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Form **990**Department of the Treasury
Internal Revenue Service**Return of Organization Exempt From Income Tax**
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No 1545-0047

2013

Open to Public Inspection

Do not enter Social Security numbers on this form as it may be made public.

Information about Form 990 and its instructions is at www.irs.gov/form990**A** For the 2013 calendar year, or tax year beginning

and ending

B Check if applicable

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

C Name of organization

OPPORTUNITY FINANCE NETWORK

Doing Business As

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

620 CHESTNUT STREET

Room/suite

572

City or town, state or province, country, and ZIP or foreign postal code

PHILADELPHIA, PA 19106

F Name and address of principal officer

MARK PINSKY

SAME AS C ABOVE

D Employer identification number

20-5189202

E Telephone number

215-923-4754

G Gross receipts \$

11,365,001.

H(a) Is this a group returnfor subordinates? ☐ Yes ☒ No**H(b)** Are all subordinates included? ☐ Yes ☐ No

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

H(c) Group exemption number**I** Tax-exempt status: ☒ 501(c)(3) ☐ 501(c)() (insert no.) ☐ 4947(a)(1) or ☐ 527**J** Website: WWW.OFN.ORG**K** Form of organization: ☒ Corporation ☐ Trust ☐ Association ☐ Other**L** Year of formation 2006 **M** State of legal domicile: PA**Part I Summary****1** Briefly describe the organization's mission or most significant activities SEE SCHEDULE O**2** Check this box ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets**3** Number of voting members of the governing body (Part VI, line 1a)

3 14

4 Number of independent voting members of the governing body (Part VI, line 1b)

4 14

5 Total number of individuals employed in calendar year 2013 (Part V, line 2a)

5 51

6 Total number of volunteers (estimate if necessary)

6 14

7a Total unrelated business revenue from Part VIII, column (C), line 12

7a 0.

b Net unrelated business taxable income from Form 990-T, line 34

7b 0.

8 Contributions and grants (Part VIII, line 1h)

Prior Year	Current Year
12,391,470.	4,118,593.
5,990,912.	5,413,685.
329,470.	308,711.
758,658.	740,138.
19,470,510.	10,581,127.
10,507,749.	1,776,966.
0.	0.
4,029,352.	4,680,826.
0.	0.
5,197,632.	5,433,738.
19,734,733.	11,891,530.
<264,223.>	<1,310,403.>

9 Program service revenue (Part VIII, line 2g)**10** Investment income (Part VIII, column (A), lines 3, 4, and 7d)**11** Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)**12** Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)**13** Grants and similar amounts paid (Part IX, column (A), lines 1-3)**14** Benefits paid to or for members (Part IX, column (A), line 4)**15** Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)**16a** Professional fundraising fees (Part IX, column (A), line 11e)**b** Total fundraising expenses (Part IX, column (D), line 25) 302,916.**17** Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)**18** Total expenses - Add lines 13-17 (must equal Part IX, column (A), line 25)**19** Revenue less expenses - Subtract line 18 from line 12**20** Total assets (Part X, line 16)**21** Total liabilities (Part X, line 26)**22** Net assets or fund balances - Subtract line 21 from line 20

Net Assets or Fund Balances

Part II Signature Block

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

Sign Here

Signature of officer

Date

FRANCIS A. KUTZ, CHIEF FINANCIAL OFFICER

Type or print name and title

Paid

Print/Type preparer's name

CHRISTOPHER M. PEKULA

Preparer's signature

CHRISTOPHER M. PEKUL

Date

10/1/2014

Check if self-employed

PTIN

P00734965

Preparer

Firm's name

MCGLADREY LLP

Use Only

Firm's address

751 ARBOR WAY, SUITE 200

BLUE BELL, PA 19422

Firm's EIN

42-0714325

Phone no. 215.641.8600

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

☒ Yes ☐ No

SCANNED OCT 27 2014

OCT 15 2014
RECEIVED
IRS-OIG

90-17

12

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III

☒ X**1** Briefly describe the organization's mission

SEE SCHEDULE O

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

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

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

If "Yes," describe these changes on Schedule O

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a (Code) (Expenses \$ 3,643,196. including grants of \$ 850,000.) (Revenue \$ 3,977,272.)
FINANCIAL SERVICES: FINANCIAL SERVICES INCLUDES THE FOLLOWING PRIMARY ACTIVITIES: OFN'S FINANCE FUND (ON BALANCE-SHEET LENDING AND INVESTING TO CDFIS), ASSET MANAGEMENT (FEE-BASED BUSINESS PROVIDING UNDERWRITING AND MONITORING SERVICES TO THIRD PARTY INVESTORS), NEW MARKETS TAX CREDIT ACTIVITY, THE CDFI FUND BOND GUARANTEE PROGRAM, AND OTHER FINANCING RESEARCH AND DEVELOPMENT.

4b (Code) (Expenses \$ 1,771,462. including grants of \$) (Revenue \$ 611,709.)
KNOWLEDGE SHARING: KNOWLEDGE SHARING INCLUDES THE FOLLOWING PRIMARY ACTIVITIES: CDFI DATA PROJECT, OFN'S ANNUAL CONFERENCE, KNOWLEDGE NETWORKS, MEMBERSHIP, AND OTHER RESEARCH, PEER LEARNING, AND KNOWLEDGE SHARING ACTIVITIES FOR CDFIS, FUNDERS, INVESTORS, AND OTHER KEY STAKEHOLDERS.

4c (Code) (Expenses \$ 1,363,095. including grants of \$) (Revenue \$ 1,454,404.)
STRATEGIC CONSULTING: CONSULTING SERVICES INCLUDE CONSULTING SERVICES FOR CDFIS, CDFI INVESTORS, AND OTHER KEY INDUSTRY STAKEHOLDERS TO IMPROVE THE PERFORMANCE AND CAPACITY OF THE CDFI INDUSTRY.

4d Other program services (Describe in Schedule O)

(Expenses \$ 3,979,944. including grants of \$ 926,966.) (Revenue \$ 110,438.)

4e Total program service expenses **10,757,697.**

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	X	
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ?	X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		X
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? <i>If "Yes," complete Schedule C, Part II</i>	X	
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? <i>If "Yes," complete Schedule C, Part III</i>		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? <i>If "Yes," complete Schedule D, Part I</i>		X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>		X
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? <i>If "Yes," complete Schedule D, Part IV</i>		X
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>		X
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>	X	
b 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? <i>If "Yes," complete Schedule D, Part VII</i>		X
c Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i>		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 Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i>		X
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>	X	
f 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)? <i>If "Yes," complete Schedule D, Part X</i>	X	
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>		X
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>	X	
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		X
14a Did the organization maintain an office, employees, or agents outside of the United States?		X
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i>		X
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i>		X
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i>		X
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i>		X
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>		X
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		X
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		

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Part IV Checklist of Required Schedules (continued)

	Yes	No
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	X	
22 Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>		X
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	X	
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>		X
24b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
24c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
24d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>		X
25b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>		X
26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If so, complete Schedule L, Part II</i>		X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>		X
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions).		
28a A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
28b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
28c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>		X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>		X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	X	
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	X	
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	X	
35b 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)? <i>If "Yes," complete Schedule R, Part V, line 2</i>		X
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>		X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	X	

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

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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 or note to any line in this Part VI ☒**Section A. Governing Body and Management**

	Yes	No
1a Enter the number of voting members of the governing body at the end of the tax year 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.	14	
1b Enter the number of voting members included in line 1a, above, who are independent	14	
2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		X
3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?		X
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
5 Did the organization become aware during the year of a significant diversion of the organization's assets?		X
6 Did the organization have members or stockholders?	X	
7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	X	
b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	X	
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a The governing body?	X	
b Each committee with authority to act on behalf of the governing body?	X	
9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		X

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

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

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed ► **PA, AK, AL, AR, AZ, CA, CO, CT, DC, FL, GA, HI**

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

19 Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial 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 and records of the organization ►
LAURIE CURRAN - 215-320-4317
620 CHESTNUT STREET, PHILADELPHIA, PA 19106

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent ContractorsCheck if Schedule O contains a response or note to any line in this Part VII ☐**Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees****1a** Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- 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.
- 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 nor any related organization compensated any current officer, director, or trustee.

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) ERIC BELSKY BOARD MEMBER	2.00	X						0.	0.	0.
(2) DONALD BOWEN BOARD MEMBER	2.00	X						0.	0.	0.
(3) ALAN BRANSON TREASURER	2.00	X		X				0.	0.	0.
(4) LORI CHATMAN BOARD MEMBER	2.00	X						0.	0.	0.
(5) TRINITA LOGUE CHAIR OF THE BOARD	2.00	X		X				0.	0.	0.
(6) JULIA NELMARK BOARD MEMBER	2.00	X						0.	0.	0.
(7) MARY ROGIER BOARD MEMBER	2.00	X						0.	0.	0.
(8) JOHN BERDES BOARD MEMBER	2.00	X						0.	0.	0.
(9) KEITH BISSON BOARD MEMBER	2.00	X						0.	0.	0.
(10) PENELOPE DOUGLAS BOARD MEMBER	2.00	X						0.	0.	0.
(11) DAVID GLASER BOARD MEMBER	2.00	X						0.	0.	0.
(12) JIM KING BOARD MEMBER	2.00	X						0.	0.	0.
(13) GUSTAVO LASALA BOARD MEMBER	2.00	X						0.	0.	0.
(14) INEZ LONG BOARD MEMBER	2.00	X						0.	0.	0.
(15) MARK PINSKY PRESIDENT & CEO	40.00			X				295,403.	0.	18,265.
(16) CATHERINE DOLAN CHIEF OPERATING OFFICER	40.00			X				201,437.	0.	13,474.
(17) FRANCIS LUTZ CHIEF FINANCIAL OFFICER	40.00			X				181,866.	0.	14,047.

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) PAMELA PORTER EVP, STRATEGIC CONSULTING	40.00					X		179,000.	0.	3,208.
(19) WANDA SPEIGHT EVP, FINANCIAL SERVICES	40.00					X		164,192.	0.	11,360.
(20) JENNIFER VASILOFF EVP, POLICY	40.00					X		149,870.	0.	2,975.
(21) LINA PAGE EVP, STRATEGIC COMMUNICATIONS	40.00					X		149,231.	0.	14,278.
(22) DONNA FABIANI EVP, KNOWLEDGE SHARING	40.00					X		144,906.	0.	10,903.
1b Sub-total								1,465,905.	0.	88,510.
c Total from continuation sheets to Part VII, Section A								0.	0.	0.
d Total (add lines 1b and 1c)								1,465,905.	0.	88,510.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **10**

- 3 Did the organization list any **former** officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual
- 4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual
- 5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person

	Yes	No
3		X
4	X	
5		X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. 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
NONE		
2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization	0	

Part VIII Statement of RevenueCheck if Schedule O contains a response or note to any line in this Part VIII ☐

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1a					
	b Membership dues	1b	322,706.				
	c Fundraising events	1c					
	d Related organizations	1d					
	e Government grants (contributions)	1e	290,472.				
	f All other contributions, gifts, grants, and similar amounts not included above	1f	3,505,415.				
	g Noncash contributions included in lines 1a-1f \$						
	h Total. Add lines 1a-1f			4,118,593.			
Program Service Revenue			Business Code				
	2 a INTEREST ON LOANS		525990	3,034,187.	3,034,187.		
	b TECHNICAL SERVICES		900099	1,798,315.	1,798,315.		
	c TRAINING EVENTS		900099	581,183.	581,183.		
	d						
	e						
	f All other program service revenue						
	g Total. Add lines 2a-2f			5,413,685.			
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)			291,485.			291,485.
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
	6 a Gross rents	(i) Real	(ii) Personal				
	b Less rental expenses						
	c Rental income or (loss)						
	d Net rental income or (loss)						
	7 a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
	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 including \$ _____ of 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						
	b Less direct expenses						
	c Net income or (loss) from gaming activities						
	10 a Gross sales of inventory, less returns and allowances						
	b Less cost of goods sold						
	c Net income or (loss) from sales of inventory						
Miscellaneous Revenue			Business Code				
11 a ADMINISTRATIVE / EMPLOYEE LEASING		900099	740,138.	740,138.			
b							
c							
d All other revenue							
e Total. Add lines 11a-11d			740,138.				
12 Total revenue. See instructions			10,581,127.	6,153,823.	0.	308,711.	

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 or note to any line in this Part IX

☒ X

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the United States. See Part IV, line 21	1,776,966.	1,776,966.		
2 Grants and other assistance to individuals in the United States. See Part IV, line 22				
3 Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	736,882.	415,385.	288,014.	33,483.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	3,342,955.	2,958,423.	227,298.	157,234.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	28,866.	24,651.	2,902.	1,313.
9 Other employee benefits	276,134.	232,043.	30,068.	14,023.
10 Payroll taxes	295,989.	249,926.	31,718.	14,345.
11 Fees for services (non-employees)				
a Management				
b Legal	16,181.	10,109.	6,072.	
c Accounting	62,200.	50,755.	7,881.	3,564.
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)	1,242,145.	1,214,139.	11,372.	16,634.
12 Advertising and promotion	227,236.	224,700.	2,307.	229.
13 Office expenses	179,638.	147,774.	24,030.	7,834.
14 Information technology	233,723.	190,718.	29,613.	13,392.
15 Royalties				
16 Occupancy	330,410.	269,992.	41,603.	18,815.
17 Travel	295,940.	253,241.	33,293.	9,406.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	913,868.	908,616.	4,627.	625.
20 Interest	1,134,194.	1,134,194.		
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	26,400.	21,542.	3,345.	1,513.
23 Insurance	50,386.	41,115.	6,384.	2,887.
24 Other expenses. Itemize expenses not covered 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.)				
a PROVISION FOR LOAN LOSS	273,014.	273,014.		
b TECHNOLOGY PROJECTS	206,894.	206,894.		
c RECRUITING	50,294.	40,736.	5,143.	4,415.
d MEMBERSHIPS	41,909.	39,392.	2,535.	<18.>
e All other expenses	149,306.	73,372.	72,712.	3,222.
25 Total functional expenses Add lines 1 through 24e	11,891,530.	10,757,697.	830,917.	302,916.
26 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 ☐ if following SOP 98-2 (ASC 958-720)

Part X Balance SheetCheck if Schedule O contains a response or note to any line in this Part X ☐

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	500.	1	500.
	2 Savings and temporary cash investments	22,825,363.	2	16,283,882.
	3 Pledges and grants receivable, net	10,782,311.	3	7,052,399.
	4 Accounts receivable, net	354,375.	4	469,088.
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		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	75,488,122.	7	83,540,032.
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	31,316.	9	50,712.
	10a Land, buildings, and equipment - cost or other basis. Complete Part VI of Schedule D	10a 723,298.		
	b Less accumulated depreciation	10b 569,761.	10c	153,537.
	11 Investments - publicly traded securities	3,839,027.	11	4,094,904.
	12 Investments - other securities. See Part IV, line 11	655,123.	12	407,679.
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11	830.	15	833.
16 Total assets. Add lines 1 through 15 (must equal line 34)	114,065,426.	16	112,053,566.	
Liabilities	17 Accounts payable and accrued expenses	480,468.	17	546,960.
	18 Grants payable	488,601.	18	
	19 Deferred revenue	10,000.	19	60,689.
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties	60,625,000.	24	60,450,000.
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	3,000,000.	25	3,000,000.
	26 Total liabilities. Add lines 17 through 25	64,604,069.	26	64,057,649.
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	28,135,992.	27	28,107,399.
	28 Temporarily restricted net assets	21,325,365.	28	19,888,518.
	29 Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
33 Total net assets or fund balances	49,461,357.	33	47,995,917.	
34 Total liabilities and net assets/fund balances	114,065,426.	34	112,053,566.	

Form 990 (2013)

Part XI Reconciliation of Net AssetsCheck if Schedule O contains a response or note to any line in this Part XI ☐

1	Total revenue (must equal Part VIII, column (A), line 12)	1	10,581,127.
2	Total expenses (must equal Part IX, column (A), line 25)	2	11,891,530.
3	Revenue less expenses Subtract line 2 from line 1	3	<1,310,403.>
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	49,461,357.
5	Net unrealized gains (losses) on investments	5	<155,037.>
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	0.
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	47,995,917.

Part XII Financial Statements and ReportingCheck if Schedule O contains a response or note to any line in this Part XII ☒

- 1 Accounting method used to prepare the Form 990 ☐ Cash ☒ Accrual ☐ Other _____
If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O
- 2a Were the organization's financial statements compiled or reviewed by an independent accountant?
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?
If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both
☐ 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 audit, review, or compilation of its financial statements and selection of an independent accountant?
If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O
- 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?
- b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

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

Form 990 (2013)

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

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.

▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990

OMB No 1545-0047

2013

Open to Public
Inspection

Name of the organization

OPPORTUNITY FINANCE NETWORK

Employer identification number
20-5189202

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

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

- 1 ☐ A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).
- 2 ☐ A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.)
- 3 ☐ A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).
- 4 ☐ A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state _____
- 5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.)
- 6 ☐ A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).
- 7 ☐ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.)
- 8 ☐ A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)
- 9 ☒ An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.)
- 10 ☐ An organization organized and operated exclusively to test for public safety. See section 509(a)(4).
- 11 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h.
- a ☐ Type I b ☐ Type II c ☐ Type III - Functionally integrated d ☐ Type III - Non-functionally integrated
- e ☐ By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).
- f ☐ If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box.
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?
- (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?
- (ii) A family member of a person described in (i) above?
- (iii) A 35% controlled entity of a person described in (i) or (ii) above?
- h Provide the following information about the supported organization(s)

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

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization in col. (i) listed in your governing document?		(v) Did you notify the organization in col. (i) of your support?		(vi) Is the organization in col. (i) organized in the U.S.?		(vii) Amount of monetary support
			Yes	No	Yes	No	Yes	No	
Total									

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Schedule A (Form 990 or 990-EZ) 2013

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.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public support. Subtract line 5 from line 4						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
11 Total support. Add lines 7 through 10						
12 Gross receipts from related activities, etc. (see instructions)					12	
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ► <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

14 Public support percentage for 2013 (line 6, column (f) divided by line 11, column (f))	14	%
15 Public support percentage from 2012 Schedule A, Part II, line 14	15	%
16a 33 1/3% support test - 2013. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ► <input type="checkbox"/>		
b 33 1/3% support test - 2012. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ► <input type="checkbox"/>		
17a 10% -facts-and-circumstances test - 2013. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ► <input type="checkbox"/>		
b 10% -facts-and-circumstances test - 2012. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ► <input type="checkbox"/>		
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ► <input type="checkbox"/>		

Schedule A (Form 990 or 990-EZ) 2013

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.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")	3349873.	3349619.	35138455.	12391470.	4118593.	58348010.
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	2942996.	4077797.	5298759.	5990912.	5413685.	23724149.
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5	6292869.	7427416.	40437214.	18382382.	9532278.	82072159.
7a Amounts included on lines 1, 2, and 3 received from disqualified persons	1075000.	2929948.	27779354.	7089028.	3572721.	42446051.
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						0.
c Add lines 7a and 7b	1075000.	2929948.	27779354.	7089028.	3572721.	42446051.
8 Public support (Subtract line 7c from line 6)						39626108.

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
9 Amounts from line 6	6292869.	7427416.	40437214.	18382382.	9532278.	82072159.
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	580,700.	509,283.	319,395.	290,152.	291,485.	1991015.
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b	580,700.	509,283.	319,395.	290,152.	291,485.	1991015.
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)				758,658.	740,138.	1498796.
13 Total support. (Add lines 9, 10c, 11 and 12)	6873569.	7936699.	40756609.	19431192.	10563901.	85561970.

14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ☐**Section C. Computation of Public Support Percentage**

15 Public support percentage for 2013 (line 8, column (f) divided by line 13, column (f))	15	46.31 %
16 Public support percentage from 2012 Schedule A, Part III, line 15	16	46.46 %

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2013 (line 10c, column (f) divided by line 13, column (f))	17	2.33 %
18 Investment income percentage from 2012 Schedule A, Part III, line 17	18	2.27 %

19a 33 1/3% support tests - 2013. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ☒b 33 1/3% support tests - 2012. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ☐20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ☐

Part IV

Supplemental Information. Provide the explanations required by Part II, line 10, Part II, line 17a or 17b, and Part III, line 12

Also complete this part for any additional information (See instructions)

Also complete this part for any additional information (see instructions)

SCHEDULE C
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527
▶ **Complete if the organization is described below.** ▶ Attach to Form 990 or Form 990-EZ.
▶ **See separate instructions.** ▶ Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2013

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) organizations Complete Part III.

Name of organization

OPPORTUNITY FINANCE NETWORK

Employer identification number

20-5189202

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

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

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

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

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

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

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

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

Schedule C (Form 990 or 990-EZ) 2013

LHA

332041
11-08-13

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

- A** Check ☐ if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures)
- B** Check ☐ if the filing organization checked box A and "limited control" provisions apply

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influence public opinion (grass roots lobbying)			
b Total lobbying expenditures to influence a legislative body (direct lobbying)			
c Total lobbying expenditures (add lines 1a and 1b)			
d Other exempt purpose expenditures			
e Total exempt purpose expenditures (add lines 1c and 1d)			
f Lobbying nontaxable amount Enter the amount from the following table in both columns			
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:		
Not over \$500,000	20% of the amount on line 1e		
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000		
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000		
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000		
Over \$17,000,000	\$1,000,000		
g Grassroots nontaxable amount (enter 25% of line 1f)			
h Subtract line 1g from line 1a. If zero or less, enter -0-			
i Subtract line 1f from line 1c. If zero or less, enter -0-			
j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?			

☐ Yes ☐ No
4-Year Averaging Period Under Section 501(h)

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

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

Schedule C (Form 990 or 990-EZ) 2013

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.**

▶ **Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990**

OMB No 1545-0047

2013

Open to Public Inspection

Name of the organization

OPPORTUNITY FINANCE NETWORK

Employer identification number
20-5189202

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

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

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

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

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

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

	Held at the End of the Tax Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d

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

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

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

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

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

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

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

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

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

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

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

(ii) Assets included in Form 990, Part X ▶ \$ _____

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

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

b Assets included in Form 990, Part X ▶ \$ _____

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

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

a ☐ Public exhibition

d ☐ Loan or exchange programs

b ☐ Scholarly research

e ☐ Other _____

c ☐ Preservation for future generations

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

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

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

☐ Yes

☐ No

Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21

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

☐ Yes

☐ No

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

	Amount
1c	
1d	
1e	
1f	

c Beginning balance

d Additions during the year

e Distributions during the year

f Ending balance

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

☐ Yes

☐ No

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII

☐

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

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

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as

a Board designated or quasi-endowment ☐ _____ %

b Permanent endowment ☐ _____ %

c Temporarily restricted endowment ☐ _____ %

The percentages in lines 2a, 2b, and 2c should equal 100%

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

(i) unrelated organizations

(ii) related organizations

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

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

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

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment		723,298.	569,761.	153,537.
e Other				
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				153,537.

Schedule D (Form 990) 2013

Part VII Investments - Other Securities.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11b See Form 990, Part X, line 12

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ▶		

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11c. See Form 990, Part X, line 13

(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶		

Part IX Other Assets.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11d See Form 990, Part X, line 15

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total (Column (b) must equal Form 990, Part X, col. (B) line 15.) ▶	

Part X Other Liabilities.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11e or 11f See Form 990, Part X, line 25

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) WELLS FARGO EQUITY EQUIVALENT	
(3) INVESTMENT	3,000,000.
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	

2. Liability for uncertain tax positions 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 ☒

Schedule D (Form 990) 2013

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

Complete if the organization answered "Yes" to Form 990, Part IV, line 12a

1	Total revenue, gains, and other support per audited financial statements		1	10,910,483.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
a	Net unrealized gains on investments	2a	<155,037.	
b	Donated services and use of facilities	2b	94,393.	
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII)	2d	390,000.	
e	Add lines 2a through 2d	2e		329,356.
3	Subtract line 2e from line 1	3		10,581,127.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII)	4b		
c	Add lines 4a and 4b	4c		0.
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5		10,581,127.

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered "Yes" to Form 990, Part IV, line 12a

1	Total expenses and losses per audited financial statements		1	12,375,923.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
a	Donated services and use of facilities	2a	94,393.	
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII)	2d	390,000.	
e	Add lines 2a through 2d	2e		484,393.
3	Subtract line 2e from line 1	3		11,891,530.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII)	4b		
c	Add lines 4a and 4b	4c		0.
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5		11,891,530.

Part XIII Supplemental Information.

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

PART X, LINE 2:**INCOME TAXES: THE ORGANIZATION IS GENERALLY EXEMPT FROM****FEDERAL INCOME TAXES UNDER THE PROVISIONS OF SECTION 501(C)(3) OF THE****INTERNAL REVENUE CODE. IN ADDITION, THE ORGANIZATION QUALIFIES FOR****CHARITABLE CONTRIBUTION DEDUCTIONS AND HAS BEEN CLASSIFIED AS AN****ORGANIZATION THAT IS NOT A PRIVATE FOUNDATION. INCOME WHICH IS NOT RELATED****TO EXEMPT PURPOSES, LESS APPLICABLE DEDUCTIONS, IS SUBJECT TO FEDERAL AND****STATE CORPORATE INCOME TAXES. THE ORGANIZATION HAD NO NET UNRELATED****BUSINESS INCOME FOR THE YEARS ENDED DECEMBER 31, 2013 AND 2012,****RESPECTIVELY.****MANAGEMENT EVALUATED THE ORGANIZATION'S TAX POSITIONS AND CONCLUDED THAT**

Part XIII Supplemental Information (continued)

THE ORGANIZATION HAD TAKEN NO UNCERTAIN TAX POSITIONS THAT REQUIRE ADJUSTMENT TO THE FINANCIAL STATEMENTS. CONSEQUENTLY, NO ACCRUAL FOR INTEREST AND PENALTIES WAS DEEMED NECESSARY FOR THE YEARS ENDED DECEMBER 31, 2013 AND 2012. THE ORGANIZATION FILES TAX RETURNS IN THE U.S. FEDERAL JURISDICTION AND COMMONWEALTH OF PENNSYLVANIA. GENERALLY, THE ORGANIZATION IS NO LONGER SUBJECT TO INCOME TAX EXAMINATION BY THE U.S. FEDERAL OR STATE TAX AUTHORITIES FOR YEARS BEFORE 2010.

PART XI, LINE 2D - OTHER ADJUSTMENTS:

FISCAL AGENCY TRANSFER TO CDFI ASSESSMENT AND RATINGS

SYSTEM, INC. 390,000.

PART XII, LINE 2D - OTHER ADJUSTMENTS:

FISCAL AGENCY TRANSFER TO CDFI ASSESSMENT AND RATINGS

SYSTEM, INC. 390,000.

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**
Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.
► Attach to Form 990.

OMB No 1545-0047

2013

Open to Public
Inspection

► Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

Name of the organization

OPPORTUNITY FINANCE NETWORK

Employer identification number
20-5189202

Part I General Information on Grants and Assistance

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

☒ Yes ☐ No

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

Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HOUSING PARTNERSHIP NETWORK 160 STATE STREET, 5TH FLOOR BOSTON, MA 02109	04-3172401	501C3	227,273.		0.FMV - CASH		NEXT AWARDS
NATURAL CAPITAL INVESTMENT FUND 1098 TURNER ROAD SHEPHERDSTOWN, WV 25443	54-2058754	501C3	13,174.		0.FMV - CASH		CREATE JOBS FOR USA FUND
CAPITAL IMPACT PARTNERS 2011 CRYSTAL DRIVE, SUITE 800 ARLINGTON, VA 22202	52-1290127	501C3	250,000.		0.FMV - CASH		NEXT AWARDS
OPPORTUNITY FUND 111 WEST ST. JOHN STREET-SUITE 800 SAN JOSE, CA 95113	31-1719434	501C3	272,727.		0.FMV - CASH		NEXT AWARDS
FREEDOM FIRST CREDIT UNION 5240 KNOWLEDGE PARKWAY ROANOKE, VA 24019	54-0699770	501C14	20,025.		0.FMV - CASH		CREATE JOBS FOR USA FUND
FREEDOM FIRST CREDIT UNION 5240 KNOWLEDGE PARKWAY ROANOKE, VA 24019	54-0699770	501C14	100,000.		0.FMV - CASH		NEXT SEED CAPITAL AWARD

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

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

Schedule I (Form 990) (2013)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II)							
(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
BETHEX FEDERAL CREDIT UNION 20 EAST 179TH STREET BRONX, NY 10453	13-3083365	501C14	100,125.	0.	FMV - CASH		CREATE JOBS FOR USA FUND
ACCION CHICAGO 1436 RANDOLPH STREET, SUITE 300 CHICAGO, IL 60607	36-3966573	501C3	20,025.	0.	FMV - CASH		CREATE JOBS FOR USA FUND
COMMUNITY ASSETS FOR PEOPLE LLC 5499 HIGHWAY 10 EAST, SUITE A STEVENS POINT, WI 54482	39-1080897	501C3	43,318.	0.	FMV - CASH		CREATE JOBS FOR USA FUND
ENTERPRISE DEVELOPMENT FUND 5240 KNOWLEDGE PARKWAY ERIE, PA 16510	25-1525572	501C3	20,025.	0.	FMV - CASH		CREATE JOBS FOR USA FUND
MARYLAND CAPITAL ENTERPRISE 144 EAST MAIN STREET SALISBURY, MD 21801	52-2113016	501C3	20,025.	0.	FMV - CASH		CREATE JOBS FOR USA FUND
NEBRASKA ENTERPRISE FUND 330 N. OAKLAND AVENUE OAKLAND, NE 68045	31-1543695	501C3	20,000.	0.	FMV - CASH		CREATE JOBS FOR USA FUND
BUSINESS CENTER FOR NEW AMERICANS 120 BROADWAY, SUITE 230 NEW YORK, NY 10271	81-0584343	501C3	20,025.	0.	FMV - CASH		CREATE JOBS FOR USA FUND
COMMUNITY VENTURES CORPORATION 1450 NORTH BROADWAY LEXINGTON, KY 40505	31-1064807	501C3	66,750.	0.	FMV - CASH		CREATE JOBS FOR USA FUND
OBDC SMALL BUSINESS FINANCE 825 WASHINGTON STREET, SUITE 200 OAKLAND, CA 94607	94-2548556	501C3	20,025.	0.	FMV - CASH		CREATE JOBS FOR USA FUND

Schedule I (Form 990)

Part IV Supplemental Information

THE COMMUNITY BUSINESSES FINANCED AND ON JOB CREATED AND MAINTAINED ON A
QUARTERLY BASIS.

**SCHEDULE J
(Form 990)**

Department of the Treasury
Internal Revenue Service

Compensation Information

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

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

▶ Attach to Form 990. ▶ See separate instructions.

▶ Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990

OMB No 1545-0047

2013

Open to Public
Inspection

Name of the organization

OPPORTUNITY FINANCE NETWORK

Employer identification number
20-5189202

Part I Questions Regarding Compensation

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

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

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

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

3 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

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

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

- a** Receive a severance payment or change-of-control payment?
- b** Participate in, or receive payment from, a supplemental nonqualified retirement plan?
- c** Participate in, or receive payment from, an equity-based compensation arrangement?
- If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III

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

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

- a** The organization?
- b** Any related organization?
- If "Yes" to line 5a or 5b, describe in Part III

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

- a** The organization?
- b** Any related organization?
- If "Yes" to line 6a or 6b, describe in Part III

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

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

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

Yes No

1b

2

4a

4b

4c

5a

5b

6a

6b

7

8

9

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

Schedule J (Form 990) 2013

Part III	Supplemental Information
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Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

[illegible]

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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.

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2013

Open to Public
Inspection

Name of the organization

OPPORTUNITY FINANCE NETWORK

Employer identification number
20-5189202

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

OFN EXISTS TO ALIGN CAPITAL WITH SOCIAL, ECONOMIC, AND
POLITICAL JUSTICE. OFN BELIEVES IN OPPORTUNITY - FOR ALL. OFN'S MISSION
IS TO LEAD CDFIS AND THEIR PARTNERS TO ENSURE THAT LOW-INCOME,
LOW-WEALTH, AND OTHER DISADVANTAGED PEOPLE AND COMMUNITIES HAVE ACCESS
TO AFFORDABLE, RESPONSIBLE FINANCIAL PRODUCTS AND SERVICES. WHEN
CAPITAL AND JUSTICE ARE ALIGNED, ALL PEOPLE WILL HAVE THE RESOURCES AND
OPPORTUNITIES TO ACT IN THE BEST INTERESTS OF THEIR COMMUNITIES,
THEMSELVES, AND FUTURE GENERATIONS. OFN IS A NATIONAL MEMBERSHIP
ORGANIZATION OF MORE THAN 240 COMMUNITY DEVELOPMENT FINANCIAL
INSTITUTIONS (CDFIS). THROUGH ITS NETWORK OF MEMBERS, OFN INVESTS IN
SMALL BUSINESSES, QUALITY AFFORDABLE HOUSING, CHILDCARE, AND COMMUNITY
FACILITIES IN ECONOMICALLY DISADVANTAGED URBAN, RURAL, AND NATIVE
AMERICAN COMMUNITIES ACROSS ALL 50 STATES. OFN'S PROGRAM AND SERVICES
INCLUDES FINANCIAL PRODUCTS AND SERVICES FOR CDFIS, TRAINING AND
CONSULTING SERVICES FOR THE INDUSTRY, AND POLICY WORK ON BEHALF OF THE
INDUSTRY. (WWW.OFN.ORG)

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

OFN EXISTS TO ALIGN CAPITAL WITH SOCIAL, ECONOMIC, AND
POLITICAL JUSTICE. OFN BELIEVES IN OPPORTUNITY - FOR ALL. OFN'S MISSION
IS TO LEAD CDFIS AND THEIR PARTNERS TO ENSURE THAT LOW-INCOME,
LOW-WEALTH, AND OTHER DISADVANTAGED PEOPLE AND COMMUNITIES HAVE ACCESS
TO AFFORDABLE, RESPONSIBLE FINANCIAL PRODUCTS AND SERVICES. WHEN
CAPITAL AND JUSTICE ARE ALIGNED, ALL PEOPLE WILL HAVE THE RESOURCES AND

Name of the organization

OPPORTUNITY FINANCE NETWORK

Employer identification number

20-5189202

OPPORTUNITIES TO ACT IN THE BEST INTERESTS OF THEIR COMMUNITIES, THEMSELVES, AND FUTURE GENERATIONS. OFN IS A NATIONAL MEMBERSHIP ORGANIZATION OF MORE THAN 240 COMMUNITY DEVELOPMENT FINANCIAL INSTITUTIONS (CDFIS). THROUGH ITS NETWORK OF MEMBERS, OFN INVESTS IN SMALL BUSINESSES, QUALITY AFFORDABLE HOUSING, CHILDCARE, AND COMMUNITY FACILITIES IN ECONOMICALLY DISADVANTAGED URBAN, RURAL, AND NATIVE AMERICAN COMMUNITIES ACROSS ALL 50 STATES. OFN'S PROGRAM AND SERVICES INCLUDES FINANCIAL PRODUCTS AND SERVICES FOR CDFIS, TRAINING AND CONSULTING SERVICES FOR THE INDUSTRY, AND POLICY WORK ON BEHALF OF THE INDUSTRY. (WWW.OFN.ORG)

FORM 990, PART III, LINE 2, NEW PROGRAM SERVICES:

EXPLANATION: AS OF JANUARY 2012, THE CDFI ASSESSMENT AND RATINGS SYSTEM, INC. (CARS, INC.) BECAME A SEPARATE INDEPENDENT LEGAL ENTITY (NOW NAMED AERIS). CARS, INC. APPLIED FOR AND ULTIMATELY RECEIVED EXEMPTION FROM INCOME TAXES UNDER IRS SECTION 501(C)(3). DURING THE INTERIM IN WHICH CARS, INC. WAS AWAITING TAX EXEMPT STATUS, CARS, INC. ENTERED INTO A FISCAL AGENCY AGREEMENT WITH OFN UNDER WHICH OFN ACTED AS AGENT TO RECEIVE AND PASS-THROUGH CERTAIN GRANTS TO CARS, INC. IN ORDER TO MEET THE REQUIREMENTS OF THE GRANTORS. THIS FISCAL AGENCY AGREEMENT WAS TERMINATED UPON FINAL IRS CONFIRMATION OF TAX EXEMPT STATUS IN JULY 2013.

IN 2013, OFN FORMED THE FOLLOWING FIVE ENTITIES TO RECEIVE AND MANAGE NEW ALLOCATIONS UNDER THE NEW MARKETS TAX CREDIT PROGRAM (NMTC) OF THE U.S. DEPARTMENT OF TREASURY: OPPORTUNITY FUND I, LP, OPPORTUNITY FUND II, LP, OPPORTUNITY FUND III, LP, OPPORTUNITY FUND IV, LP, AND

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OPPORTUNITY FUND V, LP. NCCA GENERAL PARTNER, LLC SERVES AS THE
 GENERAL PARTNER FOR THESE FIVE NEW ENTITIES. IN DECEMBER 2013, OFN
 APPLIED FOR AND SUBSEQUENTLY RECEIVED COMMUNITY DEVELOPMENT ENTITY
 (CDE) CERTIFICATION FOR ALL FIVE NEWLY-FORMED ENTITIES FROM THE
 COMMUNITY DEVELOPMENT FINANCIAL INSTITUTIONS FUND (THE CDFI FUND) OF
 THE UNITED STATES DEPARTMENT OF THE TREASURY. AS OF DECEMBER 31, 2013,
 THE FIVE ENTITIES WERE NOT YET CAPITALIZED AND NOT YET ACTIVE.

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

PUBLIC POLICY: PUBLIC POLICY INCLUDES OFN'S PUBLIC EDUCATION, ADVOCACY,
 AND POLICY DEVELOPMENT WORK ON BEHALF OF CDFIS AND THE OPPORTUNITY
 FINANCE INDUSTRY TO INCREASE THE AMOUNT OF CAPITAL AND OTHER RESOURCES
 AVAILABLE TO CDFIS.

EXPENSES \$ 932,466. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.

STRATEGIC INITIATIVES: STRATEGIC INITIATIVES INCLUDES OFN'S
 CROSS-FUNCTIONAL HIGH IMPACT INITIATIVES THAT BENEFIT THE CDFI INDUSTRY
 WITH CAPITAL AND OTHER RESOURCES. IN 2013 AND 2012, THIS INCLUDES THE
 NEXT AWARDS, PERFORMANCE COUNTS (AN INDUSTRY-LED FINANCIAL REPORTING
 BEST PRACTICES INITIATIVE), INDUSTRY-WIDE TALENT DEVELOPMENT
 INITIATIVES, AND THE CREATE JOBS FOR USA FUND.

EXPENSES \$ 724,153. INCLUDING GRANTS OF \$ 366,966. REVENUE \$ 110,438.

STRATEGIC COMMUNICATIONS: STRATEGIC COMMUNICATIONS INCLUDES OFN'S WORK
 TO RAISE AWARENESS ABOUT AND CREATE A BROAD BASE OF SUPPORT FOR CDFIS
 AND THE PEOPLE AND COMMUNITIES THEY SERVE.

EXPENSES \$ 1,023,187. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.

Name of the organization	OPPORTUNITY FINANCE NETWORK	Employer identification number 20-5189202
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CARS - THE CDFI ASSESSMENT AND RATINGS SYSTEM IS THE ONLY RATINGS SYSTEM TO PROVIDE A COMPREHENSIVE, THIRD-PARTY ASSESSMENT OF BOTH A CDFI'S IMPACT PERFORMANCE AND FINANCIAL STRENGTH AND PERFORMANCE. CARS(TM) OPERATED AS A DISTINCT INDEPENDENT PROGRAM WITHIN OFN FROM 2004-2011. AS OF JANUARY 2012, THE CDFI ASSESSMENT AND RATINGS SYSTEMS, INC. (CARS, INC.) BECAME A SEPARATE INDEPENDENT LEGAL ENTITY. CARS, INC. APPLIED FOR AND ULTIMATELY RECEIVED EXEMPTION FROM INCOME TAXES UNDER IRC SECTION 501(C)(3). DURING THE INTERIM IN WHICH CARS, INC. WAS AWAITING TAX EXEMPT STATUS, CARS, INC. ENTERED INTO A FISCAL AGENCY AGREEMENT WITH OFN UNDER WHICH OFN ACTED AS AGENT TO RECEIVE AND PASS-THROUGH CERTAIN GRANTS TO CARS, INC. IN ORDER TO MEET THE REQUIREMENTS OF THE GRANTORS. THIS FISCAL AGENCY AGREEMENT WAS TERMINATED UPON FINAL IRS CONFIRMATION OF TAX EXEMPT STATUS IN JULY 2013.

EXPENSES \$ 1,300,138. INCLUDING GRANTS OF \$ 560,000. REVENUE \$ 0.

FORM 990, PART VI, SECTION A, LINE 6:

PER OFN'S BYLAWS, THERE IS ONE CLASS OF MEMBERSHIP AVAILABLE TO PRIVATE, NON-GOVERNMENTAL, MISSION-DRIVEN FINANCIAL INSTITUTIONS THAT MEET THE QUALIFICATIONS FOR MEMBERSHIP. EACH MEMBER IS ENTITLED TO BE REPRESENTED AT ANY MEETING OF THE MEMBERS BY UP TO TWO DELEGATES, WHO SHALL BE EITHER AN EMPLOYEE OF OR A BOARD MEMBER OF THE MEMBER. THE PRESENCE IN PERSON OF DELEGATES REPRESENTING AT LEAST ONE-THIRD OF THE MEMBERS CONSTITUTES A QUORUM FOR THE TRANSACTION OF BUSINESS. WHEN A QUORUM IS PRESENT AT ANY MEETING, THE MAJORITY OF THE VOTES PRESENT DECIDES ANY QUESTION BROUGHT BEFORE THE MEETING. EACH MEMBER IS ENTITLED TO TWO VOTES ON EACH MATTER SUBMITTED TO A VOTE OF THE MEMBERS. ALL VOTING, EXCEPT ELECTIONS FOR DIRECTORS WHICH IS BY WRITTEN BALLOT, MAY BE BY VOICE VOTE OR

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BALLOT. AT LEAST TWO-THIRDS OF THE DIRECTORS ARE ELECTED BY THE MEMBERS. UP TO ONE-THIRD OF THE DIRECTORS ARE APPOINTED BY THE BOARD OF DIRECTORS. NOMINATIONS FOR CANDIDATES FOR DIRECTOR ARE MADE BY A WRITTEN NOTICE TO THE NOMINATING COMMITTEE AND MUST BE ENDORSED BY NOT LESS THAN TWO (2) MEMBERS AND DELIVERED AT LEAST SIXTY (60) DAYS BEFORE THE ELECTION. ALL NOMINATIONS SO MADE BY MEMBERS ARE PRESENTED TO THE MEMBERSHIP FOR CONSIDERATION.

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

FORM 990, PART VI, SECTION A, LINE 7A:

PER OFN'S BYLAWS, THERE IS ONE CLASS OF MEMBERSHIP AVAILABLE TO PRIVATE, NON-GOVERNMENTAL, MISSION-DRIVEN FINANCIAL INSTITUTIONS THAT MEET THE QUALIFICATIONS FOR MEMBERSHIP. EACH MEMBER IS ENTITLED TO BE REPRESENTED AT ANY MEETING OF THE MEMBERS BY UP TO TWO DELEGATES, WHO SHALL BE EITHER AN EMPLOYEE OF OR A BOARD MEMBER OF THE MEMBER. THE PRESENCE IN PERSON OF DELEGATES REPRESENTING AT LEAST ONE-THIRD OF THE MEMBERS CONSTITUTES A QUORUM FOR THE TRANSACTION OF BUSINESS. WHEN A QUORUM IS PRESENT AT ANY MEETING, THE MAJORITY OF THE VOTES PRESENT DECIDES ANY QUESTION BROUGHT BEFORE THE MEETING. EACH MEMBER IS ENTITLED TO TWO VOTES ON EACH MATTER SUBMITTED TO A VOTE OF THE MEMBERS. ALL VOTING, EXCEPT ELECTIONS FOR DIRECTORS WHICH IS BY WRITTEN BALLOT, MAY BE BY VOICE VOTE OR BALLOT. AT LEAST TWO-THIRDS OF THE DIRECTORS ARE ELECTED BY THE MEMBERS. UP TO ONE-THIRD OF THE DIRECTORS ARE APPOINTED BY THE BOARD OF DIRECTORS. NOMINATIONS FOR CANDIDATES FOR DIRECTOR ARE MADE BY A WRITTEN NOTICE TO THE NOMINATING COMMITTEE AND MUST BE ENDORSED BY NOT LESS THAN TWO (2) MEMBERS

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AND DELIVERED AT LEAST SIXTY (60) DAYS BEFORE THE ELECTION. ALL
NOMINATIONS SO MADE BY MEMBERS ARE PRESENTED TO THE MEMBERSHIP FOR
CONSIDERATION.

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

FORM 990, PART VI, SECTION A, LINE 7B:

PER OFN'S BYLAWS, THERE IS ONE CLASS OF MEMBERSHIP AVAILABLE
TO PRIVATE, NON-GOVERNMENTAL, MISSION-DRIVEN FINANCIAL INSTITUTIONS THAT
MEET THE QUALIFICATIONS FOR MEMBERSHIP. EACH MEMBER IS ENTITLED TO BE
REPRESENTED AT ANY MEETING OF THE MEMBERS BY UP TO TWO DELEGATES, WHO SHALL
BE EITHER AN EMPLOYEE OF OR A BOARD MEMBER OF THE MEMBER. THE PRESENCE IN
PERSON OF DELEGATES REPRESENTING AT LEAST ONE-THIRD OF THE MEMBERS
CONSTITUTES A QUORUM FOR THE TRANSACTION OF BUSINESS. WHEN A QUORUM IS
PRESENT AT ANY MEETING, THE MAJORITY OF THE VOTES PRESENT DECIDES ANY
QUESTION BROUGHT BEFORE THE MEETING. EACH MEMBER IS ENTITLED TO TWO VOTES
ON EACH MATTER SUBMITTED TO A VOTE OF THE MEMBERS. ALL VOTING, EXCEPT
ELECTIONS FOR DIRECTORS WHICH IS BY WRITTEN BALLOT, MAY BE BY VOICE VOTE OR
BALLOT. AT LEAST TWO-THIRDS OF THE DIRECTORS ARE ELECTED BY THE MEMBERS.
UP TO ONE-THIRD OF THE DIRECTORS ARE APPOINTED BY THE BOARD OF DIRECTORS.
NOMINATIONS FOR CANDIDATES FOR DIRECTOR ARE MADE BY A WRITTEN NOTICE TO THE
NOMINATING COMMITTEE AND MUST BE ENDORSED BY NOT LESS THAN TWO (2) MEMBERS
AND DELIVERED AT LEAST SIXTY (60) DAYS BEFORE THE ELECTION. ALL
NOMINATIONS SO MADE BY MEMBERS ARE PRESENTED TO THE MEMBERSHIP FOR
CONSIDERATION.

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

FORM 990, PART VI, SECTION B, LINE 11:

PRIOR TO FILING THE FORM 990, THE CHIEF FINANCIAL OFFICER AND
 THE VP, ACCOUNTING REVIEW THE FORM FOR ACCURACY AND THEN FORWARD IT TO THE
 PRESIDENT & CEO FOR REVIEW. IN ADDITION, THE ORGANIZATION SENDS AN
 ELECTRONIC COPY OF THE FORM 990 TO ITS BOARD OF DIRECTORS. THIS IS
 PRIMARILY FOR INFORMATIONAL PURPOSES AND TO ALLOW FOR COMMENTS FROM THE
 BOARD, BUT DOES NOT REQUIRE ACTION FROM THE BOARD.

FORM 990, PART VI, SECTION B, LINE 12C:

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

FORM 990, PART VI, SECTION B, LINE 15:

THE COMPENSATION FOR THE PRESIDENT & CEO IS DETERMINED THROUGH
 AN ANNUAL PERFORMANCE REVIEW CONDUCTED BY THE BOARD OF DIRECTORS. THE
 EXECUTIVE & PERSONNEL COMMITTEE OF THE BOARD MANAGES THIS PROCESS BY
 REVIEWING THE PRESIDENT & CEO'S PERFORMANCE AGAINST SET GOALS. THEY USE A
 DOCUMENTED PROCESS OF SELF ASSESSMENT AND PERFORMANCE REVIEW. THIS
 COMMITTEE MEETS TO DEVELOP RECOMMENDATIONS WHICH ARE PRESENTED TO THE FULL

Name of the organization

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BOARD FOR DECISION. THE FULL BOARD CONDUCTS AN EXECUTIVE SESSION WITH THE PRESIDENT & CEO TO DISCUSS HIS PERFORMANCE REVIEW AND COMPENSATION ACTION, AND TO DETERMINE GOALS FOR THE FOLLOWING YEAR.

THE EXECUTIVE & PERSONNEL COMMITTEE AND THE BOARD OF DIRECTORS CONSISTS OF INDUSTRY PEERS WHO ARE WELL ACQUAINTED AND UP-TO-DATE ON COMPENSATION COMPARABILITY IN THE INDUSTRY. THEY MAY FROM TIME TO TIME SEEK CONFIRMATION OF INDUSTRY DATA AS THEY DEEM APPROPRIATE.

FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990:

PA, AK, AL, AR, AZ, CA, CO, CT, DC, FL, GA, HI, IL, KS, KY, MA, MD, ME, MI, MS, MN, MO, NC, ND, NJ
NH, NM, NY, OH, OK, OR, RI, SC, TN, UT, VA, WA, WI, WV

FORM 990, PART VI, SECTION C, LINE 19:

THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST.

FORM 990, PART IX, LINE 11G, OTHER FEES:

OTHER CONTRACTORS:

PROGRAM SERVICE EXPENSES	148,029.
MANAGEMENT AND GENERAL EXPENSES	163.
FUNDRAISING EXPENSES	194.
TOTAL EXPENSES	148,386.

PAYROLL SERVICES:

PROGRAM SERVICE EXPENSES	11,264.
MANAGEMENT AND GENERAL EXPENSES	1,749.

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FUNDRAISING EXPENSES	791.
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TOTAL EXPENSES	13,804.
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OTHER PROGRAM CONTRACTS:

PROGRAM SERVICE EXPENSES	1,054,846.
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MANAGEMENT AND GENERAL EXPENSES	9,460.
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FUNDRAISING EXPENSES	15,649.
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TOTAL EXPENSES	1,079,955.
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TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A	1,242,145.
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FORM 990, PART XII, LINE 2C:

FORM 990, PART XII, LINE 2C: THE PROCESS HAS NOT CHANGED

FROM THE PRIOR YEAR.

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

► Attach to Form 990.

► Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990.

2013

Open to Public Inspection

Name of the organization

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OPPORTUNITY FINANCE NETWORK

Part I Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33

[illegible]

Part II Identification of Related Tax-Exempt Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year

[illegible]

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

Schedule R (Form 990) 2013

Part V Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36**Note.** Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity

b Gift, grant, or capital contribution to related organization(s)

c Gift, grant, or capital contribution from related organization(s)

d Loans or loan guarantees to or for related organization(s)

e Loans or loan guarantees by related organization(s)

f Dividends from related organization(s)

g Sale of assets to related organization(s)

h Purchase of assets from related organization(s)

i Exchange of assets with related organization(s)

j Lease of facilities, equipment, or other assets to related organization(s)

k Lease of facilities, equipment, or other assets from related organization(s)

l Performance of services or membership or fundraising solicitations for related organization(s)

m Performance of services or membership or fundraising solicitations by related organization(s)

n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)

o Sharing of paid employees with related organization(s)

p Reimbursement paid to related organization(s) for expenses

q Reimbursement paid by related organization(s) for expenses

r Other transfer of cash or property to related organization(s)

s Other transfer of cash or property from related organization(s)

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved	Yes	No
(1) NCCA GENERAL PARTNER, LLC	L	37,381.CASH			
(2)					
(3)					
(4)					
(5)					
(6)					
53					

Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R (see instructions)

Provide additional information for responses to questions on Schedule W (see instructions).

Department of the Treasury
Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

OMB No 1545-1709

► File a separate application for each return.

► Information about Form 8868 and its instructions is at www.irs.gov/form8868.

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box ☒
- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form)

Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868

Electronic filing (e-file) . You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/efile and click on *e-file for Charities & Nonprofits*.

Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed).

A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete

Part I only

All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Type or print	Name of exempt organization or other filer, see instructions	Enter filer's identifying number
	OPPORTUNITY FINANCE NETWORK	Employer identification number (EIN) or 20-5189202
File by the due date for filing your return. See instructions	Number, street, and room or suite no. If a P.O. box, see instructions 620 CHESTNUT STREET, NO. 572	Social security number (SSN)
	City, town or post office, state, and ZIP code. For a foreign address, see instructions PHILADELPHIA, PA 19106	

Enter the Return code for the return that this application is for (file a separate application for each return)

01

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 4720 (individual)	03	Form 4720 (other than individual)	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

LAURIE CURRAN

- The books are in the care of ► **620 CHESTNUT STREET - PHILADELPHIA, PA 19106**

Telephone No ► **215-320-4317**

Fax No ►

- If the organization does not have an office or place of business in the United States, check this box ☐

- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____ If this is for the whole group, check this box ☐ If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension is for

- 1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until **AUGUST 15, 2014**, to file the exempt organization return for the organization named above. The extension is for the organization's return for:
► ☒ calendar year **2013** or
► ☐ tax year beginning _____, and ending _____

- 2 If the tax year entered in line 1 is for less than 12 months, check reason ☐ Initial return ☐ Final return
☐ Change in accounting period

3a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$	0.
b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$	0.
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$	0.

Caution. If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

- If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II and check this box ☒ **X**

Note. Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868.

- If you are filing for an Automatic 3-Month Extension, complete only Part I (on page 1).

Part II Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed):

Enter filer's identifying number, see instructions	
Type or print	Name of exempt organization or other filer, see instructions.
File by the due date for filing your return. See instructions.	Employer identification number (EIN) or
	20-5189202
	Number, street, and room or suite no. If a P.O. box, see instructions
	620 CHESTNUT STREET, NO. 572
	Social security number (SSN)
	City, town or post office, state, and ZIP code. For a foreign address, see instructions
	PHILADELPHIA, PA 19106

Enter the Return code for the return that this application is for (file a separate application for each return)

01

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01		
Form 990-BL	02	Form 1041-A	08
Form 4720 (individual)	03	Form 4720 (other than individual)	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.

LAURIE CURRAN

- The books are in the care of **620 CHESTNUT STREET - PHILADELPHIA, PA 19106**
Telephone No. **215-320-4317** Fax No. _____
- If the organization does not have an office or place of business in the United States, check this box ☐
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____. If this is for the whole group, check this box ☐. If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension is for

- 4 I request an additional 3-month extension of time until **NOVEMBER 17, 2014.**
- 5 For calendar year **2013**, or other tax year beginning _____, and ending _____.
- 6 If the tax year entered in line 5 is for less than 12 months, check reason ☐ Initial return ☐ Final return ☐ Change in accounting period
- 7 State in detail why you need the extension **ADDITIONAL TIME IS NEEDED TO FILE A COMPLETE AND ACCURATE RETURN.**

8a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	8a	\$	0.
b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868.	8b	\$	0.
c Balance due. Subtract line 8b from line 8a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	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 **CPA**

Date **8.6.2014**

Form 8868 (Rev. 1-2014)