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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.

Open to Public Inspection

A F	or the	2012 calendar year, or tax year beginning and ending	g			
	heck if oplicable			D Employ	er identifica	ation number
X	Addres: change	NEW PROFIT INC.	- 1			
]Name]change	Doing Business As			04-33	96766
]Initial return	Number and street (or P.O. box if mail is not delivered to street address) Room/	/suite	E Telepho	ne number	
	Termin- ated			•		12-8800
	Amende return	City, town, or post office, state, and ZIP code		G Gross reco	erpts \$	16,822,306.
	Applica	BOSION, MA UZIIO		H(a) is this	s a group ret	
	pending	F Name and address of principal officer DOUGLAS BURCHARD			filiates?	Yes X No
		SAME AS C ABOVE	,		affiliates incli	
		mpt status. X 501(c)(3) 501(c) () (insert no.) 4947(a)(1) or	527			st (see instructions)
		e: WWW.NEWPROFIT.COM			exemption	
			Year	of formation:	T 3 3 1 W	State of legal domicile: MA
Pa		Summary	T-7 T	mir coc	1 T A T	
g	1 1	Briefly describe the organization's mission or most significant activities: TO WORK ENTREPRENEURS, PHILANTHROPISTS AND LEADERS	A C.B.	OGG GE	TAL	ΨO
nan	-	Check this box If the organization discontinued its operations or disposed of				· · · · · · · · · · · · · · · · · · ·
ver		Number of voting members of the governing body (Part VI, line 1a)	more	111a112376		15
8		Number of independent voting members of the governing body (Part VI, line 1b)		-	4	14
တို		Total number of individuals employed in calendar year 2012 (Part V, line 2a)			5	62
vitie		Total number of volunteers (estimate if necessary)			6	0
Activities & Governance		Total unrelated business revenue from Part VIII, column (C), line 12		•	7a	0.
_		Not uprolated business tayable income from Form 900 Thirty 24			7b	0.
		Net difference business taxable income from our services		Prior Y		Current Year
ě	8 (Contributions and grants (Part VIII, line 1h)		8,674	1,162.	16,795,036.
ent	ı	Program service revenue (Part VIII, line 2g) Investment income (Part VIII, column (A), lines 3, 4, and 7d)	<u> </u>		0.	0.
Revenue	l	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	\perp		207.	6,320.
_		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10e, and rile)	-		1,043.	20,950.
		Total revenue - add lines 8 through 11 (must equal Part VIII Cerum A), line 12)		10,662	,412.	16,822,306. 14,335,466.
*		Grants and similar amounts paid (Part IX, column (A), lines 1-3)	\vdash	10,002	0.	14,333,400.
*		Benefits paid to or for members (Part IX, column (A), line 4)	\vdash	6 200	9,248.	6,880,078.
ses	1	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) Professional fundraising fees (Part IX, column (A), line 11e)	-	0,20.	0.	0.
* Expenses	L	Total fundraising expenses (Part IX, column (D), line 25) 1,379,277.	-			
Щ		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	- -	3,733	$\frac{3,174.}{}$	2,969,390.
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		20,60		24,184,934.
**	19	Revenue less expenses. Subtract line 18 from line 12	7		652.	> <7,362,628.>
Net Assets or Fund Balances				ginning of C		End of Year
sets	20	Total assets (Part X, line 16)		35,554		29,148,304.
t As	21	Total liabilities (Part X, line 26)			3,972.	3,085,590.
컐	22	Net assets or fund balances. Subtract line 21 from line 20		33,46	5,731.	26,062,714.
		Signature Block				
	-	elties of perjury, I declare that I have examined this return, including accompanying schedules and			-	/ knowledge and belief, it is
true	, correc	ct, and copplete. Declaration of preparer (other than officer) is based on all information of which pr	eparer	nas any kno		7
٥.		Signature of office			10 10 1	2
Sig		DOUGLAS BORCHARD, MANAGING DIRECTOR & CO	0		2.0	
Her	е	Type or print name and title				
		Print/Type preparer's name Preparer's signature	П	Date	Check	PTIN
Pai	d	MATTHEW HUTT, CPA MATTHEW HUTT, CPA			13 self-employe	
	- parer	Firm's name ALEXANDER, ARONSON, FINNING & CO.,	P.		rm's EIN	04-2571780
	Only	Firm's address 21 EAST MAIN STREET		· ·		
	-	WESTBORO, MA 01581		P	hone no. 5	08-366-9100
Ma	y the II	RS discuss this return with the preparer shown above? (see instructions)		<u> </u>		X Yes No
	01 12-1					Form 990 (2012)

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION ** Please see appendix to page 1

	_		
Form 9	90	(20	12)

4e

COMMUNITIES.

Total program service expenses

Other program services (Describe in Schedule O)

including grants of \$

20.375.689.

) (Revenue \$

			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	1	х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	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	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
•	during the tax year? If "Yes," complete Schedule C, Part II	4	х	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which 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	6		<u>X</u>
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	7		<u>X</u>
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		<u>X</u>
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, 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	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		<u>X</u>
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X			
	as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,		Х	
	Part VI	_11a	Λ	
D	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	11b		х
_	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total	110		
·	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	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	1.0		
u	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		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 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	ļ	X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		<u>x</u>
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			.
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		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, Parts II and IV	15		v
46	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals	13		·
16	located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		<u>x</u>
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	17		Х
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	18		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	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	<u> </u>	
		Form	1990	(2012)

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Part IV | Checklist of Required Schedules (continued)

	1		Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the			
	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	_ <u>X</u> _	
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? If "Yes," complete Schedule I, Parts I and III	22		<u>X</u>
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? If "Yes," complete		v	
	Schedule J	23_	X	
24a				
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete	040		х
L	Schedule K. If "No", go to line 25	24a 24b		
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	240		
C	any tax-exempt bonds?	24c		
ч	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a	270		
204	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		х
ь	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? If "Yes," complete			
	Schedule L, Part I	25b		х
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified			
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		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)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	Х	177
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			.
^4	contributions? If "Yes," complete Schedule M	30_	ļ	X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	24		x
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	31		
JZ	Schedule N, Part II	32	1	х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	U_		
	sections 301 7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34	L	X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	<u></u>	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		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? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
	Note. All Form 990 filers are required to complete Schedule O	_38_	X	<u> </u>
		Form	990	(2012)

Form	990 (2012) NEW PROFIT INC. 04-3396	766	Р	age 5
Par	t V Statements Regarding Other IRS Filings and Tax Compliance	_		
	Check if Schedule O contains a response to any question in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 25			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			1
	(gambling) winnings to prize winners?	1c		
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 52			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	_X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
	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 instructions for 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
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			l
	any contributions that were not tax deductible as charitable contributions?	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).			
а	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
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		ļ
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	_		7,
_	to file Form 8282?	7c		X
	If "Yes," indicate the number of Forms 8282 filed during the year 7d			v
e	Did the organization 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
9	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		+
_	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	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? Sponsoring organizations maintaining donor advised funds.	8		
9		9a		
a	Did the organization make any taxable distributions under section 4966? Did the organization make a distribution to a donor, donor advisor, or related person?	9b		+
10	Section 501(c)(7) organizations. Enter:	90		
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b	İ		ľ
11	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders		1	
	Gross income from other sources (Do not net amounts due or paid to other sources against			
-	amounts due or received from them)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	1		
	Is the organization licensed to issue qualified health plans in more than one state?	13a		
u	Note. See the instructions for additional information the organization must report on Schedule O			1
ь	Enter the amount of reserves the organization is required to maintain by the states in which the	1		1
-	organization is licensed to issue qualified health plans			1
c	Enter the amount of reserves on hand	1	1	1
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	ļ	
	The state of the s		- 000	(2012

Form 990 (2012)

NEW PROFIT INC.

04-3396766

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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.

Check if Schedule O contains a response to any question in this Part VI

Section A. Governing Body and Management

Sec	tion A. Governing Body and Management						
		ı	1	a		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a		15	ł		
	If there are material differences in voting rights among members of the governing body, or if the governing						
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.	١		1 4	ŀ		
b	Enter the number of voting members included in line 1a, above, who are independent	<u>1b</u>		14	İ		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationsh	ip with	any other				7.7
	officer, director, trustee, or key employee?			-	2	-	<u>X</u>
3	Did the organization delegate control over management duties customarily performed by or under the	ne direc	t supervision	ļ			7.7
_	of officers, directors, or trustees, or key employees to a management company or other person?	000		-	3		<u>X</u>
4	Did the organization make any significant changes to its governing documents since the prior Form		is filed?	}	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's as	sets?		-	5		X
6	Did the organization have members or stockholders?			-	6		
7a	Did the organization have members, stockholders, or other persons who had the power to elect or a	ippoint	one or		,		х
	more members of the governing body?	ata akh	aldera er	ł	7a		
D	Are any governance decisions of the organization reserved to (or subject to approval by) members, persons other than the governing body?	Stockn	olders, or		7b		Х
_	Did the organization contemporaneously document the meetings held or written actions undertaken during the year.	or by th	o following:	-	70		
8	The governing body?	ai by ii	e following.		8a	x	
a	Each committee with authority to act on behalf of the governing body?			İ	8b		X
b	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be re-	ached :	at the	ŀ	OD		
9	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	acrieu	at tile		9		_X_
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal F	Revenu	e Code)				
	tion D. Follolos (This Section B requests information about policies not required by the internal	ic verial	c code /			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?			ſ	10a	100	X
	If "Yes," did the organization have written policies and procedures governing the activities of such of	hapter	s. affiliates.	ŀ	iou		
_	and branches to ensure their operations are consistent with the organization's exempt purposes?		-, -		10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing boo	dv befo	re filing the for	m?	11a	Х	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	.,					
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13				12a	Х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give ris	e to cor	iflicts?	Ī	12b	X	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "			İ			
_	ın Schedule O how this was done	·			12c	Х	
13	Did the organization have a written whistleblower policy?			Ī	13	X	
14	Did the organization have a written document retention and destruction policy?			Í	14	X	
15	Did the process for determining compensation of the following persons include a review and approx	al by II	ndependent	İ			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision		•				
а	The organization's CEO, Executive Director, or top management official				15a	Х	
b	Other officers or key employees of the organization				15b	Х	
	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 arrange	ement v	vith a				
	taxable entity during the year?				16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evalu	ate its i	participation				
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organic	anızatıc	n's	1			
	exempt status with respect to such arrangements?				16b		<u> </u>
Sec	tion C. Disclosure						
17	List the states with which a copy of this Form 990 is required to be filed ►MA, NY						
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990	T (Sec	tion 501(c)(3)s	only) a	vailab	le	
	for public inspection. Indicate how you made these available. Check all that apply						
	Own website X Another's website X Upon request Other (explain						
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, or	conflict	of interest pole	cy, and	d finar	ncial	
	statements available to the public during the tax year						
20	State the name, physical address, and telephone number of the person who possesses the books			janizat	ion 🕨	-	
	DOUGLAS BORCHARD, MANAGING DIRECTOR AND COO - 617	_	2-8800		-		
	200 CLARENDON STREET. 9TH FLOOR, BOSTON, MA 0211	6					

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

Check if Schedule O contains a response to any question in this Part VII

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

- 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, if any 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.

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.

- 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 neither the organization ne	or any related	orga	ınıza	tion	100	mper	nsat	ed any current officer, c	lirector, or trustee.	
(A)	(B)			(C	C)			(D)	(E)	(F)
Name and Title	Average	(do	not c	Pos	itior more	than	one	Reportable	Reportable	Estimated
	hours per	box	unle	ss pe	rson	is bot	h an	compensation	compensation	amount of
	week	_	cer an	dad	recto	or/trus	tee)	from	from related	other
	(list any	recto						the	organizations	compensation
	hours for	0 or d	83			sated		organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization
	related organizations	nstee	trust		8	ubeu		(VV-2/1099-WIGC)		and related
	below	lual tr	топа		흫	ye st	_			organizations
	line)	Individual trustee or director	institutional trustee	Officer	Key employee	Highest compensated employee	Former			- · G - · · · · · · · · · · · · · · · · · ·
(1) GREG AVIS	1.00	_		_	_	1	=			-
DIRECTOR		x				1		0.	0.	0.
(2) JOSH BEKENSTEIN	1.00									
CHAIRMAN		x		х				0.	0.	0.
(3) ED COHEN	1.00									
DIRECTOR		х		ļ				0.	0.	0.
(4) PAUL EDGERLEY	1.00									1
DIRECTOR		х						0.	0.	0.
(5) PAUL GROGAN	1.00									
DIRECTOR		X				1		0.	0.	0.
(6) STEVE JENNINGS	1.00									
DIRECTOR		x						0.	0.	0.
(7) VANESSA KIRSCH	45.00									
DIRECTOR MANAGING DIRECTOR AND FOUN		X		X				376,491.	0.	85,381.
(8) DR. MICHAEL LOMAX	1.00					ł	1			
DIRECTOR		X						0.	0.	0.
(9) BILL MCCLEMENTS	1.00									
CLERK		X					L_	0.	0.	0.
(10) DUNCAN MCFARLAND	1.00									
DIRECTOR		X					L	0.	0.	0.
(11) MARK NUNNELLY	1.00									
DIRECTOR		X			L	_		0.	0.	0.
(12) JIM PALLOTTA	1.00]		l	1					_
DIRECTOR	<u> </u>	X			<u> </u>		ļ	0.	0.	0.
(13) ELIZABETH RILEY	1.00									
DIRECTOR		X	<u> </u>	<u> </u>			<u> </u>	0.	0.	0.
(14) LAURENE SPERLING	1.00				1					
DIRECTOR		X			<u> </u>			0.	0.	0.
(15) JEFFREY C. WALKER	1.00]								
DIRECTOR	ļ	X			ļ	1_	\perp	0.	0.	0.
(16) TRIPP JONES	45.00	1								
MANAGING DIRECTOR	ļ	1_	<u> </u>	X	1_	\perp	\perp	342,787.	0.	61,938.
(17) DOUGLAS BORCHARD	45.00	1							_	
MANAGING DIRECTOR COO	<u> </u>		<u> </u>	X	1			224,628.	0.	
232007 12-10-12										Form 990 (2012)

Form 990 (2012) NEW PROF									04-3396	<u> 766</u>	Pa	ige 8
Part VII Section A. Officers, Directors, Trus		ploy	ees			ghe	st C				(F)	
(A)	(B)			(C Pos				(D)	(E)	_	(F)	
Name and title	Average hours per		not c	heck	more	than		Reportable	Reportable		timate rount d	
	week					ıs bot or/trus		compensation from	compensation from related		other	וכ
	(list any	草						the	organizations		pensa	tion
	hours for	gre				ㅁ		organization	(W-2/1099-MISC)	fr	om the	•
	related	tee o	ustee			ensa		(W-2/1099-MISC)		orga	anızatı	on
	organizations	al trus	nal tr		loyee	m o a					d relate	
	below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			orga	inizatio	ons
(18) DEBORAH SMOLOVER	45.00								:			
EXEC. DIRECTOR OF AMERICA FORWARD		<u> </u>			X	<u> </u>		293,098.	0.		5,7	<u>55.</u>
(19) LISA JACKSON	45.00				ľ							
MANAGING PARTNER, PORTFOLIO INVESTIN					X			200,231.	0.		<u>3,7</u>	<u>45</u> .
(20) ELIZABETH RIKER	45.00											
PARTNER						X		210,294.	0.		7,2	<u> 15.</u>
(21) KIMBERLY SYMAN	45.00								_			
MANAGING PARTNER, ACTION TANK		<u> </u>	ļ		<u> </u>	X		194,498.	0.		9,0	<u>75 ،</u>
(22) SHRUTI SEHRA	45.00											
PARTNER	4 - 4 -	_	<u> </u>		<u> </u>	X		173,766.	0.		8,5	86.
(23) JEFFREY BERNDT	45.00	-				l						
MANAGING PARTNER, DEVELOPMENT			_	<u> </u>		X	ļ	200,231.	0.		4,4	43.
(24) DIANA SMITH	45.00	_						055 004				^ ^
CHIEF EXECUTIVE PARTNER						X		255,281.	0.		4,8	80.
	<u></u>					Ļ		0 451 205		2.5		4.0
1b Sub-total								2,471,305.	0.	<u> 45</u>	0,1	
c Total from continuation sheets to Part V	II, Section A							0.	0.	2.5	0,1	0.
d Total (add lines 1b and 1c)						_		2,471,305.		45	U, I	48
2 Total number of individuals (including but r compensation from the organization ▶	not limited to tr	nose	IIST	ed a	bov	e) w	no re	eceived more than \$100	J,000 of reportable			16
											Yes	No
3 Did the organization list any former officer,			e, ke	ey er	mplo	oyee	, or	highest compensated e	mployee on			
line 1a? If "Yes," complete Schedule J for s										3_		<u> X</u>
4 For any individual listed on line 1a, is the su	•		-					•	the organization		,	
and related organizations greater than \$15										4	Х	
5 Did any person listed on line 1a receive or a	accrue compe	nsat	tion '	trom	an	y un	relat	ed organization or indiv	idual for services			

rendered to the organization? If "Yes," complete Schedule J for such person
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. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
RESEARCH FOR ACTION, 100 SOUTH BROAD		
STREET, SUITE 700, PHILADELPHIA, PA 19110	EVALUATION	<u>210,871.</u>
THE POTTER GROUP		
5019 RENO ROAD, NW, WASHINGTON, DC 20008	EVALUATION	189,320.
SAGAWA/JOSPIN, LLC		
3000 GREENVALE ROAD, CHEVY CHASE, MD 20815	POLICY CONSULTING	141,152.
BLUE ENGINE MESSAGE & MEDIA, LLC, 1750 K	COMMUNICATIONS/POLIC	
STREET COMMON, NW SUITE 450, WASHINGTON,	Y CONSULTING	137,327.
RUSSELL REYNOLDS ASSOCIATES, CHURCH STREET		
STATION, P.O. BOX 6427, NEW YORK, NY	RECRUITING	101,372.
2 Total number of independent contractors (including but not limited to those liste	d above) who received more than	
\$100,000 of compensation from the organization > 5		<u></u>

Statement of Revenue

Check if Schedule O contains a response to any question in this Part VIII (D) Revenue excluded from tax under sections 512, 513, or 514 (C) Unrelated (B) Related or Total revenue exempt function business revenue revenue Contributions, Gifts, Grants and Other Similar Amounts 1 a Federated campaigns 1a **b** Membership dues 1b Fundraising events 1c С d Related organizations 1d e Government grants (contributions) 1e 5,525,259 f All other contributions, gifts, grants, and similar amounts not included above 1f 11,269,777 g Noncash contributions included in lines 1a-1f \$ h Total. Add lines 1a-1f 16,795,036 **Business Code** Program Service Revenue 2 a f All other program service revenue g Total. Add lines 2a-2f Investment income (including dividends, interest, and 6,320. other similar amounts) 6,320. Income from investment of tax-exempt bond proceeds Royalties 5 (i) Real (II) Personal 6 a Gross rents b Less. rental expenses c Rental income or (loss) d Net rental income or (loss) 7 a Gross amount from sales of (i) Securities (II) Other assets other than inventory b Less: cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) 8 a Gross income from fundraising events (not Other Revenue including \$ contributions reported on line 1c) See Part IV, line 18 b Less: direct expenses c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 а b Less. direct expenses b c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances а b Less. cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue **Business Code** 11 a MISCELLANEOUS 900099 20,950 20,950 d All other revenue e Total. Add lines 11a-11d 20,950 Total revenue. See instructions. 16,822,306 20,950, 6.320 Form 990 (2012)

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). Check if Schedule O contains a response to any question in this Part IX (C) Management and general expenses (D) Fundraising (A) Total expenses Do not include amounts reported on lines 6b. Program service 7b. 8b. 9b. and 10b of Part VIII. expenses expenses See Schedule I, part IV Grants and other assistance to governments and 14,335,466 14,335,466. organizations in the United States, See Part IV, line 21 Grants and other assistance to individuals in -the United States. See Part IV, line 22 Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, 131,426. 928,360 376,080. 1,435,866. trustees, and key employees Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 765,053. 1,245,951. 4,595,506. 2,584,502. Other salaries and wages Pension plan accruals and contributions (include 41,967. 19,907. 10,946. section 401(k) and 403(b) employer contributions) 72,820. 95,990. 55,836. 373,904. 222,078. Other employee benefits 9 401,982 232,820. 107,903. 61,259. 10 Payroll taxes 11 Fees for services (non-employees): 194,694. 1,528,141. 1,180,166. 153,281 a Management Legal 114,535. 12,430. 102,105. Accounting 12,525. 12,525. Lobbying Professional fundraising services. See Part IV, line 17 Investment management fees Other (If line 11g amount exceeds 10% of line 25, 40,882. 533. 40,349. column (A) amount, list line 11g expenses on Sch O.) Advertising and promotion 12 86,544. 230,976. 121,135. 23,297. 13 Office expenses Information technology 14 15 Royalties 22,981. 53,501. 177,421 100,939. 16 Occupancy 74,551. 360,199. 242,024 43,624. 17 Travel 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 26,173. 384,936. 306,603 52,160. Conferences, conventions, and meetings 19 20 Interest Payments to affiliates 21 10,366. 80,030. 45,531 24,133 22 Depreciation, depletion, and amortization 5,797. 23. 5,963. 143. 23 Other expenses. Itemize expenses not covered 24 above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) MISCELLANEOUS 33,782. 8,467. 22,643. 2,672. e All other expenses 2,429,968. 24,184,934. 20,375,689. 1,379,277. Total functional expenses. Add lines 1 through 24e Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined

educational campaign and fundraising solicitation.

Check here fif following SOP 98-2 (ASC 958-720)

) (2012) NEW PROFIT INC.	- 	04-	3396766 Page 1
art X	Check if Schedule O contains a response to any question in this Part X			
	Oneck is deficultie of contains a response to any question in this Part X	(A)		(B)
		Beginning of year		End of year
1	Cash - non-interest-bearing	1,029,720.	1	3,649,432
2	Savings and temporary cash investments	7,182,884.	2	7,256,991
3	F	26,968,294.	3	17,973,141
4	Γ		4	
5	Loans and other receivables from current and former officers, directors,			
	trustees, key employees, and highest compensated employees. Complete			
	Part II of Schedule L	50,460.	5	
6	Loans and other receivables from other disqualified persons (as defined under			
	section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			
	employers and sponsoring organizations of section 501(c)(9) voluntary			
	employees' beneficiary organizations (see instr). Complete Part II of Sch L		6	
7	Notes and loans receivable, net		7	
8	Inventories for sale or use		8	
9	Prepaid expenses and deferred charges	139,652.	9	140,433
10	a Land, buildings, and equipment: cost or other			
	basis Complete Part VI of Schedule D 10a 245,075.			
1	b Less. accumulated depreciation 10b 116,768.	<u> 183,693.</u>	10c	<u> 128,30</u> °
11	Investments - publicly traded securities		11	
12	Investments - other securities See Part IV, line 11		12	
13	Investments - program-related See Part IV, line 11		13	
14			14	
15	, , , , , , , , , , , , , , , , , , ,		15	
16		35,554,703.	16	29,148,304
17	• • • • • • • • • • • • • • • • • • • •	756,866.	17	686,730
18	· •	1,312,106.	18	<u>2,398,860</u>
19	F		19	
20	·		20	
21 22	· · ·		21	
22	, , , , , , , , , , , , , , , , , , , ,			
	key employees, highest compensated employees, and disqualified persons			
	Complete Part II of Schedule L		22	
23	, , , , , , , , , , , , , , , , , , , ,		23	
24	' ,		24	
25	, ,			
	parties, and other liabilities not included on lines 17-24). Complete Part X of	20 000		
00	Schedule D	20,000. 2,088,972.	25 26	3,085,590
26	Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117 (ASC 958), check here ▶ X and	2,000,312.	26	3,063,330
	complete lines 27 through 29, and lines 33 and 34.			
27		7,332,596.	27	6,738,527
28		26,133,135.	28	19,324,187
29	_ ` '	20,133,133.	29	
27 28 29 30 31 32	Organizations that do not follow SFAS 117 (ASC 958), check here			
	and complete lines 30 through 34.			
30			30	
31			31	
32			32	
33	_	33,465,731.	33	26,062,714
34	<u> </u>	35,554,703.	34	29,148,304

	990 (2012) NEW PROFIT INC.	04-	3396	766	Pa	ge 12
Pa	rt XI Reconciliation of Net Assets					
	Check if Schedule O contains a response to any question in this Part XI					X
		1				
1	Total revenue (must equal Part VIII, column (A), line 12)	1		,82		
2	Total expenses (must equal Part IX, column (A), line 25)	2		,18		
3	Revenue less expenses Subtract line 2 from line 1	3				<u>28.</u> >
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	<u>33</u>	,46	5,7	<u>31.</u>
5	Net unrealized gains (losses) on investments	5				
6	Donated services and use of facilities	6				
7	Investment expenses	7				
8	Prior period adjustments	8		<u>67</u>	4,6	24.
9	Other changes in net assets or fund balances (explain in Schedule O)	9		<71	<u>5,0</u>	<u>13.</u> >
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,					
_	column (B))	10	26	,06	2,7	<u> 14.</u>
Pa	rt XII Financial Statements and Reporting					
	Check if Schedule O contains a response to any question in this Part XII					
				\leftarrow	Yes	No
1	Accounting method used to prepare the Form 990 Cash X Accrual Other					
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	0				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			_2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a]
	separate basis, consolidated basis, or both.					
	Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?			_2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis,	1			
	consolidated basis, or both.					
	X Separate basis Consolidated basis Both consolidated and separate basis					
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audıt,				
	review, or compilation of its financial statements and selection of an independent accountant?			2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in Scho	edule O				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sii	ngle Au	dıt			1
	Act and OMB Circular A-133?			3a	X	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requi	red aud	dit			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits			3b	X	

Form **990** (2012)

SCHEDULE A

Department of the Treasury

(Form 990 or 990-EZ)

Public Charity Status and Public Support

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

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

OMB No. 1545-0047

Open to Public Inspection

Internal Revenue Service Name of the organization **Employer identification number** NEW PROFIT INC. 04-3396766 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). 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 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) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). X 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) 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) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 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 - Non-functionally integrated By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disgualified 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) If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III f supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? g A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, Yes the governing body of the supported organization? 11g(i) (ii) A family member of a person described in (i) above? 11g(ii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? 11g(iii) Provide the following information about the supported organization(s). h (vi) Is the (iv) Is the organization (v) Did you notify the (i) Name of supported (ii) EIN (iii) Type of organization (vii) Amount of monetary organization in col. (described on lines 1-9 in col. (i) listed in your organization in col. (i) organized in the organization support governing document? (i) of your support? above or IRC section (see instructions)) Yes Yes

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

Schedule A (Form 990 or 990-EZ) 2012

Schedule A (Form 990 or 990 EZ) 2012 NEW PROFIT INC. O4-3396766 Page 2 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 or if the organization failed to qualify under Part III If the organization fails to qualify under the tests listed below, please complete Part III)

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) ►	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions, and	-	·				
	membership fees received. (Do not						
	include any "unusual grants ")	39,142,827.	22,476,216.	10,709,283.	8,674,162.	16,795,036.	97,797,524.
2	Tax revenues levied for the organ-						
	ization'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	39,142,827.	22,476,216.	10,709,283,	8,674,162.	16,795,036.	97,797,524.
5	The portion of total contributions	05,222,027,			0,072,202.		
_	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,		i				
	column (f)						26,295,913.
6	Public support. Subtract line 5 from line 4						71,501,611,
	ction B. Total Support						71,501,011.
	ndar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
	Amounts from line 4	39,142,827.	22,476,216.	10,709,283.	8,674,162.	16,795,036.	97,797,524.
8	Gross income from interest,	05,112,027.	22,110,220.		0,0,1,100.	20,720,000.	37,737,022.
•	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources	25,508.	3,478.	219.	207.	6,320.	35,732.
9	Net income from unrelated business	23,3001	3,1,0,			0,3201	3077321
Ŭ	activities, whether or not the						
	business is regularly carried on						
10	Other income Do not include gain						
10	or loss from the sale of capital						
	assets (Explain in Part IV)		13,994.	37,905.	61,043.	20,950.	133,892.
11	Total support. Add lines 7 through 10		40,00 4 0	37,303.	01,043.	20,550	97,967,148.
	Gross receipts from related activities,	etc (see instruction	ne)			12	37,307,140.
	First five years. If the Form 990 is for	•	•	d fourth or fifth ta	v vear as a section		
10	organization, check this box and stor	-	mst, second, tim	a, louitil, or marta	A year as a section	1301(0)(0)	
Sec	ction C. Computation of Publ	ic Support Pe	rcentage				
	Public support percentage for 2012 (column (fl)		14	72.99 %
	Public support percentage from 2011		•	(7)		15	69.86 %
	33 1/3% support test - 2012. If the o			n line 13. and line 1	14 is 33 1/3% or m		
	stop here. The organization qualifies	•		·		,	▶ X
b	33 1/3% support test - 2011. If the o		-		line 15 is 33 1/3%	or more, check th	
	and stop here. The organization qual						▶ □
17a	10% -facts-and-circumstances tes	•	· · · · · ·		13 16a or 16b a	and line 14 is 10%	or more
	and if the organization meets the "fac	-					
	meets the "facts-and-circumstances"			•	· ·	non allo organ	N
Ŀ	10% -facts-and-circumstances tes		· ·		-	17a and line 15 is	10% or
L	more, and if the organization meets the	-					
	organization meets the "facts-and-circ				•		` . .
10			=	-			
18	Private foundation. If the organization	п ии пот спеск а	DOX OF TIME 13, 16	a, 100, 17a, or 170	, check this box a	nu see instruction	5

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 or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Se	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not				1		
	ınclude any "unusual grants ")						
2	Gross receipts from admissions,						
	merchandise sold or services per-					}	
	formed, or facilities furnished in						
	any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
•	ization's benefit and either paid to						
	or expended on its behalf				}		
5	The value of services or facilities						
3	furnished by a governmental unit to						
	the organization without charge						
	•		<u> </u>				
	Total. Add lines 1 through 5						
7 6	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
	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			<u> </u>			
	Add lines 7a and 7b			<u> </u>			
	Public support (Subtract line 7c from line 6)	<u>l. </u>					
	ction B. Total Support			1	T		
	ndar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
-	Amounts from line 6						
108	gross income from interest, dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources						
t	Unrelated business taxable income		}				
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
•	Add lines 10a and 10b						
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)						
13	Total support. (Add lines 9, 10c, 11, and 12)						
14	First five years. If the Form 990 is fo	r the organization's	s first, second, thir	d, fourth, or fifth t	ax year as a secti	on 501(c)(3) organiz	ation,
	check this box and stop here				•	(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Se	ction C. Computation of Publ	ic Support Pe	rcentage		·		
15	Public support percentage for 2012 (ine 8, column (f) d	ivided by line 13, o	column (f))		15	%
16	Public support percentage from 2011	Schedule A, Part	III, line 15			16	%
Se	ction D. Computation of Inve	stment Incom	e Percentage				
17	Investment income percentage for 20)12 (line 10c, colur	nn (f) divided by lii	ne 13, column (f))		17	%
18	Investment income percentage from			.,,		18	%
198	a 33 1/3% support tests - 2012. If the			on line 14, and line	e 15 is more than		
	more than 33 1/3%, check this box a						
ŀ	33 1/3% support tests - 2011. If the		-	•	• •		and
	line 18 is not more than 33 1/3%, che						.
20	Private foundation. If the organization		-	•		_	

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

OMB No 1545-0047
2012

Department of the Treasury Internal Revenue Service ➤ Complete if the organization is described below. ➤ Attach to Form 990 or Form 990-EZ.

➤ See separate instructions.

Open to Public Inspection

If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part V, 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), or Form 990-EZ, Part V, line 35c (Proxy Tax), then

	Section 501(c)(4), (5), or (6) organiza	tions: Complete Part III			
Nan	ne of organization			Emp	loyer identification number
	NEW PRO	FIT INC.			04-3396766
Pa	art I-A Complete if the org	ganization is exempt und	der section 501(c) or is a section 527 o	rganization.
2	Provide a description of the organize Political expenditures Volunteer hours	zation's direct and indirect politic	cal campaign activities	s in Part IV ▶\$	S
Pa	art I-B Complete if the ord	ganization is exempt und	er section 501(c)(3).	
	Enter the amount of any excise tax			▶ \$	<u> </u>
	Enter the amount of any excise tax	• •			·
3	If the organization incurred a section	on 4955 tax, did it file Form 4720	for this year?		Yes No
48	a Was a correction made?				Yes No
<u>t</u>	If "Yes," describe in Part IV				
Pa	art I-C Complete if the org	ganization is exempt und	der section 501(c), except section 501	(c)(3).
	Enter the amount directly expende		•	•	
2	Enter the amount of the filing organ	nization's funds contributed to of	ther organizations for s	section 527	
_	exempt function activities			▶\$	·
3	Total exempt function expenditures	s Add lines 1 and 2 Enter here a	and on Form 1120-PO	,	
	line 17b			▶\$	
	Did the filing organization file Form	•			└ Yes
Ð	Enter the names, addresses and er made payments For each organization				
	contributions received that were pr				
	political action committee (PAC). If				are dog. ogailos idilia or a
	(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 Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule C (Form 990 or 990-EZ) 2012

Schedule C (Form 990 or 990-EZ) 2012 1	NEW PROFIT	INC.		04-3	396766 Page 2
Part II-A Complete if the org		npt under section	n 501(c)(3) and fil	ed Form 5768	
(election under sec	tion 501(h)).				
Check 🕨 🔲 if the filing organizat	tion belongs to an affil	ated group (and list in	Part IV each affiliated	group member's name	e, address, EIN,
expenses, and share	e of excess lobbying e	expenditures)			
Check 🕨 🔃 if the filing organizat	tion checked box A ar	d "limited control" pro	visions apply.		
Limit	s on Lobbying Exper	nditurae		(a) Filing	(b) Affiliated group
		nts paid or incurred.)		organızatıon's totals	totals
				totals	
1a Total lobbying expenditures to influ	ience public opinion (g	grass roots lobbying)			
b Total lobbying expenditures to influ	ience a legislative boo	ly (direct lobbying)	•	12,525.	
c Total lobbying expenditures (add lii	nes 1a and 1b)			12,525.	
d Other exempt purpose expenditure	es			24,172,408.	
e Total exempt purpose expenditure:	s (add lines 1c and 1d)		24,184,933.	
f Lobbying nontaxable amount. Ente	er the amount from the	following table in both	n columns	1,000,000.	
If the amount on line 1e, column (a) o	r (b) is: The lob	bying nontaxable amo	ount is:		
Not over \$500,000		the amount on line 1e.			
Over \$500,000 but not over \$1,000		0 plus 15% of the exc			
Over \$1,000,000 but not over \$1,5		0 plus 10% of the exc			
Over \$1,500,000 but not over \$17,		0 plus 5% of the exce	ss over \$1,500,000		·
Over \$17,000,000	\$1,000,0	000.			
				250 000	
g Grassroots nontaxable amount (en	,			250,000.	
h Subtract line 1g from line 1a. If zero				0.	<u> </u>
i Subtract line 1f from line 1c. If zero				0.	
j If there is an amount other than ze		line 1i, did the organiza	ation file Form 4/20	Г	¬., ¬.,
reporting section 4911 tax for this					Yes No
(Sama arganiz		eraging Period Under ection 501(h) electior	• •	olete all of the five	
, -		e instructions for line			
		nditures During 4-Yea		-ge,	
	Lobbying Exper	iditares burnig 4 rea	a Averaging I criod		
Calendar year	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) Total
(or fiscal year beginning in)	(4)	(2, 23.2	(4) ==	(4)	(5)
2a Lobbying nontaxable amount	750 022.	1,000,000.	1 000 000.	1.000.000.	3,750,022.
b Lobbying ceiling amount	750,022.	1,000,000.	1,000,000.	1,000,000.	3773070220
(150% of line 2a, column(e))					5,625,033.
(120,000,000,000,000,000,000,000,000,000,	=				3/023/0331
c Total lobbying expenditures	141,820.	176,769.	161,854.	12,525.	492,968.
t ista ista jii.g onponditoro					
d Grassroots nontaxable amount	187,506.	250,000.	250,000.	250,000.	937,506.
e Grassroots ceiling amount	. ,				
(150% of line 2d, column (e))					1,406,259.
f Grassroots lobbying expenditures	23,979.				23,979.

Schedule C (Form 990 or 990-EZ) 2012

Schedule C (Form 990 or 990-EZ) 2012 NEW PROFIT INC. 04-3396766 Page 3 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)).

During the year, did the filing organization attempt to influence foreign, national, state or			(t	
	Yes	No	Amo	ount
				-
local legislation, including any attempt to influence public opinion on a legislative matter				
or referendum, through the use of				
a Volunteers?	1			
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
c Media advertisements?				
d Mailings to members, legislators, or the public?				
e Publications, or published or broadcast statements?				
f Grants to other organizations for lobbying purposes?				
g Direct contact with legislators, their staffs, government officials, or a legislative body?				
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
i Other activities?				
j Total. Add lines 1c through 1i				
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
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)(6).	on 501(c)	(5), or s	ection	
			Yes	No
		1		
1 Were substantially all (90% or more) dues received nondeductible by members?				
 Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? 		2		
 Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year? Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered 		2 3 (5), or so		ne 3, is
 Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year? Part III-B Complete if the organization is exempt under section 501(c)(4), section 		2 3 (5), or so		ne 3, is
 Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year? Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." 	"No," O	2 3 (5), or so R (b) Par		ne 3, is
 Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year? Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." Dues, assessments and similar amounts from members 	"No," O	2 3 (5), or so R (b) Par		ne 3, is
 Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year? Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenditures) 	"No," O	2 3 (5), or so R (b) Par		ne 3, is
 Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year? Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). 	"No," O	2 3 (5), or so R (b) Par		ne 3, is
 Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year? Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year 	"No," O	2 3 (5), or so R (b) Par		ne 3, is
 Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year? Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year Carryover from last year 	"No," O	2 3 (5), or so R (b) Par 1 2a 2b		ne 3, is
 Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year? Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total 	"No," O	2 3 (5), or so R (b) Par 1 2a 2b 2c		ne 3, is
 Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year? Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." Dues, assessments and similar amounts from members 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 b Carryover from last year c Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 	"No," Of	2 3 (5), or so R (b) Par 1 2a 2b 2c		ne 3, is
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 3 Did the organization agree to carry over lobbying and political expenditures from the prior year? Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." 1 Dues, assessments and similar amounts from members 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 b Carryover from last year c Total 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceeds the amount on line 3, what portion of the exceeds the amount on line 3.	"No," Of	2 3 (5), or so R (b) Par 1 2a 2b 2c		ne 3, is
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 3 Did the organization agree to carry over lobbying and political expenditures from the prior year? Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." 1 Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceeds the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditures of nondeductible lobbying and political expenditures of nondeductible lobbying and political expenditures of nondeductible lobbying and political expenditures of nondeductible lobbying and political expenditures of nondeductible lobbying and political expenditures of nondeductible lobbying and political expenditures of nondeductible lobbying and political expenditures of nondeductible lobbying and political expenditures of nondeductible lobbying and political expenditures of nondeductible lobbying and political expenditures of nondeductible lobbying and political expenditures of nondeductible lobbying and political expenditures of nondeductible lobbying and political expenditures of nondeductible lobbying and political expenditures of nondeductible lobbying and political expenditures of nondeductible lobbying and political expenditures of nondeductible lobbying and political expenditures of nondeductible lobbying and political expenditures of nondeductible lobbying and political expension in the prior year.	"No," Of	2 3 (5), or so R (b) Par 1 2a 2b 2c 3		ne 3, is

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, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ➤ Attach to Form 990. ➤ See separate instructions.

OMB No 1545-0047 Open to Public Inspection

Name of the organization

NEW PROFIT INC

Employer identification number 04-3396766

Pai	rt I Organizations Maintaining Donor Advise	d Funds or Ot	her Similar Fund	s or Accounts. Complete if the
<u> </u>	organization answered "Yes" to Form 990, Part IV, line		noi Onimai i ana	o i Aooodi Roi Oompiete ii trie
	Organization answered Tes to Form 550, Fart TV, line		dvised funds	(b) Funds and other accounts
4	Total number at and of year	(4) 501101 4	37.004 14.140	(b) i diles dile sille accession
1	Total number at end of year			
2	Aggregate contributions to (during year)	<u> </u>		
3	Aggregate grants from (during year)			
4	Aggregate value at end of year			
5	Did the organization inform all donors and donor advisors in	-		
_	are the organization's property, subject to the organization's	J		Yes L_J No
6	Did the organization inform all grantees, donors, and donor a	_	_	· · · · · · · · · · · · · · · · · · ·
	for charitable purposes and not for the benefit of the donor of	or donor advisor, or	for any other purpose	
Pai	rt II Conservation Easements. Complete if the org	repression ensurers	d "Vas" to Form 000 I	Yes No
1	Purpose(s) of conservation easements held by the organizati			rait IV, iiile 7.
•	Preservation of land for public use (e.g., recreation or e	` —	í ' <i> '</i>	otorically important land area
	Protection of natural habitat	ducation)	l .	storically important land area tified historic structure
	Preservation of open space	L	rieservation of a cer	tilled filstoric structure
2	Complete lines 2a through 2d if the organization held a qualif	fied concentation o	antribution in the form	of a consequence consequent on the last
_	day of the tax year	neu conservation c	ontribution in the form	of a conservation easement on the last
	day of the tax year			Held at the End of the Tax Year
а	Total number of conservation easements			2a
b	Total acreage restricted by conservation easements			2b
c	Number of conservation easements on a certified historic str	ructure included in	(a)	2c
d	Number of conservation easements included in (c) acquired a		• •	
u	listed in the National Register	anci oi irroo, and i	iot on a mistoric struct	2d
3	Number of conservation easements modified, transferred, rel	leased, extinguishe	ed, or terminated by th	
_	year >	.ouovu, onga.c	, o. to	o organization during the tax
4	Number of states where property subject to conservation ea	sement is located	•	
5	Does the organization have a written policy regarding the per			
	violations, and enforcement of the conservation easements in		,,,	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,	and enforcing con	servation easements o	during the year
7	Amount of expenses incurred in monitoring, inspecting, and	enforcing conserva	ition easements during	g the year ▶ \$
8	Does each conservation easement reported on line 2(d) above			
	and section 170(h)(4)(B)(ii)?			Yes No
9	In Part XIII, describe how the organization reports conservati	on easements in its	s revenue and expens	e statement, and balance sheet, and
	include, if applicable, the text of the footnote to the organizar	tion's financial stat	ements that describes	the organization's accounting for
	conservation easements.			
Pa	rt III Organizations Maintaining Collections o	f Art, Historica	l Treasures, or C	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 (AS	SC 958), not to repo	ort in its revenue state	ment and balance sheet works of art,
	historical treasures, or other similar assets held for public ext	hibition, education,	or research in further	ance of public service, provide, in Part XIII,
	the text of the footnote to its financial statements that descri	ibes these items.		
b	If the organization elected, as permitted under SFAS 116 (AS	SC 958), to report II	n its revenue statemer	nt and balance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, ea	ducation, or resear	ch in furtherance of pi	ublic 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 tre	asures, or other sir	nılar assets for financı	
	the following amounts required to be reported under SFAS 1	16 (ASC 958) relat	ng to these items	
а	Revenues included in Form 990, Part VIII, line 1			\$
b	Assets included in Form 990, Part X			> \$

	dule D (Form 990) 2012 NEW PRO † III Organizations Maintaining C		d Histor	dool Tuo		O4b			<u>96766</u>	
3	Using the organization's acquisition, accessi	on, and other record	is, check ar	ny of the fo	ollowing that	t are a sigi	nificant i	ise of its	collection	items
	(check all that apply)		. 🗀.							
a	Public exhibition	C			ange progra	ms				
b	Scholarly research	e	e L Oth	ner						
C	Preservation for future generations							_		
4	Provide a description of the organization's co				-			se in Par	t XIII.	
5	During the year, did the organization solicit o					er sımılar a	ssets		٦	
Par	t iV Escrow and Custodial Arran								<u> Yes</u>	No_
Lai	t IV Escrow and Custodial Arran reported an amount on Form 990, Par		ete if the or	ganization	answered "	Yes" to Fo	orm 990,	Part IV, I	ine 9, or	
			d					-		
ıa	Is the organization an agent, trustee, custod on Form 990, Part X?	an or other intermed	lary for cor	ntributions	or other as	sets not in	ciuaea		٦,,	
h	, , , , , , , , , , , , , , , , , , ,	and complete the fa	llouwen tob	lo.				L	Yes	∐_ No
D	If "Yes," explain the arrangement in Part XIII	and complete the fo	niowing tab	ie.					A	
_	Beginning balance								Amount	
	Additions during the year						1c			
	Distributions during the year						1d		 -	
f	Ending balance						1e			
) 2a	Did the organization include an amount on Fi	orm 990 Part Y line	212				[1f]	·	Yes	☐ No
	If "Yes," explain the arrangement in Part XIII			hae haan n	rovided in F	Part YIII			_ ies	
Par										<u> </u>
		(a) Current year	(b) Prior	- T-	(c) Two year		N Three v	ears back	(e) Four y	pare hack
1a	Beginning of year balance	(a) content year	(6) 1 1101	i you	(C) TWO your	3 Daok (C	<u>j</u> mice y	cars back	(e) i oui y	cars back
b	Contributions									
c	Net investment earnings, gains, and losses			-			,			
q	Grants or scholarships				 -					
e	Other expenditures for facilities									
Ū	and programs									
f	Administrative expenses					<u> </u>				
g	End of year balance		-							
2	Provide the estimated percentage of the curr	rent vear end balance	ce (line 1a. d	column (a))	held as.		-			
а	Board designated or quasi-endowment	, ,	%							
b	Permanent endowment	%								
С	Temporarily restricted endowment ▶	 %								
	The percentages in lines 2a, 2b, and 2c shou	ıld equal 100%								
За	Are there endowment funds not in the posse	•	ation that a	are held and	d administe	red for the	organiz	ation		
	by	·					Ū		Y	es No
	(i) unrelated organizations								3a(i)	
	(ii) related organizations								3a(ii)	
b	If "Yes" to 3a(ii), are the related organizations	s listed as required o	on Schedule	e R?					3b	
4	Describe in Part XIII the intended uses of the									•
Pai	t VI Land, Buildings, and Equipm	ent. See Form 990), Part X, lin	ne 10						
	Description of property	(a) Cost or o	I .	(b) Cost of basis (o			umulate eciation	d	(d) Book	value
1a	Land					<u></u> ;				
	Buildings		<u> </u>						-	
	Leasehold improvements			135	,616.	(67,80	08.	67	,808.
	Equipment				,459.		48,90			,499.
	Other									<u> </u>
Tota	. Add lines 1a through 1e (Column (d) must e	qual Form 990, Part	X, column	(B), line 10	(c).)			>	128	,307.

(3) (4)(5) (6) (7) (8) (9) (10)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) Book value
(1)	Federal income taxes	
(2)		
(3)		
(4)		
(5)		
(6)		
(7)_		
(8)		
(9)		
(10)		
(11)		
Total.	Column (b) must equal Form 990, Part X, col. (B) line 25)	

2. FIN 48 (ASC 740) Footnote In Part XIII, 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 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

• • •	, .	0.4	222555	
	edule D (Form 990) 2012 NEW PROFIT INC. rt XI Reconciliation of Revenue per Audited Financial Statements With R	04-	<u>3396766</u>	Page 4
				000
1	Total revenue, gains, and other support per audited financial statements	1	19,355,	883.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12			
	<u> </u>			
b		2,533,577.		
C	Recoveries of prior year grants 2c	· · · · · · · · · · · · · · · · · · ·		
d			0 533	E 7 7
_		2e	2,533,	3//·
3	Subtract line 2e from line 1	3	16,822,	306.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1			
a				
b	Other (Describe in Part XIII)			_
С _	Add lines 4a and 4b	4c	1.6 000	0.
Dar	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) rt XII Reconciliation of Expenses per Audited Financial Statements With I	Evnances per Betu	16,822,	306.
				<u> </u>
1	Total expenses and losses per audited financial statements	1	27,433,	524.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25			
a		2,533,577.		
b	Prior year adjustments 2b	715 012		
С.	Other losses 2c	715,013.		
đ	Other (Describe in Part XIII)		2 240	F 0 0
_		2e	3,248,	
3	Subtract line 2e from line 1	3	24,184,	934.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1			
a				
b	12			•
	Add lines 4a and 4b	4c	04 104	0.
Dar	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18) rt XIII Supplemental Information	5	24,184,	934.
	1 • •			
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and		2b; Part V, line 4	, Part
	ie 2, Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any a		TRIBENIA.	
PAF	RT X, LINE 2: THE ORGANIZATION FOLLOWS THE STANDA	RDS FOR ACCO	ONTING	
FOF	R UNCERTAINTY IN INCOME TAXES, WHICH REQUIRE THE	ORGANIZATION	TO REPO	RT
ANY	Y UNCERTAIN TAX POSITIONS AND TO ADJUST ITS FINAN	ICIAL STATEME	NTS FOR	THE
IME	PACT THEREOF. AS OF DECEMBER 31, 2012, THE ORGAN	IIZATION DETE	RMINED T	HAT_
<u>IT</u>	HAD NO TAX POSITIONS THAT DID NOT MEET THE "MORE	LIKELY THAN	NOT"	
THE	RESHOLD OF BEING SUSTAINED BY THE APPLICABLE TAX	AUTHORITY.	THE	
ORG	GANIZATION FILES INFORMATION RETURNS IN THE UNITE	D STATES (FE	DERAL) A	ND

THE NEW YORK AND MASSACHUSETTS (STATE) JURISDICTIONS. THESE RETURNS ARE

Schedule D (Form 990) 2012

Schedule D (Form 990) 2012 NEW PROFIT INC. Part XIII Supplemental Information (continued)	04-3396766 Page 5
Part XIII Supplemental Information (continued)	
GENERALLY SUBJECT TO EXAMINATION BY TAX AUTHORITIES FOR THE	LAST THREE
YEARS.	
	
	

SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

Open to Public Inspection

OMB No 1545-0047

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. Governments, and Individuals in the United States

Grants and Other Assistance to Organizations,

▶ Attach to Form 990.

Name of the organization	CIVI						Employer identification number
Part General Information on Grants and Assistance	nd Assistance						000000
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	to substantiate the	e amount of the grants	or assistance, the	grantees' eligibility	for the grants or ass	istance, and the select	
criteria used to award the grants or assistance?	stance?						X Yes No
2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States	cedures for moni	toring the use of grant	funds in the United	d 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	Governments and	d Organizations in the	e United States. C	complete if the orga	anization answered "Y	res" to Form 990, Part	IV, line 21, for any
1 (a) Name and address of organization (b) EIN (c) IRC section (d) Amount of (e) or government cash grant	(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
ACELERO LEARNING 63 WEST 125TH STREET, 6TH FLOOR NEW YORK, NY 10027	30-0077025	CORPORATION	250,000,	*0			PROGRAM EXPANSION
	65-1203744	501(C)3	200 000	0			PROGRAM EXPANSION
COLLEGE POSSIBLE 450 NORTH SYNDICATE STREET, SUITE 3 ST. PAUL, MN 55104	41-1968798	501(C)3	250,000,	*0			PROGRAM EXPANSION
AVANCE INC. 118 NORTH MEDINA, SUITE 380 SAN ANTONIO TX 78207	91-2074499	501(c)3	250,000,	0			PROGRAM EXPANSION
1 8 8 8	20-8742553	501(c)3	265,000,	0			PROGRAM EXPANSION
COLLEGE SUMMIT, INC. 1763 COLUMBIA ROAD, NW 2ND FLOOR WASHINGTON DC 20009	52-2007028	501(c)3	724,535,	0			PROGRAM EXPANSION
2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 3 Enter total number of other organizations listed in the line 1 table	nd government or	rganizations listed in the 1 table	ne line 1 table				27.
۱,	, see the Instruct	ions for Form 990.	#m	ŧ			Schedule I (Form 990) (2012)

232101 12-18-12

Schedule I (Form 990) NEW PROFIT INC.	T INC.			:		0	04-3396766 Page 1	. ·
Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II)	Assistance to Go	vernments and Organ	izations in the Ur	nited States (Sche	dule I (Form 990), Par	(=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	<i>.</i>
FAMILY INDEPENDENCE INITIATIVE 5539 DEER RUN DRIVE EL SOBRANTE, CA 94803	65-1187733	501(C)3	250,000,	0			PROGRAM EXPANSION	
FIRST PLACE FOR YOUTH 426 17TH STREET, SUITE 100 OAKLAND, CA 94612-2814	94-3341034	501(C)3	250,000.	0			PROGRAM EXPANSION	1
GENESYS WORKS 601 JEFFERSON AVE HOUSTON, TX 77002	03-0440761	501(C)3	250,000.	0			PROGRAM EXPANSION	
HEALTH LEADS, INC. 111 HUNTINGTON AVE, 23RD FLOOR BOSTON, MA 02199	45-0484533	501(C)3	525,000,	0			PROGRAM EXPANSION	
IMENTOR INCORPORATED 30 BROAD STREET, 9TH FLOOR NEW YORK, NY 10004	30-0105507	501(C)3	1,095,447,	0,			PROGRAM EXPANSION	
KIPP FOUNDATION 135 MAIN STREET, SUITE 1700 SAN FRANCISCO. CA 94105	94-3362724	501(C)3	500,000	0			PROGRAM_EXPANSION	
ا د د	52-2168409	501(C)3	550,000.	*0			PROGRAM EXPANSION	I
NEW LEADERS FOR NEW SCHOOLS 30 WEST 26TH STREET, 2ND FLOOR NEW YORK, NY 10010	04-3519203	501(c)3	000 009	0			PROGRAM EXPANSION	

PROGRAM EXPANSION
Schedule I (Form 990)

250,000,

26-2427526 501(C)3

725 FRONT STREET, NO. 400 SANTA CRUZ, CA 95060

NEW TEACHER CENTER

Schedule I (Form 990) NEW PROFIT INC. Part II Continuation of Grants and Other Assistance to Governments and	T INC. Assistance to Go		izations in the Ur	nited States (Sche	Organizations in the United States (Schedule I (Form 990), Part II)		04-3396766 P	Page 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 YORK UNIVERSITY 70 WASHINGTON SQUARE SOUTH NEW YORK, NY 10012	13-5562308	501(C)3	423,903,	0		,	PROGRAM EXPANSION	1
PEACE FIRST, INC. 280 SUMMER STREET, MEZZANINE LEVEL BOSTON, MA 02210	04-3323467	501(C)3	250,000	0			PROGRAM EXPANSION	1
PEER HEALTH EXCHANGE 545 SANSOME, SUITE 900 SAN FRANCISCO, CA 94111	56-2374305	501(C)3	375,000.	0			PROGRAM EXPANSION	
RARE 1840 WILSON BLVD., SUITE 204 ARLINGTON, VA 22201 REGENTS OF THE UNIVERSITY OF	23-7380563	501(C)3	20 000	0			PROGRAM EXPANSION	
CALIFORNIA AT BERKELEY - 2150 SHATTUCK AVENUE - BERKELEY, CA 94704	94-6002123	501(c)3	160,281.	0			PROGRAM EXPANSION	

	(066 m
EXPANSION	Schedule I (Form
PROGRAM	

٥.

321,250,

501(C)3

37-6006007

UNIVERSITY OF ILLINOIS FOUNDATION

1305 WEST GREEN STREET

URBANA, IL 61801

PROGRAM EXPANSION

286,026.

501(C)3

20-8837690

1825 PARK AVENUE, SUITE 503

SINGLE STOP USA

NEW YORK, NY 10035

PROGRAM EXPANSION

Ö

500,000

501(C)3

26-2122566

250,000,

501(C)3

06-1495529

25 WEST 45TH STREET, 6TH FLOOR

NEW YORK, NY 10036

TURNAROUND FOR CHILDREN

TEACH FOR ALL, INC. 315 WEST 36TH STREET

NEW YORK NY 10018

PROGRAM EXPANSION

Page 1	ant								orm 990)
04-3396766	(h) Purpose of grant		PROGRAM EXPANSION	PROGRAM EXPANSION	PROGRAM EXPANSION	PROGRAM EXPANSION			Schedule I (Form 990)
	(g) Description of								
	edule I (Form 990), Pa (f) Method of	(book, FMV, appraisal, other)							
	(e) Amount of	assistance	•0	*0	0	0			
	(d) Amount of	במט המט המט המט המט המט המט המט המט המט ה	303,014,	622,000.	2,250,000.	1,034,010,			
	(c) IRC section	מסמסים	501(C)3	501(C)3	501(c)3	501(C)3			
T INC.	Assistance to Ge		43-6003859	56-6001393	04-3534407	22-3076454			
	(a) Name and address of (b) EIN (c) IRC section (d) Amount of (e) Amount of (f) Method of (g) Method		UNIVERSITY OF MISSOURI 800 CONLEY AVENUE COLUMBIA, MO 65211	UNIVERSITY OF NORTH CAROLINA - CHAPEL HILL - 910 RALEIGH ROAD - CHAPEL HILL, NC 27514	YEAR UP, INC. 93 SUMMER STREET, 5TH FLOOR BOSTON, MA 02110	YOUTHBUILD USA 58 DAY STREET SOMERVILLE, MA 02144			

Page 2:

04-3396766

Schedule I (Form 990) (2012)

NEW PROFIT INC.

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22

Part III Grants and Other Assistance to Individuals in the United States.

Schedule I (Form 990) NEW PROFIT INC.	04-3396766 Page 2
Part IV Supplemental Information	
2012, NEW PROFIT INCURRED \$2,970,629 OF PERSONNEL COSTS F	RELATING TO THE
PORTFOLIO MANAGEMENT ACTIVITES AND SUPPORT TO ITS PORTFOL	JIO ORGANIZATIONS.
THIS AMOUNT REPRESENTED APPROXIMATELY 43% OF THE TOTAL PE	ERSONNEL COSTS OF
NEW PROFIT IN 2012.	
	· · · · · · · · · · · · · · · · · · ·
	-

SCHEDULE J (Form 990)

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.

Open to Pub

Employer identification number

Department of the Treasury Internal Revenue Service

Name of the organization

► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

OMB No. 1545-0047

04-3396766 NEW PROFIT INC Part I **Questions Regarding Compensation** Yes No 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 First-class or charter travel Housing allowance or residence for personal use Travel for companions Payments for business use of personal residence Tax indemnification and gross-up payments Health or social club dues or initiation fees Discretionary spending account 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 1b 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? 2 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III X Compensation committee Written employment contract Independent compensation consultant Compensation survey or study X Form 990 of other organizations X Approval by the board or compensation committee 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 Receive a severance payment or change-of-control payment? 4a Participate in, or receive payment from, a supplemental nonqualified retirement plan? X 4b Participate in, or receive payment from, an equity-based compensation arrangement? 4c 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. 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: Х The organization? 5a Х Any related organization? 5b If "Yes" to line 5a or 5b, describe in Part III. 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 The organization? X 6a X Any related organization? 6b If "Yes" to line 6a or 6b, describe in Part III. 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 Х 7 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 Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III 8 Х If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in

Regulations section 53 4958-6(c)?

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

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

Note. The sum of columns (B)(I)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual

		(B) Breakdown of V	(B) Breakdown of W-2 and/or 1099-MISC compensation	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(a)-(i)(a)	reported as deferred in prior Form 990
(1) VANESSA KIRSCH	(i)	301,491.	75,000.	0	83,500.	1,881.	461,872.	75,000.
č		4	0	0	0	0	0	0
op JONES	€	342,787.	0	0	.000,09	1,938.	404,725.	0
AGING DIRECTOR) <u>(</u>		0	0	0	0	0	0
HARD	Ξ	195,877.	28,751.	0	58,500.	630.	283,758.	28,751.
AGING DIRECTOR COO	∷≘	0	0	0.	0	0		0
VER	Ξ	293,098.	0	0.	3,817.	1,938.	298,853.	0
DIRECTOR OF AMERICA FORWARD	∷≘	0	0	0	0.	0.	- 1	0.
LISA JACKSON	Θ	200,231.	0.	0	3,11	630.	203,976.	0
GING PARTNER PORTFOLIO INVESTIN	(E)	0	0	0.	0	0.	0	0
IKER	Ξ	210,294.	0.	0	.000,9	1,215.	217,509.	0.
NER	: ≘	0	0	0	0	0.	0	0
MBERLY SYMAN	Θ	176,498.	18,000.	0	7,313.	1,762.	203,573.	18,000.
AGING PARTNER, ACTION TANK	∷≘	0	0	0	0.	0	0	0
4	Ξ	173,766.	0	0	7,371.	1,215.	182,352.	0
INER	(II)	0	0.	0.	0	0	- 1	
FFREY BERNDT	(i)	142,558.	57,673.	0.	2,830.	1,613.	204,674.	57,673.
MANAGING PARTNER, DEVELOPMENT	(ii)	0	0	0	0	0.		
	(i)	222,993.	32,288.	0	4,250.	630.	260,161.	32,288.
PARTNER	(ii)	0	0	0.	0.	0.	0	0
	Θ							
	Ξ							
	Ξ							
	3							
	Ξ							
	(ii)					į		
	(i)							
	(ii)							
	(i)							
	(1)							
	Ξ					į		
	(ii)					·		
919119							Schedu	Schedule J (Form 990) 2012

SCHEDULE L

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

Transactions With Interested Persons

► Complete if the organization answered
"Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c,
or Form 990-EZ, Part V, line 38a or 40b.

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

OMB No 1545-0047

Open To Public Inspection

Name of the organization

NEW PROFIT INC.	04-3396766
	04-3396766
Excess Benefit Transactions (section 501(c)(3) and section 501(c)(4) organizations only)	

Part I	Excess Bene			•		-	· ·			= -						
<u> </u>	Complete if the o							a or 25b	o, or	Form 990-EZ, Pa	art V, I	ne 40	b	7		
1 (a) Nam	e of disqualified p	erson (,	elationship betv		•	fied	(c) De	scription of tran	sactio	n			Correc	
				person and or	ganıza	ation								Ye	s	No
											_			+	+	
															-	
														1		
2 Enter the section	he amount of tax ii	ncurred by th	he org	ganization man	agers	or disc	ualified pers	sons du	ring 1	the year under		> \$		•	•	
3 Enter ti	he amount of tax,	ıf any, on lıne	e 2, al	bove, reimburs	ed by	the org	ganızatıon				i	\$				
Part II	Loans to and	d/or From	Inte	rested Pers	sons											
	Complete if the c						Part V, line	38a or F	orm	990, Part IV, Im	ie 26; d	or if th	e orga	nızatıd	on	
	reported an amo			Part X, line 5, 6	or 22	2.										
	Name of sted person	(b) Relations with organization	1	(c) Purpose of loan	fron	an to or n the zation?	(e) Origi principal ai	ınal mount	(f)	Balance due	(g) defa	In ult?	(h) App by boa comm	oroved ard or attee?	(i) W agreei	ritten ment?
					То	From					Yes	No	Yes	No	Yes	No
	<u> </u>															
				-												
					ļ						i					
		1	_													
			\dashv		ļ											
		l			İ	L L										
Total Part III	Grants or As	eietanca	Rone	ofiting Inter	atea.	d Pai	renne	> \$			1					
T dit iii				•				,								
(a) Na	ame of interested i				n Form 990, Part IV, line 27 n between (c) Amount of (d) Type of (e) P) Purp	Purpose of						
(4)			(b) Relationship between interested person and the organization (c) Amount of assistance assista									ssistance				
												-				
			-									-+				
			1				:					+				
			-									\dashv				
		 	<u> </u>		_	_						+				
			+							-		-+				
			1 -								-					
			1			-										

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

Schedule L (Form 990 or 990-EZ) 2012

Part IV	Business	Transactions	Involving	Interested	Persons.

Complete if the organization answered	"Yes" on Form 990	, Part IV, line	28a, 28	3b, or 28c			
(a) Name of interested person	(b) Relationship to person and th			(c) Amount of transaction	(d) Description of transaction	organiz	aring of zation's nues?
						Yes	No
KIPP FOUNDATION	A NEW PRO			500,000.			X
CENTER FOR CITIZEN LEADERS				250,000.	GRANT		Х
NEW LEADERS NEW SCHOOLS	A NEW PRO	FIT BOA	RD	600,000.	GRANT		X
TEACH FOR ALL	A NEW PRO	FIT BOA	RD	500,000.	GRANT		X
COLLEGE SUMMIT	A NEW PRO	FIT BOA	RD	724,535.	GRANT		X
				- · · · · · · · · · · · · · · · · · · ·			
				<u>-</u>			
				7.4.			
							L
Dort V. Complemental Information						.]	<u> </u>
Part V Supplemental Information							
Complete this part to provide additional	il information for re	sponses to q	uestions	s on Schedule L (see	instructions)		
CCU I DADM IV DUCTATECO M		NTC T NTC C	\T T7T%	IO TNUBBBBB	ED DEDGOVG		
SCH L, PART IV, BUSINESS T	RANSACTIO	NS TWAC)TAT	NG INTEREST	ED PERSONS		
(A) NAME OF PERSON: KIPP F	MOTPACIMIO'						
(A) WHILE OF TERBON: RIFF I	OUNDATION						
(B) RELATIONSHIP BETWEEN I	NTERESTED	PERSON	I ANI	ORGANIZAT	TON:		
<u> </u>		I DILDOI	1 11111	o onomitalii	10111		
A NEW PROFIT BOARD MEMBER	IS ALSO A	BOARD	MEME	BER OF THIS	ORGANIZATI	ON	
					V 1 1 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
						-	
(A) NAME OF INTERESTED PER	SON:						
CENTER FOR CITIZEN LEADERS	HIP D/B/A	MISSIC	N CO	ONTINUES			
(B) RELATIONSHIP BETWEEN I	NTERESTED	PERSON	I ANI	O ORGANIZAT	CION:		
A MINI DROUTE BOARD MINDER	TG 17.60 1	50155					
A NEW PROFIT BOARD MEMBER	IS ALSO A	BOARD	MEMI	BER OF THIS	ORGANIZATI	ON	
					- · · · · · · · · · · · · · · · · · · ·		
(A) NAME OF PERSON: NEW LE	ADEDC MEW	SCHOOL	.c				
TITY HILL OF THEODIE. NEW LE	MIN CHILD	5011001	<u> </u>	1			
(B) RELATIONSHIP BETWEEN I	NTERESTED	PERSON	I ANT	ORGANIZAT	TON:		
				0110111111111	20211		
A NEW PROFIT BOARD MEMBER	IS ALSO A	BOARD	MEMI	BER OF THIS	ORGANIZATI	ON	
	2,						
			,				
(A) NAME OF PERSON: TEACH	FOR ALL						
(B) RELATIONSHIP BETWEEN I	NTERESTED	PERSON	I ANI	ORGANIZAT	'ION:		
A NIEU DDORTE BOLD	TO						
A NEW PROFIT BOARD MEMBER	IS ALSO A	BUARD	MEMI	SER OF THIS	ORGANIZATI	LON	
		 					-
(A) NAME OF DEDGOM. COLLEC	יבי כווואואידייה						
(A) NAME OF PERSON: COLLEG	E SOMMIT						
(B) RELATIONSHIP BETWEEN I	NTERESTED	PERSON	J ANT	ORGANTZAT	TON:		
			<u> </u>	<u> </u>	<u> </u>		

Schedule I	Supplem	990-EZ)	NEW PE	ROFIT]	INC.					04-3396766	5 Page 2
Part V	_ Supplem	ental Info	rmation								
	Complete the	nis part to pr	ovide addition	al informatio	n for re	sponses to o	questions on S	chedu	le L (see ir	nstructions).	
A NEW	PROFIT	BOARD	MEMBER	IS ALS	50 A	BOARD	MEMBER	OF	THIS	ORGANIZATION	 -
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SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

Department of the Treasury Internal Revenue Service Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or 990-EZ.

QMB No 1545-0047
2012
Open to Public Inspection

Name of the organization

NEW PROFIT INC.

Employer identification number 04-3396766

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
ACCELERATE SOCIAL MOBILITY.
FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
CHANGE IN EDUCATION, JOBS TRAINING, EARLY CHILDHOOD AND OTHER LEVERS OF
SOCIAL MOBILITY, AND BUILD COMMUNITIES OF LEADERS FROM ALL SECTORS
AROUND BOLD VISIONS AND SYSTEMS-CHANGING AGENDAS TO FUEL SOCIAL
INNOVATION.
FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:
SUPPORT AND LEADERSHIP TEAM DEVELOPMENT (STAFF AND BOARD); AND 5)
ORGANIZATIONAL STRUCTURE AND DECISION RIGHTS. PORTFOLIO ORGANIZATIONS
ALSO HAD ACCESS TO CONSULTING SUPPORT FROM OUR STRATEGIC PARTNER, THE
MONITOR GROUP. OUR PARTNERSHIP WITH MONITOR GROUP ENABLED US TO BRING
ADDITIONAL SUPPORT TO BEAR, INCLUDING STRATEGIC GROWTH PLANNING AND
EXECUTIVE COACHING FOR THE SOCIAL ENTREPRENEUR. IN 2012, MONITOR GROUP
PROVIDED \$1,107,107 OF DONATED CONSULTING SERVICES TO OUR PORTFOLIO
ORGANIZATIONS. IN JANUARY, 2013, THE MONITOR GROUP WAS ACQUIRED BY
DELOITTE CONSULTING LLP (DELOITTE). NEW PROFIT AND DELOITTE HAVE SIGNED
A ONE YEAR, \$3 MILLION PRO-BONO COLLABORATION AGREEMENT WHICH WILL
ALLOW THE TWO ORGANIZATIONS TO WORK TOGETHER TO PURSUE A NUMBER OF
EFFORTS TO ADVANCE THE FIELD OF SOCIAL INNOVATION AND SOCIAL
ENTREPRENEURSHIP.

FORM 990, PART VI, SECTION A, LINE 8B: CERTAIN COMMITTEES HAVE WRITTEN

DOCUMENTATION OF THEIR MEETINGS WHILE CERTAIN COMMITTEES ARE FORMALIZING

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule O (Form 990 or 990-EZ) (2012)

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NEW PROFIT INC.

Employer identification number 04-3396766

Schedule O (Form 990 or 990-EZ) (2012)

THE PROCESS. ANY SUGGESTIONS OR ACTIONS THAT RESULT FROM COMMITTEE MEETINGS ARE PRESENTED TO THE BOARD OF DIRECTORS AND INCLUDED IN THE MINUTES.

FORM 990, PART VI, SECTION B, LINE 11: CERTAIN EMPLOYEES OF THE ORGANIZATION REVIEW THE FORM 990 PRIOR TO THE FILING. IN ADDITION, THE FULL FORM 990 WAS REVIEWED BY NEW PROFIT'S FINANCE COMMITTEE BEFORE BEING FILED WITH THE IRS. A FULL COPY OF THE 990 WAS EMAILED TO THE ENTIRE BOARD PRIOR TO ITS FILING.

FORM 990, PART VI, SECTION B, LINE 12C: THE NEW PROFIT BOARD OF DIRECTORS ADOPTED A CONFLICT OF INTEREST POLICY IN 2005 AND REVISED THE DOCUMENT DURING 2009 AND 2011. ALL NEW DIRECTORS ARE GIVEN A COPY OF THE POLICY WHEN THEY ARE VOTED ONTO THE BOARD AND ALL BOARD MEMBERS ARE ALSO REQUIRED TO DISCLOSE INTERESTS THAT COULD GIVE RISE TO CONFLICTS. ADDITIONALLY, WHEN DIRECTORS HAVE DIRECT RELATIONSHIPS WITH CURRENT PORTFOLIO ORGANIZATIONS OR PIPELINE ORGANIZATIONS (E.G. THEY SERVE ON THE BOARD OF AN ORGANIZATION), DIRECTORS ARE ASKED TO RECUSE THEMSELVES FROM VOTING WHEN DECISIONS REGARDING THESE ORGANIZATIONS ARE MADE BY THE BOARD OF DIRECTORS. WHEN COMPENSATION OF MANAGEMENT IS DISCUSSED AND DECIDED BY THE BOARD, DIRECTORS WITH DIRECT RELATIONSHIPS WITH INDIVIDUALS ON THE MANAGEMENT TEAM ARE ASKED TO RECUSE THEMSELVES.

FORM 990, PART VI, SECTION B, LINE 15: COMPENSATION FOR NEW PROFIT'S EXECUTIVE TEAM IS SET BY THE COMPENSATION COMMITTEE OF THE NEW PROFIT BOARD OF DIRECTORS. AS INPUT TO THIS DECISION-MAKING PROCESS, MANAGEMENT PROVIDES THE BOARD'S COMPENSATION COMMITTEE WITH SALARY DATA FOR COMPARABLE POSITIONS_WITHIN COMPARABLE ORGANIZATIONS, AN ASSESSMENT OF NEW PROFIT'S PERFORMANCE AGAINST GOALS FOR THE PREVIOUS FISCAL YEAR, AND PERFORMANCE 232212 01-04-13

Schedule O (Form 990 or 990-EZ) (2012)	Employer identification number
Name of the organization NEW PROFIT INC.	04-3396766
ASSESSMENTS FOR EACH STAFF MEMBER, INCLUDING A SELF-ASSES	SMENT PREPARED BY
THE MANAGING DIRECTOR. MANAGEMENT MEETS WITH THE COMPENSA	ATION COMMITTEE TO
DISCUSS THE MATERIAL PROVIDED. THE COMPENSATION COMMITTEE	THEN MEETS
INDEPENDENTLY TO DETERMINE COMPENSATION.	
FORM 990, PART VI, SECTION C, LINE 19: THE DOCUMENTS ARE	PROVIDED UPON
REQUEST AND IN ACCORDANCE WITH APPLICABLE STATES AND FEDE	ERAL LAWS.
FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:	
UNCOLLECTIBLE COMMITMENTS RECEIVABLE	-715,013.

NEW PROFIT inc.

EIN: 04-3396766

FORM 990 - APPENDIX TO PAGE ONE

This appendix is intended to provide centralized supplemental information to New Profit's summarized financial data presented on page 1 of New Profit's 2012 Form 990.

BREAKDOWN OF 2012 EXPENSES - Page 1, Line 18

	Amount		% of Total Expenses	
Program Service Expenses (See Page 2)			-	
Portfolio Investing and Services:				
Grants to portfolio organziations	\$	14,335,466	*	
Portfolio services		3,862,072	*	
Subtotal Portfolio Investing and Services		18,197,538	-	
Action Tank:				
Policy and Field Leadership (America Forward)		1,412,131		
Convenings		766,020		
Subtotal Action Tank		2,178,151	_	
Total Program Service Expenses		20,375,689		84%
Management and General		2,429,968		10%
Fundraising		1,379,277	_	6%
TOTAL EXPENSES	\$	24,184,934	=	

^{*} New Profit's portfolio investing model provides financial (\$14,35,466) and strategic resources to results-driven organizations. Each organization has a portfolio manager that works closely with the organization's leadership to provide support in a variety of areas, including impact innovation, leadership and governance, organizational strategy, performance measurement, and management, as indicated in Part III of the Form 990. A portfolio manager also holds a seat on the organization's board of directors throughout the term of New Profit's investment in the organization. For the year ended December 31, 2012, New Profit incurred \$2,970,629 of personnel costs relating to the portfolio management activities and support to its portfolio organizations. This amount represents approximately 43% of the total personnel costs of New Profit in 2012. SEE SCHEDULE I for additional information.

2012 FINANCIAL RESULTS (Page 1, Line 19)

The summarized financial information reported on page 1 of the Form 990 has been reported on the accrual basis of accounting. The contributions and grants reported on page 1, line 9 represent the total NEW commitments received in 2012 and do not include cash payments made on commitments recorded in prior years. At the start of the current campaign, large surpluses had been reported at the beginning of the campaign (2008 and 2009) as that is when the majority of the commitments were made and recorded. Though there is a net loss of \$7,362,628 reported on the Form 990, New Profit's audited financial statements reflect a surplus of \$210,090 from operating activities. The significant year to year fluctuations as a result of reporting unconditional commitments as revenue when made is evidenced by the following 2008 to 2012 history of surplus or deficit:

2008 Surplus	\$ 28,322,411
2009 Surplus	\$ 10,493,248
2010 Deficit	\$ (6,758,990)
2011 Deficit	\$ (11,869,652)
2012 Deficit	\$ (7,362,628)

As of December 31, 2012, New Profit also has approximately \$26M in equity of which \$19M is temporarily restricted and \$7M is unrestricted. Temporarily restricted net assets are primarily comprised of multiyear commitments, which are recorded as revenue in the year the commitment is made.

In 2012, New Profit's operating activities resulting in a net increase in cash of approximately \$2.7M, compared to \$1.4M in 2011.

44	. "•						
	3868 (Rev. 1-2013)				Page 2		
• If yo	ou are filing for an Additional (Not Automatic) 3-Month Ext	tension, d	complete only Part II and check th	is box	ightharpoons		
Note.	Only complete Part II if you have already been granted an a	utomatic	3-month extension on a previously	filed Form 8868			
• If yo	ou are filing for an Automatic 3-Month Extension, complet						
Part	II Additional (Not Automatic) 3-Month Ex	xtensio	n of Time. Only file the origi	nal (no copies n	eeded).		
			Enter filer'	s identifying numb	er, see instructions		
Туре	or Name of exempt organization or other filer, see instruc	ctions		Employer identification number (EIN)			
print							
File by ti				04-	3396766		
due date filing you return S			tions	Social security nu	mber (SSN)		
ınstructı	City, town or post office, state, and ZIP code. For a fo BOSTON, MA 02116	reign add	ress, see instructions		_		
Enter	the Return code for the return that this application is for (file	a separa	te application for each return)		0 1		
Applic	ation	Return	Application		Return		
Is For	i i i i i i i i i i i i i i i i i i i	Code	Is For		Code		
	990 or Form 990-EZ	01					
Form 9	990-BL	02	Form 1041-A		08		
Form 4	1720 (ındıvıdual)	03	Form 4720		09		
Form 9	990-PF	04	Form 5227		10		
Form 9	990-T (sec 401(a) or 408(a) trust)	05	Form 6069		11		
Form 9	990-T (trust other than above)	06	Form 8870		12		
STOP	Do not complete Part II if you were not already granted	an autor	natic 3-month extension on a pre	viously filed Form	8868		
			ANAGING DIRECTOR A				
	books are in the care of \triangleright 200 CLARENDON S	STREE'		STON, MA 0	2116		
	ephone No ▶ <u>617-912-8800</u>		FAX No 🕨		\square		
	ne organization does not have an office or place of business				>		
	nis is for a Group Return, enter the organization's four digit (
box 🕨				of all members the e	xtension is for.		
	· · · · · · · · · · · · · · · · · · ·	OVEM	BER 15, 2013				
	For calendar year 2012 , or other tax year beginning $_$, and endi				
6	If the tax year entered in line 5 is for less than 12 months, cl	neck reas	on Initial return	Final return			
7	Change in accounting period State in detail why you need the extension						
	INFORMATION NEEDED TO FILE A F	RETUR	N IS NOT YET AVAIL	LABLE.			
8a	If this application is for Form 990-BL, 990-PF, 990-T, 4720, o	or 6069, e	enter the tentative tax, less any				
	nonrefundable credits See instructions.			8a \$	0.		
b	If this application is for Form 990-PF, 990-T, 4720, or 6069,	enter any	refundable credits and estimated				
	tax payments made. Include any prior year overpayment all	owed as	a credit and any amount paid				
	previously with Form 8868.			8b \$	0.		
С	Balance due. Subtract line 8b from line 8a. Include your pa	yment wi	th this form, if required, by using				
	EFTPS (Electronic Federal Tax Payment System) See instru		et he completed for Part II	8c \$	0.		

Signature and Verification must be completed for Part II only.

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form.

Signature ► Title ► MANAGING DIRECTOR & COO Date ►

Form 8868 (Rev. 1-2013)