PART XI, LINE 2C

THE FINANCE AND AUDIT COMMITTEE IS MADE UP OF FIVE MEMBERS, AT LEAST
THREE OF WHICH ARE SITTING BOARD MEMBERS. THE BOARD TREASURER SERVES AS
CHAIR OF THE FINANCE AND AUDIT COMMITTEE. THE COMMITTEE GIVES SPECIFIC
AND ONGOING ATTENTION TO THE FINANCIAL MANAGEMENT OF OPPORTUNITY
FINANCE NETWORK. THE COMMITTEE REPORTS REGULARLY TO THE FULL BOARD, AND
MAKES RECOMMENDATIONS AS APPROPRIATE. THE COMMITTEE'S RESPONSIBILITIES
INCLUDE APPROVING THE ANNUAL BUDGET AND THE AUDIT, AS WELL AS
OVERSEEING INVESTMENT POLICY AND INVESTMENT MANAGEMENT, CAPITALIZATION
OVERSIGHT AND ASSISTANCE, INTERNAL CONTROL OVERSIGHT, AND PERIODIC
FINANCIAL REVIEWS. IN ADDITION, THE FINANCE COMMITTEE REVIEWS STAFF'S
ANALYSIS OF PORTFOLIO QUALITY AND ADEQUACY OF RESERVES. THE FINANCE
COMMITTEE MEETS MEETS IN DECEMBER TO REVIEW THE PRELIMINARY BUDGET, IN
APRIL TO APPROVE THE AUDIT, OTHERWISE AS NEEDED, SUBJECT TO THE CALL OF
THE COMMITTEE CHAIR.

FORM 990, PAGE 1, BOX B

FORM 990 INITIAL RETURN: OPPORTUNITY FINANCE NETWORK (OFN) WAS
INCORPORATED FEBRUARY 9, 2006 UNDER THE LAWS OF THE COMMONWEALTH OF
PENNSYLVANIA AND IS A PUBLICLY SUPPORTED ORGANIZATION UNDER SECTION
501(C)(3) OF THE INTERNAL REVENUE CODE. EFFECTIVE DECEMBER 31, 2008, OFN
MERGED WITH ITS PREDECESSOR ORGANIZATION, OPPORTUNITY FINANCE
CORPORATION (FORMERLY NATIONAL COMMUNITY CAPITAL ASSOCIATION) IN ORDER

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TO CHANGE THE STATE OF INCORPORATION FROM CALIFORNIA TO PENNSYLVANIA.

THE PREDECESSOR CORPORATION WAS INCORPORATED JULY 2, 1986 UNDER THE
LAWS OF THE STATE OF CALIFORNIA.

THE FORM 990 FOR THE TAX YEAR ENDING 12/31/09 WILL BE THE INITIAL
RETURN FOR OPPORTUNITY FINANCE NETWORK (PA CORPORATION) UNDER TAX ID
20-5189202.

Part V Transactions With Related Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35, or 36.)**Note.** Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule**1** During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?**a** Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity**b** Gift, grant, or capital contribution to other organization(s)**c** Gift, grant, or capital contribution from other organization(s)**d** Loans or loan guarantees to or for other organization(s)**e** Loans or loan guarantees by other organization(s)**f** Sale of assets to other organization(s)**g** Purchase of assets from other organization(s)**h** Exchange of assets**i** Lease of facilities, equipment, or other assets to other organization(s)**j** Lease of facilities, equipment, or other assets from other organization(s)**k** Performance of services or membership or fundraising solicitations for other organization(s)**l** Performance of services or membership or fundraising solicitations by other organization(s)**m** Sharing of facilities, equipment, mailing lists, or other assets**n** Sharing of paid employees**o** Reimbursement paid to other organization for expenses**p** Reimbursement paid by other organization for expenses**q** Other transfer of cash or property to other organization(s)**r** Other transfer of cash or property from other organization(s)**2** If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

	(a) Name of other organization(s)	(b) Transaction type (a-r)	(c) Amount involved
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			

