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Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

► 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

OMB No 1545-0047

Open to Public Inspection

A Fo	r the :	2014 ca	lendar year, or tax year beginning 01-01-2014 , and ending 12-31-2014				
B Ch	eck ıf a	pplicable	C Name of organization NONPROFIT FINANCE FUND		D Employ	yer ider	ntification number
┌ Add	lress ch	nange	NON ROLL LINANCE LOND		13-32	38657	7
┌ Nai	me cha	inge	Doing business as				
☐ Init	ıal retu	ırn		-			
, Fin			Number and street (or P O box if mail is not delivered to street address) Room/suite		E Telepho	ne num	ber
		mınated	70 WEST 36TH STREET		(212)	868-6	710
┌ Am	ended	return	City or town, state or province, country, and ZIP or foreign postal code				
Г Арі	olication	n pending	NEW YORK, NY 10018		G Gross re	eceipts \$	20,390,255
			F Name and address of principal officer	(a) 7 U			•
			ANTONY BUGG-LEVINE	l(a) Is this subor	s a group dinates?	return	TYes ▼ No
			70 WEST 36TH STREET				
			NEWYORK,NY 10018	l(b) Are al		nates	Γ Y es Γ N o
—— та	x-exem	npt status	s	ınclud If "No		a list	(see instructions)
J W	ebsite	e: 🕨 W	WW NONPROFITFINANCEFUND ORG	l(c) Group	p exempti	ion nur	mber 🟲
K For	n of or	ganızatıo	n	L Year of for	mation 198	84 M	State of legal domicile NY
Pa	rt I	Sun	nmary				
	1	Briefly (describe the organization's mission or most significant activities				
		<u>SUPPO</u>	RTS MISSION-DRIVEN ORGANIZATIONS WITH FINANCING, ADVICE A	AND KNOV	WLEDGE		
Š	-						
Ē							
Ę.	2	Check t	this box 🔭 if the organization discontinued its operations or disposed of m	ore than 2!	5% of its	net as	sets
Governance							
25	3	Number	r of voting members of the governing body (Part VI, line 1a)			3	14
<u>e</u>	4	Number	r of independent voting members of the governing body (Part VI, line 1b) $$.		•	4	13
Activities &	5	Total nu	umber of individuals employed in calendar year 2014 (Part V, line 2a)			5	83
돌 작	6	Total nu	umber of volunteers (estimate if necessary)			6	14
			nrelated business revenue from Part VIII, column (C), line 12			7a	0
	Ь	Net unr	elated business taxable income from Form 990-T, line 34		•	7b	0
					r Year		Current Year
a.	8	Conti	ributions and grants (Part VIII, line 1h)		26,565,4	152	12,771,624
70	9	Progr	ram service revenue (Part VIII, line 2g)		8,557,7	751	7,602,942
Ę	-	_					
heven	10	Inves	stment income (Part VIII, column (A), lines 3, 4, and 7d)		6,1	.66	8,444
Rayenue	_	Inves Othe	r revenue (Part VIII, column (A), lines 3, 4, and 7d) rrevenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)			.66	
Rayent	10	Inves Othe Total	r revenue (Part VIII, column (A), lines 3, 4, and 7d) revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) revenue—add lines 8 through 11 (must equal Part VIII, column (A), line		6,1 1,4	.66	8,444 7,245
Reyent	10 11 12	Inves Othe Total 12)	r revenue (Part VIII, column (A), lines 3, 4, and 7d) revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) revenue—add lines 8 through 11 (must equal Part VIII, column (A), line		6,1 1,4 35,130,8	.66 177 346	8,444 7,245 20,390,255
Revent	10 11 12	Inves Othe Total 12) Grant	stment income (Part VIII, column (A), lines 3, 4, and 7d) r revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) revenue—add lines 8 through 11 (must equal Part VIII, column (A), line		6,1 1,4	.66 177 346	8,444 7,245 20,390,255 23,409,983
Revent	10 11 12 13 14	Investor Othe Total 12) Grant Bene	r revenue (Part VIII, column (A), lines 3, 4, and 7d) r revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) revenue—add lines 8 through 11 (must equal Part VIII, column (A), line		6,1 1,4 35,130,8 19,983,3	.66 177 346 383 0	8,444 7,245 20,390,255 23,409,983 0
	10 11 12	Investor Othe Total 12) Grant Bene	revenue (Part VIII, column (A), lines 3, 4, and 7d) revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) revenue—add lines 8 through 11 (must equal Part VIII, column (A), line		6,1 1,4 35,130,8	.66 177 346 383 0	8,444 7,245 20,390,255 23,409,983 0
	10 11 12 13 14	Othe Total 12) Grant Bene Salar 5-10	revenue (Part VIII, column (A), lines 3, 4, and 7d) revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) revenue—add lines 8 through 11 (must equal Part VIII, column (A), line		6,1 1,4 35,130,8 19,983,3	.66 177 346 383 0	8,444 7,245 20,390,255 23,409,983 0 7,310,028
	10 11 12 13 14 15	Othe Total 12) Grant Bene Salar 5-10 Profe	stment income (Part VIII, column (A), lines 3, 4, and 7d) revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) revenue—add lines 8 through 11 (must equal Part VIII, column (A), line		6,1 1,4 35,130,8 19,983,3	.666 477 346 383 0	8,444 7,245 20,390,255 23,409,983 0 7,310,028
Expenses Revenu	10 11 12 13 14 15 16a b	Investory Othe Total 12) Grant Bene Salar 5-10 Profe	stment income (Part VIII, column (A), lines 3, 4, and 7d) revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) revenue—add lines 8 through 11 (must equal Part VIII, column (A), line ts and similar amounts paid (Part IX, column (A), lines 1–3)		6,1 1,4 35,130,8 19,983,3 7,702,6	.66 177 346 383 0 588	8,444 7,245 20,390,255 23,409,983 0 7,310,028
	10 11 12 13 14 15 16a b	Investory Other Total 12) Grant Bene Salar 5-10 Profe Total f	stment income (Part VIII, column (A), lines 3, 4, and 7d) revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) revenue—add lines 8 through 11 (must equal Part VIII, column (A), line		6,1 1,4 35,130,8 19,983,3 7,702,6	.666 .777 .346 .383 .0 .588 .0	8,444 7,245 20,390,255 23,409,983 0 7,310,028 0
	10 11 12 13 14 15 16a b 17	Investory Other Total for	stment income (Part VIII, column (A), lines 3, 4, and 7d) revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) revenue—add lines 8 through 11 (must equal Part VIII, column (A), line ts and similar amounts paid (Part IX, column (A), lines 1–3) fits paid to or for members (Part IX, column (A), line 4)		6,1 1,4 35,130,8 19,983,3 7,702,6 6,559,2 34,245,3	.666 377 346 383 0 588 0	8,444 7,245 20,390,255 23,409,983 0 7,310,028 0 4,508,058 35,228,069
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Expenses	10 11 12 13 14 15 16a b 17 18 19	Investory Other Total frostal Reverse Total	stment income (Part VIII, column (A), lines 3, 4, and 7d) revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) revenue—add lines 8 through 11 (must equal Part VIII, column (A), line ts and similar amounts paid (Part IX, column (A), lines 1–3) fits paid to or for members (Part IX, column (A), line 4)	Beginning Ye	6,1 1,4 35,130,8 19,983,3 7,702,6 6,559,2 34,245,3 885,5 of Currer ear	.666 .777 .346 .383 .0 .588 .0 .230 .301 .545 .nt	8,444 7,245 20,390,255 23,409,983 0 7,310,028 0 4,508,058 35,228,069 -14,837,814 End of Year 74,791,103
	10 11 12 13 14 15 16a b 17 18 19	Investory Othe Total 12) Grant Bene Salar 5-10 Profe Total for Contract Reversion Total Total Total Total	stment income (Part VIII, column (A), lines 3, 4, and 7d)	Beginning Ye	6,1 1,4 35,130,8 19,983,3 7,702,6 6,559,2 34,245,3 885,5 1 of Currer ear	.666 377 346 383 0 588 0 230 301 545 nt	8,444 7,245 20,390,255 23,409,983 0 7,310,028 0 4,508,058 35,228,069 -14,837,814 End of Year 74,791,103 33,311,858
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A hot Assets or	10 11 12 13 14 15 16a b 17 18 19	Investory of the Total 12) Grant Bene Salar 5-10 Profe Total f Othe Total Reve	stment income (Part VIII, column (A), lines 3, 4, and 7d) revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) revenue—add lines 8 through 11 (must equal Part VIII, column (A), line	Beginning Ye 1 g schedule: officer) is b	6,1 1,4 35,130,8 19,983,3 7,702,6 6,559,2 34,245,3 885,5 of Currer ear 00,357,3 44,040,3 56,317,0 s and star	.666 .777 .346 .383 .0 .588 .0 .301 .545 	8,444 7,245 20,390,255 23,409,983 0 7,310,028 0 4,508,058 35,228,069 -14,837,814 End of Year 74,791,103 33,311,858 41,479,245
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Par	t III	Statement of Program S Check if Schedule O contains	Service Accomp a response or note t	llishments :o any line in this Part I	III	স
1	Brief	ly describe the organization's m	ission			
INVE HELF	STME PING N	IT FINANCE FUND (NFF) UNLO NTS, STRATEGIC ADVICE, AN NONPROFITS OPTIMIZE THEI ROVE PEOPLES' LIVES	ND ACCESSIBLE IN	SIGHTS WE WORK TO	O CREATE A MORE JUST AN	D VIBRANT SOCIETY BY
2		ne organization undertake any si rior Form 990 or 990-EZ? .			which were not listed on	
	If "Y €	es," describe these new services	on Schedule O			
3	servi	ne organization cease conductin ces?			nducts, any program	
4	exper	ribe the organization's program s nses Section 501(c)(3) and 50 otal expenses, and revenue, if ar	1 (c)(4) organızatıon	s are required to report		
4a	(Cod	e) (Expenses \$	33,213,169	ıncludıng grants of \$	23,409,983) (Revenue \$	7,602,942)
	ORGA FINAL TRAN NONE RESC THIS IDEN WITH SECT NONE ADVI:	NATIONAL COMMUNITY DEVELOPMENT ANIZATIONS THAT SERVE LOW-INCOME NCE \$53 3 MILLION IN LOANS TO EDUC ISFORMATIONAL IMPACT IN ADDITION, PROFITS IN ALL SECTORS IN THE PREVOUNCES, STRENGTHENING THEIR ABILT BY HELPING THEM TO ESTABLISH AN UTIFY AND DETERMINE HOW TO FILL CAST THAT INCLUDED 5,019 TOTAL RESPONDED THAT INCLUDED 5,019 TOTAL RESPONDIT SECTOR AND ALSO SHARED OUT OF THE SECTOR AND ALSO SHARED OUT OF THE SERVICE PROVIDERS, GOVERNMENT OF THE SERVICE PROVIDERS, GOVERNMENT OF THE SERVICE SORG) TO EDUCATE AND SECTION OF THE SERVICE SORG OF THE SERVICE SORG OF THE SERVICE PROVIDERS, GOVERNMENT OF THE SERVICE SORG OF THE S	PEOPLE AND COMMUNITATIONAL INSTITUTIONS, WE ARE A NATIONAL LE ITOUS YEAR WE DEVELOP TY TO ADAPT TO EVER-C NDERSTANDING OF THE PITALIZATION GAPS, ANI E ABOUT SOCIAL SECTOI ONDENTS (NFF ORG/SU R INSIGHTS ABOUT NON ITS, AND OTHERS EXPLO	TIES IN 2014, NFF CLOSED HEALTH CENTERS, HUMAN ADER IN PROVIDING STRATION ONE ONE-ON-ONE RELATION: HANGING CONDITIONS AND CONDUCT LONG-TERM PLAR FINANCE IN 2014, WE CORVEY) WE PUBLISHED REPEROFIT FINANCIAL HEALTH RING PAY FOR SUCCESS MO	13 NEW LOANS TOTALING \$19 1 MILL SERVICES NONPROFITS, AND OTHER EGIC ADVICE AND CUSTOMIZED TRAISHIPS WITH INDIVIDUAL NONPROFITS PROVIDE MUCH-NEEDED SERVICES ND BUSINESS MODELS, ANALYZE THE ANNING FINALLY, WE PERFORM RESINDUCTED A NATIONAL SURVEY OF TORTS, ARTICLES, AND BLOGS ON THE THROUGH DOZENS OF SPEAKING ENCODELS AND MAINTAINED A PAY FOR SURVICES AND MAINTAINED A PAY FOR SU	JON AND CONTINUED TO ORGANIZATIONS THAT CREATE INING TO HUNDREDS OF STO HELP THEM OPTIMIZE THE TO THEIR CLIENTS WE DID IR STRATEGIC OPTIONS, EARCH AND PUBLISH WIDELY HE STATE OF THE NONPROFIT E EVOLVING STATE OF THE GAGEMENTS WE ALSO SUCCESS WEBSITE
4b	(Cod	e) (Expenses \$		ıncludıng grants of \$) (Revenue \$)
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	(Cod) (Eyponoon d		including grants of \$) (Devenue d	,
4 c	(Cod	e) (Expenses \$	•	including grants or \$) (Revenue \$)
4d		er program services (Describe ii	•			
		penses \$	including grants o) (Revenue \$)
4e	Tota	ıl program service expenses 🟲 👚	33,213,169	l		

Part IV Checklist of Required Schedule
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			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>	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 📆	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I^{\bullet}	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		N o
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part 1	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV.	9	Yes	
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>	10		No
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			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	Yes	
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? If "Yes," complete Schedule D, Part VII"	11b		No
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? If "Yes," complete Schedule D, Part VIII	11c	Yes	
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? If "Yes," complete Schedule D, Part IX	11d		No
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 🕏	11e		Νo
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)? If "Yes," complete Schedule D, Part X.	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		No
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	Yes	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Νo
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		No
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? If "Yes," complete Schedule F, Parts II and IV	15		No
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</i> "Yes," complete Schedule F, Parts III and IV	16		No
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 $11e^{\gamma}$ If "Yes," complete Schedule G, Part I (see instructions)	17		No
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>	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		N o
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No
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>	23	Yes	
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? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
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? If "Yes," complete Schedule L, Part II	26		No
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>	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV			
		28a		No
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
C	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>	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No
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>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
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>	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Yes	
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	Yes	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note, All Form 990 filers are required to complete Schedule O	38	Yes	

Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response or note to any line in this Part V			<u></u>
1.	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 5	. —	Yes	No
		5		
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable	7		
Ī	gaming (gambling) winnings to prize winners?	1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	3		
ь	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?		l	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За		Νo
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No
ь	If "Yes," enter the name of the foreign country			
_	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Νo
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			
		5с		
	Does the organization have annual gross receipts that are normally greater than $$100,000$, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gift were not tax deductible?	6 b		
7	Organizations that may receive deductible contributions under section 170(c).			
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		No
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	°		Νo
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 a	s		
	required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		
9a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
a	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a		
b	Enter the amount of reserves the organization is required to maintain by the states			
_	In which the organization is licensed to issue qualified health plans			
		_	[[NI s
	Did the organization receive any payments for indoor tanning services during the tax year? If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14a 14b		No
D	in test has noned a committo to report these payments? IT "NO" provide an explanation in Schedille ()	1 14D		

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

oce mediacioner			
Check if Schedule O contains a response or note to any line in this Part VI			

Se	ection 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			
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6		No
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?	7a		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	eveni	ıe Cod	e.)
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		No
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?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14	Yes	
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?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
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 ►CA , IL , NJ , NY , PA , MA , MI
- Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (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, address, and telephone number of the person who possesses the organization's books and records
 - ►CRAIG REIGEL CFO
 - 70 WEST 36TH STREET
 - NEW YORK, NY 10018 (212)868-6710

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

Check 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 vear

- 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, or 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

<u> </u>	,							•	,	
(A) Name and Title	(B) A verage hours per week (list any hours for related organizations below dotted line)	more pers	than on is	one bot	not box h an or/tr	check cynofice cynofice cynofice cynofice Highest compensated	ss er	(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
(1) ANTONY BUGG-LEVINE PRESIDENT/CEO	50 00	x		х				332,162	0	38,329
(2) DAVID VOLLMAYER TREASURER	2 00	х		х				0	0	0
(3) ANDREW B COHN	2 00	х		х				0	0	0
SECRETARY (4) MARIA BLAIR	2 00	х		х				0	0	0
BOARD CHAIR AS OF 3/12/14 (5) ELISABETH C SULLIVAN BOARD CHAIR UNTIL 3/12/14	5 00	х		х				0	0	0
(6) AUDREY CHOI DIRECTOR	2 00	х						0	0	0
(7) TESSIE GUILLERMO DIRECTOR	2 00	х						0	0	0
(8) LISA HALL DIRECTOR	2 00	х						0	0	0
(9) KIMBERLY JOHNSON DIRECTOR	2 00	х						0	0	0
(10) ROBERT S ROBBIN ESQ DIRECTOR	2 00	х						0	0	0
(11) RUTH SALZMAN DIRECTOR	2 00	×						0	0	0
(12) JANET THOMPSON DIRECTOR	2 00	х						0	0	0
(13) JAMES BILDNER DIRECTOR	2 00	х						0	0	0
(14) STEPHEN DEBERRY DIRECTOR	2 00	х						0	0	0
DINECTOR										Form 990 (2014)

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

	(A) Name and Title	(B) A verage hours per week (list any hours	more pers	than on is	one bot	not box thar	chec k, unle n offic rustee	ess er	(D) Reportable compensation from the organization	on compensation amount from related comper from		ated of other isation the
		for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organi and re organiz	lated
(15)	HENRY RAMOS	2 00	x						0	C		
DIREC												
(16)	CRAIG REIGEL	50 00			×				234,182	C		30,515
CFO	NORAH MCVEIGH	2 00 50 00										
						x			230,079	C		49,422
	GING DIR FINANCIAL SRV KRISTIN GIANTRIS	2 50 50 00										
	GING DIRECTOR					X			256,090	C	1	35,594
	JENNIFER TALANSKY	50 00										
	GING DIRECTOR					X			200,711	C		46,998
	anne dyjak	50 00					V		120 563	0		17 200
VP &	CHIEF INVESTMT OFFICER						Х		139,562			17,300
` '	ENNIFER KAWAR	40 00					l _x		121,494	C		37,942
VP &	CHIEF INVESTMT OFFICER	40.00							,			
٠,	Brendan Beir	40 00					x		133,397	C		18,948
	CTOR, NMTC OPERATIONS ANDREA BRISCOE	40 00										
							х		124,924	C	ľ	28,045
	JMAN CAPITAL WILLIAM H PINAKIEWICZ	40 00										
VP BL	ISINESS DEVELOPMENT						X		134,330	C		34,796
			•	<u> </u>							1	
1b	Sub-Total						▶					
c	Total from continuation sheets to Part	VII. Section A		•			. ⊢					
d	Total (add lines 1b and 1c)						▶ ⊨		1,906,931	0		337,889
2	Total number of individuals (including b \$100,000 of reportable compensation				ed a	bove	e) who	rec	eived more than		_	
3	Did the organization list any former offi on line 1a? <i>If "Yes," complete Schedule J</i>	•		e, key •	y em	nplo _j	yee, o	r hıg	ghest compensate	d employee	Yes	No No
4	For any individual listed on line 1a, is the organization and related organizations of individual									om the	Yes	
5	Did any person listed on line 1a receive services rendered to the organization?									ndividual for		No
Se	ection B. Independent Contracto	ors										
1	Complete this table for your five highes compensation from the organization Re	t compensated									s tax vear	
		(A) usiness address					,			(B) on of services	(C Comper)
	Total number of independent contractors \$100,000 of compensation from the orga		not lim	ıted t	o th	iose	listed	dabo	ove) who received	more than		

					Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512-514
1a	Federated camp	paigns 1a					
b	Membership du	es 1b					
c	Fundraising eve	ents 1c					
d	Related organiz	ations 1d					
e	Government grants	s (contributions) 1e	5,775,389				
f			6,996,235				
g		ons included in lines	į	j	į		
h		s 1a-1f		12,771,624			
			Business Code				
2a	INTEREST ON LOAN	NS	900099	4,076,546	4,076,546		
b	PRGM & CONTRAC	T FEES	900099	2,065,572	2,065,572		
c	LOAN AND FINAN	FEES	900099	1,460,824	1,460,824		
d							
е							
f	All other progra	am service revenue					
g	Total. Add lines	s 2a-2f		7,602,942			
3	Investment inc	ome (including dividen	ds, interest,	0 111			8,444
		· · · · · · · · · · · · · · · · · · ·	—	0,444			0,444
-		·	proceeds =				
J	Koyukies I		(II) Personal				
6a	Gross rents	6,000					
b	Less rental	0					
c	Rental income	6,000					
d	, ,	l me or (loss)		6,000			6,000
		(ı) Securities	(II) O ther				
7a	Gross amount from sales of						
	assets other than inventory						
b	Less cost or						
	sales expenses						
c		<u> </u>					
		· ·	· · · · •				
Od	events (not inc	luding 					
		i	events 🛌				
Уa							
b	Less direct ex	penses b					
С	Net income or ((loss) from gaming acti	vities				
10a		owances .					
		a					
			entory				
			-				
11a			900099	1,245			1,245
ь	GELLANEC						
c		-					
	All other revenu	ue					
e			🕨	1 24-			
12	Total reserve	See Instructions .	🗚	1,245			
	f g h 2a b c d e f g 3 4 5 6a b c d 8a b c 9a b c 10a b c d	f All other contributions imiliar amounts not similar amounts not la-1f \$ h Total. Add lines 2a INTEREST ON LOAD b PRGM & CONTRACT c LOAN AND FINAN d	f All other contributions, gifts, grants, and similar amounts not included above g Noncash contributions included in lines 1a-1f \$ h Total. Add lines 1a-1f 2a INTEREST ON LOANS b PRGM & CONTRACT FEES c LOAN AND FINAN FEES d e f All other program service revenue g Total. Add lines 2a-2f 3 Investment income (including dividenand other similar amounts) 4 Income from investment of tax-exempt bond for similar amounts) 5 Royalties	f All other contributions, gifts, grants, and similar amounts not included above g Noncash contributions included in lines la-1f; h Total. Add lines 1a-1f	f All other contributions, gifts, giants, and similar amounts not included above to take the similar amounts not included above to take the similar amounts of the similar amounts of the similar amounts of the sex central to the sex central to the similar amounts of the sex central to the sex centr	## All other contributions, gifts, grants, and small amounts not included above g noncast contributions included in less 1-1f s	All other contributions, orins, grants, and smile animal anima

Part IX Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must comp

section $501(c)(3)$ and $501(c)(4)$ organizations must complete all columns. All other organizations must complete colum
--

	on 501(c)(3) and 501(c)(4) organizations must complete all columns. All				
	Check if Schedule O contains a response or note to any line in this		(B)		<u>l</u> (D)
	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	23,409,983	23,409,983		
2	Grants and other assistance to domestic individuals See Part IV, line 22				
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	1,454,082	1,192,347	189,031	72,704
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	4,561,606	3,736,503	595,908	229,195
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	354,538	290,480	46,264	17,794
9	Other employee benefits	516,438	422,990	67,490	25,958
10	Payroll taxes	423,364	346,851	55,259	21,254
11	Fees for services (non-employees)				
а	Management	508,212	219,836	83,633	204,743
ь	Legal	108,842	103,164	4,081	1,597
С	Accounting	110,766	98,970	8,166	3,630
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 Schedule O)	529,532	469,943	35,385	24,204
12	Advertising and promotion	4,218	3,690	445	83
13	Office expenses	224,318	184,705	 	12,529
14	Information technology	168,951	142,866	17,485	8,600
15	Royalties	,	,	,	•
16	Occupancy	763,000	629,542	94,637	38,821
17	Travel	423,445	-	33,723	46,295
18	Payments of travel or entertainment expenses for any federal, state, or local public officials		3 13, 121	33,123	19,239
19	Conferences, conventions, and meetings	72,051	71,209	75	767
20	Interest	858,522	858,522		
21	Payments to affiliates	,	,		
22	Depreciation, depletion, and amortization	31,388	25,638	3,977	1,773
23	Insurance	54,836	45,698	6,260	2,878
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)	,	,	,	,
а	PROVISION FOR LOAN LOSS	325,394	325,394		
b	STAFF RECRUITING/TRAINI	167,298	149,205	13,384	4,709
С	BAD DEBT EXPENSE	90,019	90,019		
d	DUES & MEMBERSHIPS	32,925	29,229	1,562	2,134
e	All other expenses	34,341	22,958	8,284	3,099
25	Total functional expenses. Add lines 1 through 24e	35,228,069	33,213,169	1,292,133	722,767
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 Sheet

Par	't X	Balance Sheet Check if Schedule O contains a response or note to any line in	this Pa	art X			
					(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing			13,528,240	1	6,174,585
	2	Savings and temporary cash investments			5,708,673	2	6,863,954
	3	Pledges and grants receivable, net			16,839,557	3	7,110,658
	4	Accounts receivable, net			4,339,034	4	3,693,140
	5	Loans and other receivables from current and former officers, of employees, and highest compensated employees. Complete P. Schedule L	art II d	of		5	
ts	6	Loans and other receivables from other disqualified persons (a $4958(f)(1)$), persons described in section $4958(c)(3)(B)$, and and sponsoring organizations of section $501(c)(9)$ voluntary e organizations (see instructions) Complete Part II of Schedule	contrib mploye	outing employers		-	
Assets	_			6			
AS.	7	Notes and loans receivable, net				7	
	8	Inventories for sale or use			11155	8	50.550
	9 10a	Prepaid expenses and deferred charges		1	144,545	9	58,552
	104	Part VI of Schedule D	10a	1,653,965	4		
	b	Less accumulated depreciation	10b	1,604,325	45,249	10c	49,640
	11	Investments—publicly traded securities				11	
	12	Investments—other securities See Part IV, line 11		•	261,357	12	261,357
	13	Investments—program-related See Part IV, line 11	59,347,848	13	50,133,388		
	14	Intangible assets		14			
	15	Other assets See Part IV, line 11	142,869	15	445,829		
	16	Total assets. Add lines 1 through 15 (must equal line 34) .			100,357,372	16	74,791,103
	17	Accounts payable and accrued expenses	737,412	17	814,810		
	18	Grants payable	53,568	18	53,568		
	19	Deferred revenue	53,969	19	56,950		
	20	Tax-exempt bond liabilities				20	
ø	21	Escrow or custodial account liability Complete Part IV of Sch	66,246	21	79,387		
Liabilitie	22	Loans and other payables to current and former officers, direct key employees, highest compensated employees, and disquali					
Эę		persons Complete Part II of Schedule L		22			
	23	Secured mortgages and notes payable to unrelated third partie	42,639,245	23	32,307,143		
	24	Unsecured notes and loans payable to unrelated third parties		24			
	25	Other liabilities (including federal income tax, payables to rela and other liabilities not included on lines 17-24) Complete Pa			_		
		D	489,873	25	0		
	26	Total liabilities. Add lines 17 through 25			44,040,313	26	33,311,858
S)		Organizations that follow SFAS 117 (ASC 958), check here ► lines 27 through 29, and lines 33 and 34.	⊽ and	complete			
ĕ	27	Unrestricted net assets			7,779,580	27	9,103,484
<u>න</u>	28	Temporarily restricted net assets			48,537,479	28	32,375,761
<u> </u>	29	Permanently restricted net assets			10,007,170	29	32,070,701
Ĭ	29	Organizations that do not follow SFAS 117 (ASC 958), check h				29	
or Fund Balance		complete lines 30 through 34.	ICIC F	, and			
	30	Capital stock or trust principal, or current funds				30	
Assets	31	Paid-in or capital surplus, or land, building or equipment fund				31	
455	32	Retained earnings, endowment, accumulated income, or other				32	
Net	33	Total net assets or fund balances			56,317,059	33	41,479,245
Z	34	Total liabilities and net assets/fund balances			100,357,372	34	74,791,103
					, ,		,,

Par	Reconcilliation of Net Assets Check if Schedule O contains a response or note to any line in this Part XI				୮
1	Total revenue (must equal Part VIII, column (A), line 12)				
-	Total revenue (mast equal rate viii, estami (xx), me 12) i i i i i i i i i i i i i i i i	1		20,3	390,255
2	Total expenses (must equal Part IX, column (A), line 25)	2		35,2	228,069
3	Revenue less expenses Subtract line 2 from line 1	3		-14 8	337,814
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			
5	Net unrealized gains (losses) on investments				317,059
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		41,4	179,245
Par	t XII Financial Statements and Reporting	•			
	Check if Schedule O contains a response or note to any line in this Part XII				. 区
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or review a separate basis, consolidated basis, or both	ved or	n		
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a sepa basis, consolidated basis, or both	rate			
	☐ Separate basis ☐ Both consolidated and separate basis				
c	c If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of th 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?	<u> </u>	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the		3b		

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OMB No 1545-0047

SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

Total

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.

Open to Public Inspection

		e organization INANCE FUND					Employer identification number		
NON	KOI II I	INANCETOND					13-3238657		
Pa	rt I	Reason for Publi	c Charity S	tatus (All organiza	tions must co	mplete this p		ons.	
		zation is not a private fo							
1	Γ	A church, convention	of churches, o	r association of churc	hes described i	n section 170(l	o)(1)(A)(i).		
2	\vdash	A school described in	section 170(b)(1)(A)(ii). (Attach S	chedule E)				
3		A hospital or a cooper				tion 170(b)(1)	(A)(iii).		
4	Γ	A medical research or hospital's name, city,	ganızatıon ope	_				i). Enter the	
5	Г	An organization opera	ted for the ber	efit of a college or uni	versity owned o	r operated by a	a governmental unit d	escribed in	
_	•	section 170(b)(1)(A)(iv). (Complete Part II)							
6	Г	A federal, state, or loc			described in se	ection 170(b)(1	I)(A)(v).		
7	<u> </u>	An organization that n						neneral nublic	
•	'	described in section 1				om a governme	incar anne or morn the g	general public	
8	Γ	A community trust des				tII)			
9	Γ	An organization that n	ormally receiv	es (1) more than 331	l/3% of its supp	ort from contri	butions, membership	fees, and gross	
		receipts from activitie	s related to its	s exempt functions—s	ubject to certai	n exceptions, a	ind (2) no more than 3	331/3% of	
		ıts support from gross	ınvestment ır	come and unrelated b	usıness taxable	e income (less	section 511 tax) from	n businesses	
		acquired by the organi	ızatıon after Ju	ine 30, 1975 See sec	tion 509(a)(2).	(Complete Par	rt III)		
10	Γ	An organization organ	ized and opera	ited exclusively to tes	t for public safe	ty See sectio i	າ 509(a)(4).		
11	Γ	An organization organ	ized and opera	ited exclusively for the	e benefit of, to p	erform the fund	ctions of, or to carry o	out the purposes of	
		one or more publicly s							
	_	the box in lines 11a th							
а	ı	Type I. A supporting of supported organization							
		organization You mus				ty of the direct	ors or crustees or the	supporting	
b	\vdash	Type II. A supporting				with its suppo	rted organization(s), l	by having control or	
		management of the su			same persons t	hat control or r	nanage the supported	organization(s) You	
	_	must complete Part IV					16 1 11 1		
С	ı	Type III functionally is supported organization						grated with, its	
d	Г	Type III non-function						ianization(s) that is	
	·	not functionally integr							
	_	(see instructions) Yo							
е	ı	Check this box if the contegrated, or Type III					s a Type I, Type II, T	ype III functionally	
f									
Direction for appointed or garment and appoint									
g		Trovide the following r	mormation ab	out the supported orge	2461011(3)				
	(i)Na	ame of supported	(ii) EIN	(iii) Type of	(iv) Is the org	janization	(v) A mount of	(vi) A mount of	
		organization		organization	listed in your	governing	monetary support	other support (see	
				(described on lines	docume	nt?	(see instructions)	ınstructıons)	
				1-9 above or IRC					
				section (see instructions))					
				,	Yes	No			

instructions

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 (a) 2010 **(b)** 2011 (c) 2012 (d) 2013 (e) 2014 (f) Total in) 🟲 Gifts, grants, contributions, and membership fees received (Do 18,135,734 32,207,197 26,711,927 26,565,452 12,771,624 116,391,934 not include any "unusual grants ") 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 18,135,734 32,207,197 26,711,927 26,565,452 12,771,624 116,391,934 Total. Add lines 1 through 3 The portion of total contributions by each person (other than a governmental unit or publicly 53,556,062 supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) Public support. Subtract line 5 62,835,872 from line 4 Section B. Total Support Calendar year (or fiscal year (a) 2010 **(b)** 2011 (c) 2012 (d) 2013 (e) 2014 (f) Total beginning in) 🟲 18,135,734 32,207,197 26,711,927 12,771,624 Amounts from line 4 26,565,452 116,391,934 Gross income from interest, dividends, payments received on 21,190 9,584 securities loans, rents, royalties 14,232 6,166 14,444 65,616 and income from similar sources 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 709 13.942 2,196 1.477 1,245 19,569 capital assets (Explain in Part VI) 11 Total support Add lines 7 116,477,119 through 10 12 Gross receipts from related activities, etc (see instructions) 39,374,274 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) 13 Section C. Computation of Public Support Percentage 14 Public support percentage for 2014 (line 6, column (f) divided by line 11, column (f)) 14 53 950 % Public support percentage for 2013 Schedule A, Part II, line 14 15 56 490 % 16a 33 1/3% support test-2014. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box ►V and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test -2013. 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 17a 10%-facts-and-circumstances test - 2014. 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 VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization b 10%-facts-and-circumstances test - 2013. 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 VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see

Schedule A (Form 990 or 990-EZ) 2014 Page 3 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 (a) 2010 **(b)** 2011 (c) 2012 (d) 2013 (e) 2014 (f) Total in) 🟲 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") 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 Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 3 received from disqualified persons Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year c Add lines 7a and 7b Public support (Subtract line 7c from line 6) Section B. Total Support Calendar year (or fiscal year beginning (a) 2010 **(b)** 2011 (c) 2012 (d) 2013 (e) 2014 (f) Total in) 🟲 Amounts from line 6 Gross income from interest, 10a dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b C Net income from unrelated 11 business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include 12 gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11. and 12) 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 Public support percentage for 2014 (line 8, column (f) divided by line 13, column (f)) 15

15 Public support percentage for 2014 (line 8, column (f) divided by line 13, column (f))

16 Public support percentage from 2013 Schedule A, Part III, line 15

Section D. Computation of Investment Income Percentage

17 Investment income percentage from 2014 (line 10c, column (f) divided by line 13, column (f))

18 Investment income percentage from 2013 Schedule A, Part III, line 17

18

19a 33 1/3% support tests—2014. 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%, check this box and stop here. The organization qualifies as a publicly supported organization

18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Part IV Supporting Organizations

(Complete only if you checked a box on line 11 of Part I If you checked 11a of Part I, complete Sections A and B If you checked 11b of Part I, complete Sections A and C If you checked 11c of Part I, complete Sections A, D, and E If you checked 11d of Part I, complete Sections A and D, and complete Part V $\,)$

Section A. All Supporting Organizations

Se	ection A. All Supporting Organizations			
			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section $509(a)(1)$ or (2) ? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section $509(a)(1)$ or (2) .	2		
За	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.	За		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.	3b		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.	3с		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below.	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b		
c	Did the organization support any foreign supported organization that does not have an IRS determination under sections $501(c)(3)$ and $509(a)(1)$ or $(2)^7$ If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section $170(c)(2)(B)$ purposes.	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).	5a		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
c	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations, (b) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI .	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part II of Schedule L (Form 990).	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509 (a)(1) or (2))? If "Yes," provide detail in Part VI .	9a		
b	Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If</i> "Yes," provide detail in Part VI .	9b		
c	Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI .	9c		
L0a	Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer b below.	10a		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings).	10b		
l1	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below,			
	the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		

c A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.

11c

Pa	rt IV Supporting Organizations (continued)			
S	ection B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization.	2		
S	ection C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).	1		
S	ection D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.	3		
S	ection E. Type III Functionally-Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see The organization satisfied the Activities Test Complete line 2 below The organization is the parent of each of its supported organizations. Complete line 3 below The organization supported a governmental entity. Describe in Part VI how you supported a government entity instructions.			
2	Activities Test Answer (a) and (b) below.		Yes	No
	a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.	2a		
	b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.	2b		
3				
	a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI.	3a		
	b Did the organization evergice a substantial degree of direction over the policies, programs and activities of each			l

of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

3b

Part V - Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1	_	Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov 20, 1970 See instructions. All other
ype	[]	II non-functionally integrated supporting organizations must complete Sections A through E

	Section A - Adjusted Net Income	(A) Prior Year	(B) Current Year (optional)	
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		

	Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)	1		
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
c	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
e	Discount claimed for blockage or other factors (explain in detail in Part VI)			
2	Acquisition indebtedness applicable to non-exempt use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		

Section C - Distributable Amount

- **1** Adjusted net income for prior year (from Section A, line 8, Column A)
- 2 Enter 85% of line 1
- 3 Minimum asset amount for prior year (from Section B, line 8, Column A)
- 4 Enter greater of line 2 or line 3
- 5 Income tax imposed in prior year
- **6 Distributable Amount.** Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)
- 7 Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions)

	Current Year
1	
2	
3	
4	
5	
6	

Section D - Distributions	Current Year		
1 Amounts paid to supported organizations to accom	plish exempt purposes		
2 Amounts paid to perform activity that directly furthexcess of income from activity	ers exempt purposes of supp	ported organizations, in	
3 Administrative expenses paid to accomplish exemp	ot purposes of supported org	anızatıons	
4 Amounts paid to acquire exempt-use assets			
5 Qualified set-aside amounts (prior IRS approval rec	nured)		
6 Other distributions (describe in Part VI) See instru	JCTIONS		
7 Total annual distributions. Add lines 1 through 6			
8 Distributions to attentive supported organizations t details in Part VI) See instructions	o which the organization is r	esponsive (provide	
9 Distributable amount for 2014 from Section C, line	6		
10 Line 8 amount divided by Line 9 amount			
		(::)	(:::)
Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2014	(iii) Distributable Amount for 2014
1 Distributable amount for 2014 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2014 (reasonable cause requiredsee instructions)			
3 Excess distributions carryover, if any, to 2014			
a From 2009			
b From 2010			
c From 2011			
d From 2012			
e From 2013			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2014 distributable amount i Carryover from 2009 not applied (see instructions)			
j Remainder Subtract lines 3g, 3h, and 3i from 3f			
4 Distributions for 2014 from Section D, line 7 \$			
A pplied to underdistributions of prior years			
b Applied to 2014 distributable amount			
c Remainder Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2014, if any Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions)			
6 Remaining underdistributions for 2014 Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions)			
7 Excess distributions carryover to 2015. Add lines 3j and 4c			
8 Breakdown of line 7			
a From 2010			
b From 2011			
c From 2012			
d From 2013			

Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions).

Facts And Circumstances Test

Return Reference	Explanation

Schedule A (Form 990 or 990-EZ) 2014

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493310023125

OMB No 1545-0047

Open to Public Inspection

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

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

Name of the or NONPROFIT FINA					dentification number
Part I-A Co	mplete if the or	ganization is exempt unde	r section 501/	13-32386 c) or is a section 5	
		<u> </u>	-		27 Organization.
	·	ganızatıon's dırect and ındırect pol	itical campaign act	ivities in Part IV	
2 Political e 3 Volunteer	expenditures			•	\$
Volunteer	liours				
Part I-B Co	mplete if the or	ganization is exempt unde	r section 501(c)(3).	
1 Enter the	amount of any excise	e tax incurred by the organization	under section 4955	5	\$
2 Enter the	amount of any excise	e tax incurred by organization man	agers under sectio	n 4955	\$
3 If the orga	anızatıon ıncurred a s	ection 4955 tax, did it file Form 4	720 for this year?		☐ Yes ☐ No
4a Wasacor	rection made?				☐ Yes ☐ No
	describe in Part IV				
	-	ganization is exempt unde	_		
		ended by the filing organization for			÷ \$
	amount of the filing o nction activities	rganızatıon's funds contributed to	other organizations	s for section 527	\$
3 Total exer	mpt function expendi	tures Add lines 1 and 2 Enter he	re and on Form 112	0-POL, line 17b	\$
4 Did the fili	ıng organızatıon file F	Form 1120-POL for this year?			☐ Yes ☐ No
		ia employer identification number	(EIN) of all section	i 527 political organizat	ions to which the filing
amount of	political contribution	For each organization listed, enterns received that were promptly and political action committee (PAC)	the amount paid fro d directly delivered	om the filing organization to a separate political o	n's funds Also enter the organization, such as a
amount of separate s	political contribution	For each organization listed, enterns received that were promptly and	the amount paid fro d directly delivered	om the filing organization to a separate political o	m's funds Also enter the organization, such as a rmation in Part IV (e) Amount of political contributions received
amount of separate s	political contribution segregated fund or a	For each organization listed, enterns received that were promptly and political action committee (PAC)	the amount paid from the different paid from the diffe	om the filing organization to a separate political of its needed, provide information (d) A mount paid from filing organization!	m's funds Also enter the organization, such as a mation in Part IV (e) Amount of political contributions received and promptly and directly delivered to a separate political organization.
amount of separate s	political contribution segregated fund or a	For each organization listed, enterns received that were promptly and political action committee (PAC)	the amount paid from the different paid from the diffe	om the filing organization to a separate political of its needed, provide information (d) A mount paid from filing organization!	m's funds Also enter the organization, such as a mation in Part IV (e) Amount of political contributions received and promptly and directly delivered to a separate political organization.
amount of separate s	political contribution segregated fund or a	For each organization listed, enterns received that were promptly and political action committee (PAC)	the amount paid from the different paid from the diffe	om the filing organization to a separate political of its needed, provide information (d) A mount paid from filing organization!	m's funds Also enter the organization, such as a mation in Part IV (e) Amount of political contributions received and promptly and directly delivered to a separate political organization.
amount of separate s	political contribution segregated fund or a	For each organization listed, enterns received that were promptly and political action committee (PAC)	the amount paid from the different paid from the diffe	om the filing organization to a separate political of its needed, provide information (d) A mount paid from filing organization!	m's funds Also enter the organization, such as a mation in Part IV (e) Amount of political contributions received and promptly and directly delivered to a separate political organization.
amount of separate s	political contribution segregated fund or a	For each organization listed, enterns received that were promptly and political action committee (PAC)	the amount paid from the different paid from the diffe	om the filing organization to a separate political of its needed, provide information (d) A mount paid from filing organization!	m's funds Also enterganization, such mation in Part IV (e) Amount contribution and prom directly deliceparate organization

section 4911 tax for this year?

┌ Yes ┌ No

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

С	heck	▶ □	if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN	٧,
			expenses, and share of excess lobbying expenditures)	

B Check ► If the filing organization checked box A and "limited control" provisions apply

	Limits on Lobbying E (The term "expenditures" means a		(a) Filing organization's totals	(b) Affiliated group totals
a	Total lobbying expenditures to influence public o	opinion (grass roots lobbying)	0	
b	Total lobbying expenditures to influence a legisl	ative body (direct lobbying)	0	
c	Total lobbying expenditures (add lines 1a and 1	b)	0	
d	O ther exempt purpose expenditures		34,505,302	
e	Total exempt purpose expenditures (add lines 1	c and 1d)	34,505,302	
f	Lobbying nontaxable amount Enter the amount columns	from the following table in both	1,000,000	
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:		
	Not over \$500,000	20% of the amount on line 1e		
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000		
	Over \$17,000,000	\$1,000,000		
g	Grassroots nontaxable amount (enter 25% of lir	ne 1f)	250,000	
h	Subtract line 1g from line 1a If zero or less, ent	er -0 -	0	
i	Subtract line 1f from line 1c If zero or less, ente	er-0-	0	
j	If there is an amount other than zero on either li	ne 1h or line 1i, did the organization file Form 472	O reportina	

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 separate instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period Calendar year (or fiscal year (a) 2011 **(b)** 2012 (c) 2013 (d) 2014 (e) Total beginning in) 1,000,000 1,000,000 1,000,000 1,000,000 4,000,000 Lobbying nontaxable amount Lobbying ceiling amount 6,000,000 (150% of line 2a, column(e)) 14,309 Total lobbying expenditures 23,771 38,080 Grassroots nontaxable amount 250,000 250,000 250,000 250,000 1,000,000 Grassroots ceiling amount 1,500,000 (150% of line 2d, column (e)) Grassroots lobbying expenditures

	filed Form 5768 (election u	on is exempt under section 501(c)(3) and has I under section 501(h)).				
For e	each "Yes" response to lines 1a through 1: below, p	provide in Part IV a detailed description of the lobbying	(a	1)	(I	o)
actıv	rity.		Yes	No	Amo	ount
1 a		empt to influence foreign, national, state or local public opinion on a legislative matter or referendum,				
b c	Paid staff or management (include compensa Media advertisements?	tion in expenses reported on lines 1c through 1i)?				
d	Mailings to members, legislators, or the publi	c?				
e	Publications, or published or broadcast state	ments?				
f	Grants to other organizations for lobbying pur	poses?				
g	Direct contact with legislators, their staffs, g	overnment officials, or a legislative body?				
h	Rallies, demonstrations, seminars, conventio	ns, speeches, lectures, or any similar means?				
i	O ther activities?					
j	Total Add lines 1c through 1i					
2a	Did the activities in line 1 cause the organiza	tion to be not described in section 501(c)(3)?				
b	If "Yes," enter the amount of any tax incurred	d under section 4912				
C	If "Yes," enter the amount of any tax incurred	d by organization managers under section 4912				
d	If the filing organization incurred a section 49	912 tax, did it file Form 4720 for this year?				
Par		on is exempt under section 501(c)(4), section !	5 01(c))(5), o	r sect	ion
	501(c)(6).				Ye	es No
1	Were substantially all (90% or more) dues re	ceived nondeductible by members?		Г	1	.5 110
2	Did the organization make only in-house lobb	•		⊢	2	
3	- · · · · · · · · · · · · · · · · · · ·	ying and political expenditures from the prior year?			3	
Par		on is exempt under section 501(c)(4), section !	501(c)(5), o	r sect	ion
	501(c)(6) and if either (a)	BOTH Part III-A, lines 1 and 2, are answered "				
_	line 3, is answered "Yes."		1 4 1			
1 2	Dues, assessments and similar amounts from	olitical expenditures (do not include amounts of political	1			
	expenses for which the section 527(f) tax w		2a			
a b	Current year Carryover from last year		2b			
c	Total		2c			
3		e)(1)(A) notices of nondeductible section 162(e) dues	3			
4		c exceeds the amount on line 3, what portion of the excess				
•		ne reasonable estimate of nondeductible lobbying and				
	political expenditure next year?		4			
5	Taxable amount of lobbying and political expe	enditures (see instructions)	5			
Pa	art IV Supplemental Information					
	ovide the descriptions required for Part I-A , line see instructions), and Part II-B, line 1 Also, co	e 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated grou Implete this part for any additional information	up list),	Part II	-A , lines	s 1 and
	Return Reference	Explanation				

Part IV Supplemental Info	ormation (continued)
Return Reference	Explanation

Schedule C (Form 990 or 990EZ) 2014

DLN: 93493310023125

OMB No 1545-0047

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.

Open to Public Inspection

	of the organization FIT FINANCE FUND				Emp	loyer identif	ication numb	er
	THE TOTAL STATE OF THE STATE OF				13-	3238657		
art I				ther Similar F	unds	or Accour	its. Comple	ete if th
	organization answered "Yes" to Form 990			/ısed funds		(h) Funds ar	nd other acco	unte
Tat	cal number at end of year	(a) Dollor	auv	/isea iailas		(b) i ulius ai	id other acco	unts
	,							
	gregate value of contributions to (during year)							
	gregate value of grants from (during year)				+			
	gregate value at end of year				<u> </u>			
fun	d the organization inform all donors and donor advisc ids are the organization's property, subject to the or	ganızatıon's exclu	ısıve	e legal control?			☐ Yes	┌ No
use	d the organization inform all grantees, donors, and do ed only for charitable purposes and not for the benef nferring impermissible private benefit?						┌ Yes	┌ No
	Conservation Easements. Complete if	the organization	n ar	nswered "Yes"	to Forr	n 990, Part	IV, line 7.	
Г Г	rpose(s) of conservation easements held by the organisms. Preservation of land for public use (e.g., recreation Protection of natural habitat Preservation of open space mplete lines 2a through 2d if the organization held a	oreducation) Γ Γ	_	Preservation of a Preservation of a	certifie	d historic sti	ructure	
eas	sement on the last day of the tax year					Held at t	he End of the	e Year
Tot	tal number of conservation easements				2a			
Tot	tal acreage restricted by conservation easements				2b			
Nui	mber of conservation easements on a certified histo	oric structure inclu	uded	lın (a)	2c			
	mber of conservation easements included in (c) acq toric structure listed in the National Register	uired after 8/17/0)6, a	and not on a	2d			
Nui	mber of conservation easements modified, transferr	ed, released, extir	ngui	shed, or terminat	ed by th	ne organizati	on during	
the	e tax year ►							
N	mber of states where property subject to conservati	ion ascament is lo	cate	ad 🌬				
Do	es the organization have a written policy regarding t forcement of the conservation easements it holds?				ndling of	violations, a	and Ves	┌ No
Sta ►_	aff and volunteer hours devoted to monitoring, inspec	cting, and enforcir	ng co	onservation ease	ments (luring the ye	ar	
	nount of expenses incurred in monitoring, inspecting	ı, and enforcıng co	nse	rvation easement	ts durın	g the year		
	es each conservation easement reported on line 2(o d section 170(h)(4)(B)(ii)?	d) above satisfy th	ne re	quirements of se	ction 1	70(h)(4)(B)(ı)	┌ No
bal	Part XIII, describe how the organization reports cor lance sheet, and include, if applicable, the text of the e organization's accounting for conservation easeme	e footnote to the o						
t II	Organizations Maintaining Collection Complete if the organization answered "Y				or Ot	her Simila	r Assets.	
wor	the organization elected, as permitted under SFAS 1 rks of art, historical treasures, or other similar asse rvice, provide, in Part XIII, the text of the footnote t	ts held for public e	exhi	bition, education,	or rese	arch in furth		
wor	the organization elected, as permitted under SFAS 1 rks of art, historical treasures, or other similar asse rvice, provide the following amounts relating to these	ts held for public e						olic
(i)	Revenue included in Form 990, Part VIII, line 1					► \$		
(ii)	Assets included in Form 990, Part X							
Ift	the organization received or held works of art, historications amounts required to be reported under SFAS							
Rev	venue included in Form 990, Part VIII, line 1	•				► \$		
ASS	sets included in Form 990, Part X					▶ \$		

Part	Organizations Maintaining Collec	tions of Art,	Hist	ori	<u>cal T</u>	reasu	res, or Ot	her	Similar Ass	ets (c	ontınued)
3	Using the organization's acquisition, accession, collection items (check all that apply)	and other record	ls, che	eck	any of	the follo	wing that ar	eas	significant use o	of its	
а	Public exhibition		d	Γ	Loan	or exch	ange progra	ms			
b	Scholarly research		e	Γ	Othe	r					
c	Preservation for future generations										
4	Provide a description of the organization's collec Part XIII	tions and explai	n how	the	y furth	er the o	rganızatıon's	exe	empt purpose in		
5	During the year, did the organization solicit or reassets to be sold to raise funds rather than to be									Yes	┌ No
Par	Escrow and Custodial Arrangemer Part IV, line 9, or reported an amount						answered	"Ye	s" to Form 99	0,	
1a	Is the organization an agent, trustee, custodian of included on Form 990, Part X?						rotherasse	ts n	ot _	Yes	✓ No
b	If "Yes," explain the arrangement in Part XIII an	d complete the 1	followi	ng t	able						
									Amo	unt	
c	Beginning balance						1	.c			
d	Additions during the year						1	d			
е	Distributions during the year						1	e			
f	Ending balance						_1	f			
2a	Did the organization include an amount on Form 9	990, Part X, line	21, fo	ores	scrow	orcusto	dıal account	lıab	oility?	Yes	┌ No
b	If "Yes," explain the arrangement in Part XIII C	heck here if the	explai	natio	on has	been pi	rovided in Pa	ırt X	III		굣
Pa	rt V Endowment Funds. Complete if the										
	(6	Current year	(b) F	rior '	year	b (c) Tw	vo years back	(d) ⊤	hree years back (e) Four y	ears back
1a	Beginning of year balance										
Ь	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 balanc	e (lıne	1g,	, colun	nn (a)) h	ield as				
а	Board designated or quasi-endowment 🕨										
b	Permanent endowment ►										
C	Temporarily restricted endowment ► The percentages in lines 2a, 2b, and 2c should e	qual 100%									
За	Are there endowment funds not in the possession	of the organiza	tıon th	nat a	are hel	d and a	dmınıstered	for t	he		
	organization by (i) unrelated organizations								2-(2)	Yes	No
	(ii) related organizations			•				•	3a(i)		
ь	If "Yes" to 3a(II), are the related organizations li		on Sc	:hed	· · lule R?	• • •			3b	' 	
4	Describe in Part XIII the intended uses of the or										<u></u>
Par	Land, Buildings, and Equipment. 11a. See Form 990, Part X, line 10.	Complete ıf tl	he or	gan	ızatıo	n answ	ered 'Yes'	to F	orm 990, Par	t IV, I	ine
	Description of property					or other estment)	(b)Cost or ot basis (othe		(c) Accumulated depreciation	(d) i	Book value
	Land										
	Buildings										
	Leasehold improvements						373,	736	372,10	4	1,632
	Equipment						858,	_	810,48	_	47,686
e	Other						422,		421,73	6	322
Tota	I. Add lines 1a through 1e (Column (d) must equal	Form 990, Part X	, colun	nn (i	B), line	10(c).)				1	49,640
	· · · · · · · · · · · · · · · · · · ·								Schedule D (Form 9	990) 2014

See Form 990, Part X, line 12. (a) Description of security or category	(b)Book value	(c) Method of valuation
(including name of security)	,	Cost or end-of-year market value
(1)Financial derivatives (2)Closely-held equity interests		
O ther		
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	•	
Part VIII Investments—Program Related. Co	mplete 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
(a) Description of investment	(b) Book Value	Cost or end-of-year market value
(1) LOANS RECEIVABLE	50,133,388	С
20 0000 (20 0000 0000 0000 0000 0000 00	50,133,388	
Part IX Other Assets. Complete if the organization		
(a) Descri		(b) Book value
	ption	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15 Part X Other Liabilities. Complete if the orga	otion C.)	(b) Book value
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15	otion C.)	(b) Book value
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15 Part X Other Liabilities. Complete if the orga Form 990, Part X, line 25.	.) nızatıon answered 'Yes' to	(b) Book value
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15 Part X Other Liabilities. Complete if the orga Form 990, Part X, line 25. 1 (a) Description of liability	.) nızatıon answered 'Yes' to	(b) Book value
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15 Part X Other Liabilities. Complete if the orga Form 990, Part X, line 25. 1 (a) Description of liability	.) nızatıon answered 'Yes' to	(b) Book value
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15 Part X Other Liabilities. Complete if the orga Form 990, Part X, line 25. 1 (a) Description of liability	.) nızatıon answered 'Yes' to	(b) Book value
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15 Part X Other Liabilities. Complete if the orga Form 990, Part X, line 25. 1 (a) Description of liability	.) nızatıon answered 'Yes' to	(b) Book value
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15 Part X Other Liabilities. Complete if the orga Form 990, Part X, line 25. 1 (a) Description of liability	.) nızatıon answered 'Yes' to	(b) Book value
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15 Part X Other Liabilities. Complete if the orga Form 990, Part X, line 25. 1 (a) Description of liability	.) nızatıon answered 'Yes' to	(b) Book value
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15 Part X Other Liabilities. Complete if the orga Form 990, Part X, line 25. 1 (a) Description of liability	.) nızatıon answered 'Yes' to	(b) Book value
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15 Part X Other Liabilities. Complete if the orga Form 990, Part X, line 25. 1 (a) Description of liability	.) nızatıon answered 'Yes' to	(b) Book value
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15 Part X Other Liabilities. Complete if the orga Form 990, Part X, line 25. 1 (a) Description of liability	.) nızatıon answered 'Yes' to	(b) Book value
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15 Part X Other Liabilities. Complete if the orga Form 990, Part X, line 25. 1 (a) Description of liability	.) nızatıon answered 'Yes' to	(b) Book value
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15 Part X Other Liabilities. Complete if the orga Form 990, Part X, line 25. 1 (a) Description of liability	.) nızatıon answered 'Yes' to	(b) Book value
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15 Part X Other Liabilities. Complete if the orga Form 990, Part X, line 25. 1 (a) Description of liability	.) nızatıon answered 'Yes' to	(b) Book value

the organization answered 'Yes' to Form 990, Part IV, line 12a. 1 Total revenue, gains, and other support per audited financial statements
A mounts included on line 1 but not on Form 990, Part VIII, line 12 a Net unrealized gains (losses) on investments
A Net unrealized gains (losses) on investments
b Donated services and use of facilities
c Recoveries of prior year grants 2c d Other (Describe in Part XIII) 2d 2,643 e Add lines 2a through 2d
d Other (Describe in Part XIII) 2d 2,643 e Add lines 2a through 2d 2e 140,035 3 Subtract line 2e from line 1 3 19,525,733 4 Amounts included on Form 990, Part VIII, line 12, but not on line 1 4a 4a b Other (Describe in Part XIII) 4a 4a 864,522 c Add lines 4a and 4b 4c 864,522
e Add lines 2a through 2d
3 Subtract line 2e from line 1
A mounts included on Form 990, Part VIII, line 12, but not on line 1 Investment expenses not included on Form 990, Part VIII, line 7b . b Other (Describe in Part XIII)
a Investment expenses not included on Form 990, Part VIII, line 7b 4a 4a 4a 4b 864,522 b Other (Describe in Part XIII)
b Other (Describe in Part XIII) 4b 864,522 c Add lines 4a and 4b 4c 864,522
c Add lines 4a and 4b
5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) 5 20,390,255
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
2 Amounts included on line 1 but not on Form 990, Part IX, line 25
a Donated services and use of facilities
b Prior year adjustments
c Other losses
d Other (Describe in Part XIII)
e Add lines 2a through 2d
3 Subtract line 2e from line 1
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)
c Add lines 4a and 4b
c Add lines 4a and 4b

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

Return Reference	Explanation
PART IV, LINE 2B	NONPROFIT FINANCE FUND HELD A CUSTODIAL BANK ACCOUNT FOR A NEW MARKET TAX CREDIT OF WHICH NONPROFIT FINANCE FUND IS A MINIMAL PARTNER OF 01% AND THE FUNDS ARE USED AS OBLIGATION PAYMENTS AS AUTHORIZED BY THE PARTNERSHIP
PART X, LINE 2	THE FUND'S ACCOUNTING POLICY IS TO DISCLOSE LIABILITIES FOR UNCERTAIN TAX POSITIONS WHEN A LIABILITY IS PROBABLE AND ESTIMABLE MANAGEMENT IS NOT AWARE OF ANY VIOLATION OF ITS TAX STATUS AS AN ORGANIZATION EXEMPT FROM INCOME TAXES, NOR OF ANY EXPOSURE TO UNRELATED BUSINESS INCOME TAX THE FUND IS NO LONGER SUBJECT TO AUDITS BY THE APPLICABLE TAXING JURISDICTIONS FOR PERIODS PRIOR TO 2011
PART XI, LINE 2D - OTHER ADJUSTMENTS	RELATED PARTY REVENUE 2,643
PART XI, LINE 4B - OTHER ADJUSTMENTS	INTEREST EXPENSE NETTED AGAINST INTEREST INCOME 858,522 RENT EXPENSE NETTED AGAINST RENTAL INCOME 6,000
PART XII, LINE 2D - OTHER ADJUSTMENTS	RELATED PARTY EXPENSES 211,801
PART XII, LINE 4B - OTHER ADJUSTMENTS	INTEREST EXPENSE NETTED AGAINST INTEREST INCOME 858,522 RENT EXPENSE NETTED AGAINST RENTAL INCOME 6,000

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Part XIII Supplemental Information	on (continued)	
Return Reference	Explanation	
l		
-		

Schedule D (Form 990) 2014

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(Form 990)

DLN: 93493310023125 OMB No 1545-0047

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.

Open to Public

Attach to Form 990. Department of the Treasury **Inspection** Internal Revenue Service ► Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990. Name of the organization Employer identification number NONPROFIT FINANCE FUND 13-3238657 Part I General Information on Grants and Assistance

Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and

2 Desc	cribe in Part IV the organizat	ion's procedures for	monitoring the use of	grant funds in the Unite	d States		
Part II	Grants and Other As Form 990, Part IV, line						s" to
	·						

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
See Additional Data Table							

2	Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	29
3	Enter total number of other organizations listed in the line 1 table	1

Schedule I	(Form 990) 2014
Part III	Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.
	Part III can be duplicated if additional space is needed.

(a)Type of grant or assistance	(b) Number of recipients	(c) A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance

Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.							
Return Reference	Explanation						
	NONPROFIT FINANCE FUND (NFF) MAKES GRANTS TO OTHER NONPROFIT ORGANIZATIONS AS PART OF A VARIETY OF FUNDER-SPECIFIC INITIATIVES AND IN A MANNER THAT ALIGNS WITH NFF'S MISSION GRANTS ARE REVIEWED AND APPROVED BASED UPON THE CRITERIA ESTABLISHED BY THE FUNDER AND THE GRANTEES' CAPACITY TO SERVE THEIR COMMUNITIES AND TO FURTHER THEIR CHARITABLE MISSION GRANTS ARE ONLY DISBURSED AFTER RECEIVING WRITTEN AND SIGNED ACKNOWLEDGEMENT BY THE GRANTEE OF THE RESTRICTIONS ON THE GRANT						

Additional Data

Software ID:

Software Version:

EIN: 13-3238657

Name: NONPROFIT FINANCE FUND

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ABODE SERVICES40849 FREMONT BLVD FREMONT,CA 94538	94-3087060	501 (C)(3)	50,000				CALIFORNIA PAY FOR SUCCESS INITIATIVE

form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
AFRICAN SERVICES COMMITTEE429 WEST 127TH STREET 2ND FLOOR NEWYORK,NY 10027	13-3749744	501 (C)(3)	75,000				COMMUNITY RESILIENCE FUND PROJECT		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
ARTPLACE AMERICA LLC6 WEST 48TH STREET NEW YORK, NY 10036	46-4698925		21,377,339				ARTPLACE PROJECT		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
BOSTON CHILDREN'S MUSEUM308 CONGRESS STREET BOSTON,MA 02210	04-2103993	501 (C)(3)	75,000				BUILDING RESERVES INITIATIVE		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
CENTER FOR EMPLOYMENT OPPORTUNITIES50 BROADWAY 18TH FL NEWYORK,NY 10004	13-3843322	501 (C)(3)	55,867				CALIFORNIA PAY FOR SUCCESS INITIATIVE			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
CHAPIN HALL CENTER FOR CHILDREN1313 EAST 60TH STREET CHICAGO,IL 60637	36-2167012	501 (C)(3)	5,000				CALIFORNIA PAY FOR SUCCESS INITIATIVE			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
CHILDREN MUSEUM OF HOUSTON1500 BINZ HOUSTON,TX 77004	74-2178563	501 (C)(3)	53,600				BUILDING RESERVES INITIATIVE		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
CITY AND COUNTY OF SAN FRANCISCOONE DR CALTON B GOODLETT PLACE 288 SAN FRANCISCO, CA 94102	94-6000417	CITY OF SAN FRANCISC	187,410				CALIFORNIA PAY FOR SUCCESS INITIATIVE			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
GRAND STREET SETTLEMENT INC80 PITT STREET NEW YORK, NY 10002	13-5562230	501 (C)(3)	100,000				COMMUNITY RESILIENCE FUND PROJECT		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
KAUFMAN CENTER129 WEST 67TH STREET NEW YORK,NY 10023	13-1991118	501 (C)(3)	28,600				BUILDING RESERVES INITIATIVE		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
KOHL CHILDREN'S MUSEUM2100 PATRIOT BLVD GLENVIEW,IL 60026	36-3706878	501 (C)(3)	63,048				BUILDING RESERVES INITIATIVE		

form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
LEAKE & WATTS SERVICES INC463 HAWTHORNE AVENUE YORKERS,NY 10705	13-1860451	501 (C)(3)	100,000				COMMUNITY RESILIENCE FUND PROJECT			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
MACPHAIL CENTER OF MUSIC501 SOUTH 2ND STREET MINNEAPOLIS, MN 55401	41-1729340	501 (C)(3)	55,250				BUILDING RESERVES INITIATIVE		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
MADISON CHILDREN'S MUSEUM100 N HAMILTON STREET MADISON,WI 53703	39-1383497	501 (C)(3)	26,753				BUILDING RESERVES INITIATIVE		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
MERIT SCHOOL OF MUSIC 38 SOUTH PEORIA STREET CHICAGO,IL 60607	36-3028768	501 (C)(3)	36,000				BUILDING RESERVES INITIATIVE		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
MUSIC CONSERVATORY OF WESTCHESTER216 CENTRAL AVENUE WHITE PLAINS,NY 10606	13-6007082	501 (C)(3)	40,950				BUILDING RESERVES INITIATIVE			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
MUSIC INSTITUTE OF CHICAGO507 GREEN BAY ROAD WILMETTE,IL 60091	36-2374224	501 (C)(3)	19,000				BUILDING RESERVES INITIATIVE			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
NEIGHBORHOOD MUSIC SCHOOL100 AUDUBON STREET NEWHAVEN,CT 06510	06-0662152	501 (C)(3)	19,200				BUILDING RESERVES INITIATIVE			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
NEW YORK CITY GAY AND LESBIAN ANTI-VIOLENCE PROJECT240 WEST 35TH STREET SUITE 200 NEW YORK, NY 10001	13-3149200	501 (C)(3)	75,000				COMMUNITY RESILIENCE FUND PROJECT			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
NURSE-FAMILY PARTNERSHIP1900 GRANT STREET SUITE 400 DENVER,CO 80203	20-0234163	501 (C)(3)	70,350				CALIFORNIA PAY FOR SUCCESS INITIATIVE		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
PALLADIA INC2006 MADISON AVENUE NEW YORK, NY 10035	11-3099604	501 (C)(3)	200,000				COMMUNITY RESILIENCE FUND PROJECT		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
PROVIDENCE CHILDREN'S MUSEUM100 SOUTH STREET PROVIDENCE,RI 02903	05-0370944	501 (C)(3)	11,050				BUILDING RESERVES INITIATIVE		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
RAINEY1705 EAST 55TH CLEVELAND,OH 44103	34-6555952	501 (C)(3)	23,575				BUILDING RESERVES INITIATIVE			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
REDF221 MAIN STREET SUITE 1550 SAN FRANCISCO,CA 94105	54-2132153	501 (C)(3)	46,394				CALIFORNIA PAY FOR SUCCESS INITIATIVE			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
SOCIAL FINANCE INC77 SUMMER STREET 2ND FLOOR BOSTON,MA 02110	27-4620963	501 (C)(3)	132,657				CALIFORNIA PAY FOR SUCCESS INITIATIVE			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
THE CHILDREN'S MUSEUM OF NEW HAMPSHIRE6 WASHINGTON STREET DOVER,NH 03820	02-0363746	501 (C)(3)	9,940				BUILDING RESERVES INITIATIVE		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
THE MAGIC HOUSE516 S KIRKWOOD ROAD SAINT LOUIS, MO 63122	51-0138441	501 (C)(3)	32,000				BUILDING RESERVES INITIATIVE			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
THIRD SECTOR CAPITAL PARTNERS200 CLAREDON STREET 29TH FLOOR BOSTON,MA 02116	46-1301032	501 (C)(3)	366,000				CALIFORNIA PAY FOR SUCCESS INITIATIVE			

<u>Form 990,</u> Schedule I, Pai	<u>rt II, Grants an</u>	<u>d Other Assistance</u>	to Domestic Orga	anizations and Do	<u>mestic Governmer</u>	nts.	
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WOMEN'S HOUSING AND ECONOMIC DEVELOPMENT CORPORATION50 EAST 168TH STREET BRONX,NY 10452	11-3099604	501 (C)(3)	50,000				COMMUNITY RESILIENCE FUND PROJECT

Form 990,Schedule I, Pa	<u>rt II, Grants an</u>	d Other Assistance	<u>e to Domestic Org</u>	<u>anizations and Do</u>	<u>mestic Governmei</u>	nts.	
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
YOUNG PEOPLE'S PROJECT 99 BISHOP ALLEN DRIVE CAMBRIDGE,MA 02139	64-0939004	501 (C)(3)	25,000				PROVIDE CAPACITY BUILDING SUPPORT TO DSNI, YPP AND BPE

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DLN: 93493310023125

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury

Internal Revenue Service

Compensation Information For certain Officers, Directors, Trustees, Key Employees, and Highest

Compensated Employees ► Complete if the organization answered "Yes" to Form 990, Part IV, line 23. ► Attach to Form 990.

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

Open to Public Inspection

Name of the organization NONPROFIT FINANCE FUND

Employer identification number

13-3238657

Pa	Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax idemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all	H-15		
_	directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a?	2		
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 10,000 (f. 10,000).			
	used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III			
	Compensation committee Written employment contract			
	✓ Independent compensation consultant ✓ Compensation survey or study ✓ Form 990 of other organizations ✓ Approval by the board or compensation committee			
	Approval by the board of 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			
а	Receive a severance payment or change-of-control payment?	4a		Νo
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		No
c	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		No
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III			
	Only 501(c)(3), 501(c)(4), and 501(c)(29) 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			
а	The organization?	5a		Νo
b	Any related organization?	5b		Νo
	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			
а	The organization?	6a		Νo
b	Any related organization?	6b		Νo
	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	7	Yes	
8	Were any amounts reported in Form 990, Part VII, paid or accured pursuant to a contract that was			
	subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe			
	ın Part III	8		Νo
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?	9		

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

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

Note. The sum of columns (B)(1)-(111) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual

(A) Name and Title	(B) Breakdown o	f W-2 and/or 1099-MIS	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of	(F) Compensation in
	(i) Base compensation	(ii) Bonus & ıncentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	columns (B)(ı)-(D)	column(B) reported as deferred in prior Form 990
See Additional Data Table							

Schedule J (Form 990) 2014

Part III Supplemental Information

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

rice complete time parties and addition	The transfer of the transfer o
Return Reference	Explanation
PART I, LINE 7	BONUS FOR CEO WAS DETERMINED BY NFF BOARD OF DIRECTORS AT THE SOLE DISCRETION OF THE BOARD FOR THE SENIOR
	MANAGEMENT TEAM, BONUSES WERE DETERMINED BY THE ASSESSMENT AND RECOMMENDATION OF THE CEO AND APPROVED BY
	COMPENSATION COMMITTEE FOR OTHER STAFF, THE BONUSES WERE DETERMINED BY THEIR SUPERVISORS AND APPROVED BY THE CEO
	WITHIN THE PARAMETERS OF THE BOARD APPROVED BUDGET

Schedule J (Form 990) 2014

Additional Data

Software ID: Software Version:

EIN: 13-3238657

Name: NONPROFIT FINANCE FUND

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and Title		(B) Breakdown of	f W-2 and/or 1099-MIS	3C compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation in
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	column (B) reported as deferred in prior Form 990
1 ANTONY BUGG-LEVINE, PRESIDENT/CEO	(I) (II)		45,000 0	0	15,767 0	22,562 0	370,491	0 0
1 CRAIG REIGEL, CFO	(I) (II)	· · ·	21,000	0	13,886 0	16,629 0	264,697 0	0
2 NORAH MCVEIGH, MANAGING DIR FINANCIAL SRV	(I) (II)		20,000	0	14,506 0	34,916 0	279,501 0	0
3 KRISTIN GIANTRIS, MANAGING DIRECTOR	(I) (II)		25,000 0	0	15,412 0	20,182 0	291,684	0
4 JENNIFER TALANSKY, MANAGING DIRECTOR	(I) (II)		18,000 0	0	11,455 0	35,543 0	247,709 0	0
5 ANNE DYJAK, VP & CHIEF INVESTMT OFFICER	(I) (II)		13,000 0	0	7,695 0	9,605 0	156,862 0	0
6 JENNIFER KAWAR, VP & CHIEF INVESTMT OFFICER	(I) (II)		9,500 0	0	7,079 0	30,863 0	159,436 0	0
7 BRENDAN BEIR, DIRECTOR, NMTC OPERATIONS	(I) (II)		0	0	8,063 0	10,885 0	152,345 0	0
8 ANDREA BRISCOE, VP HUMAN CAPITAL	(I) (II)		0	0	7,820 0	20,225 0	152,969 0	0
9 WILLIAM H PINAKIEWICZ, VP BUSINESS DEVELOPMENT	(I) (II)		0	0	8,300 0	26,496 0	169,126	0

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SCHEDULE 0

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

As Filed Data -

DLN: 93493310023125

OMB No 1545-0047

2014

Open to Public Inspection

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.

Name of the organization
NONPROFIT FINANCE FUND

Employer identification number

13-3238657

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11	DRAFT OF THE FORM 990 PREPARED BY EXTERNAL PROFESSIONAL ACCOUNTING FIRM AND REVIEWED BY INTERNAL MANAGEMENT/CFO UPON COMPLETION OF A DRAFT VERSION OF THE FORM 990, THE DRAFT IS SENT VIA ELECTRONIC MAIL TO MEMBERS OF THE AUDIT COMMITTEE OF NONPROFIT FINANCE FUND FOR THEIR PRELIMINARY REVIEW THESE MATERIALS ARE SENT IN ADVANCE OF A MEETING DURING THE MEETING, A REVIEW OF THE FORM IS CONDUCTED AT THE MEETING, THE COMMITTEE EITHER APPROVES THE 990 OR RECOMMENDS CHANGES, WHICH ARE SUBSEQUENTLY MADE AND REDISTRIBUTED TO COMMITTEE MEMBERS VIA ELECTRONIC MAIL FOR THEIR APPROVAL THE MEMBERS MAY ALSO ELECT TO HOLD A SECOND MEETING TO REVIEW ANY CHANGES ONCE THE DRAFT IS APPROVED, THE 990 IS PROVIDED ELECTRONICALLY TO THE FULL BOARD OF DIRECTORS, PRIOR TO FILING

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	NONPROFIT FINANCE FUND'S CONFLICT OF INTEREST AND DISCLOSURE POLICY WAS REVISED IN 2012 THE POLICY IS APPLICABLE TO ALL DIRECTORS, OFFICERS, COMMITTEE MEMBERS AND KEY EMPLOYEES AT THE BEGINNING OF EACH YEAR, ALL SUCH PERSONS ARE ASKED TO SIGN A STATEMENT AFFIRMING THAT THE INDIVIDUAL HAS RECEIVED A COPY OF THE CONFLICT OF INTEREST AND DISCLOSURE POLICY, HAS READ AND UNDERSTANDS THE POLICY AND AGREES TO COMPLY WITH THE POLICY THE POLICY REQUIRES THAT ALL POTENTIAL CONFLICTS BE REPORTED TO THE BOARD OF DIRECTORS OR RELEVANT COMMITTEE TO DETERMINE IF A CONFLICT EXISTS AND IF SO, THAT IT BE ADDRESSED IN AN APPROPRIATE MANNER CONSISTENT WITH THE POLICY THE POLICIES ALSO PROVIDE THAT INTERESTED PERSONS MAY NOT PARTICIPATE WHEN A POTENTIAL CONFLICT IS DETERMINED NOR BE PRESENT FOR THE APPROVAL OF ANY TRANSACTION OR BUSINESS INVOLVING THE INTERESTED PARTY

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 15	NONPROFIT FINANCE FUND FORMALIZED A STANDING BOARD LEVEL COMPENSATION COMMITTEE IN 2012 THE COMMITTEE IS COMPRISED SOLELY OF INDEPENDENT VOTING MEMBERS OF THE BOARD OF DIRECTORS THIS COMMITTEE IS RESPONSIBLE FOR DETERMINING THE SALARY OF NONPROFIT FINANCE FUND'S CEO. IN ITS REVIEW AND APPROVAL PROCESS, THE COMPENSATION COMMITTEE DETERMINES REASONABLE COMPENSATION USING KEY INFORMATION INCLUDING COMPENSATION LEVELS PAID BY SIMILARLY SITUATED ORGANIZATIONS, THE AVAILABILITY OF SIMILAR SERVICES IN THE ORGANIZATION'S GEOGRAPHIC AREA, CURRENT COMPENSATION SURVEYS COMPILED BY INDEPENDENT FIRMS, AND ACTUAL WRITTEN OFFERS FROM SIMILAR INSTITUTIONS COMPETING FOR THE SERVICES OF THE OFFICER OR KEY EMPLOYEE. THE COMMITTEE MAY ALSO USE EXTERNAL COMPENSATION SURVEYS AND STUDIES IF NEEDED THIS INFORMATION IS ANALYZED AND DISCUSSED DURING AN ANNUAL MEETING OF THE COMPENSATION COMMITTEE. THE CHAIR OF THE COMPENSATION COMMITTEE TO THE BOARD OF DIRECTORS THE BOARD OF DIRECTORS REVIEWS AND APPROVES THE COMPENSATION AS RECOMMENDED BY THE COMPENSATION COMMITTEE. THE REVIEW AND APPROVAL OF COMPENSATION IS RECORDED IN THE MINUTES OF THE BOARD OF DIRECTORS, INCLUDING THE TERMS OF THE COMPENSATION AND DATE APPROVED, THE MINUTES OF THE BOARD OF DIRECTORS, INCLUDING THE TERMS OF THE COMPENSATION AND DATE APPROVED, THE NAMES OF THE MEMBERS PRESENT FOR THE DISCUSSION AND APPROVAL, THE COMPENSATION AND DATE APPROVED, THE NAMES OF THE MEMBERS PRESENT FOR THE DISCUSSION AND APPROVAL, THE COMPENSATION IS HIGHER OF LOWER THAT THE RANGE OF COMPENSATION, AND THE BASIS FOR THE DECISION IF REASONABLE COMPENSATION IS HIGHER OF LOWER THAT THE RANGE OF COMPENSATION FOR THE NEW CEO. COMPENSATION FOR OTHER OFFICERS AND SENIOR MANAGEMENT ARE DETERMINED BY A RECOMMENDATION OF THE CEO, SUBJECT TO THE APPROVAL OF THE COMPENSATION COMMITTEE. THE REVIEW AND APPROVAL OF THE SEDECISIONS BY THE COMMITTEE ARE RECORDED, ALONG WITH THE NAMES OF THOSE COMMITTEE MEMBERS PRESENT

Return Reference	Explanation
FORM 990, PART VI, SECTION C, LINE 19	FORM 990 IS AVAILABLE FOR PUBLIC INSPECTION AS REQUIRED UNDER SECTION 6104 OF THE INTERNAL REVENUE SERVICE CODE. IN ADDITION, FORMS 990 AND 1023, AS WELL AS THE FINANCIAL STATEMENTS, CONFLICT OF INTEREST POLICY, ARTICLES OF INCORPORATION AND BY-LAWS ARE AVAILABLE UPON WRITTEN REQUEST DIRECTED TO THE NONPROFIT FINANCE FUND, 70 WEST 36TH STREET, NEW YORK, NY 10018, OR BY CALLING THE ORGANIZATION AT 212-868-6710

Return Reference	Explanation
FORM 990, PART X, LINE 28 CHANGE IN TEMPORARILY RESTRICTED NET ASSETS	AT DECEMBER 31, 2013, GRANT FUND TEMPORARILY RESTRICTED NET ASSETS INCLUDED \$21,441,584 TO SUPPORT ARTPLACE, A NATIONWIDE INITIATIVE TO PROMOTE CREATIVE PLACEMAKING IN 2014 FUNDS ASSOCIATED WITH THIS PROGRAM WERE GRANTED TO AN UNRELATED ENTITY THAT WILL CONTINUE GRANTMAKING TO THE TARGET ORGANIZATIONS GRANT FUND TEMPORARILY RESTRICTED NET ASSETS DECREASED BY \$21,377,339 AS A RESULT OF THE TRANSFER OF CASH AND RECEIVABLES IN THIS TRANSACTION

Return Reference	Explanation
FORM 990, PART XII, LINE 2C	NONPROFIT FINANCE FUND HAS AN AUDIT COMMITTEE, COMPOSED OF INDEPENDENT BOARD MEMBERS, THAT IS RESPONSIBLE FOR THE OVERSIGHT OF THE AUDIT OF ITS FINANCIAL STATEMENTS AND THE SELECTION OF AN INDEPENDENT ACCOUNTANT THIS PROCESS HAS NOT CHANGED FROM THE PREVIOUS YEAR

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SCHEDULE R (Form 990)

Department of the Treasury

Internal Revenue Service

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.

DLN: 93493310023125

2014

Open to Public Inspection

Name of the organization NONPROFIT FINANCE FUND Employer identification number

13-3238657

Part 1 Identification of Disregarded Entities Complete	f the organization a	answered "Yes" on	Form 990, Pa	rt IV, line 33.		
(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity	

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.

(a) Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign country)	Exempt Code section	Public charity status (if section 501(c)(3))		Section (13) coi enti	512(b) ntrolled
						Yes	No
70 WEST 36TH STREET 11TH FL	PROVIDE TECHNICAL ASSISTANCE & LOANS TO NONPROFIT CULTURAL ORGANIZATIONS	МА	501(C)(3)		NONPROFIT FINANCE FUND	Yes	
70 WEST 36TH STREET 11TH FL	ASSIST OTHER NONPROFITS MANAGE LONG TERM ASSETS	DE	501(C)(3)		NONPROFIT FINANCE FUND	Yes	
NEW YORK, NY 100188007 13-4078657							

See Additional Data Table

Part III	because it had one or more related organizations treate					ation ansv	vered "Ye	s" on F	orm	990, Part I	V, lin	34	
	(a)	(b) Primary activity	(c)	(d) Direct controlling entity	(e) Predominant	(f) Share of total income	(g) Share of end-of-year assets	allocatio		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)		ing r?	(k) Percentage ownership

Part IV	Identification of Related Organizations Taxable as a Corporation or Trust Complete of the organization answered "Yes" on Form 990, Part IV,
	line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i)	
Name, address, and EIN of	Primary activity	Legal	Direct controlling	Type of entity	Share of total	Share of end-	Percentage	Section 512	
related organization		domicile	entity	(C corp, S	ıncome	of-year	ownership	(b)(13)	
		(state or foreign		corp,		assets		controlled	
		country)		or trust)				entity?	
								Yes	No

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)

edule R (Form 990) 2014		Рa	ge 3
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		Yes	No
During the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a		No
Gift, grant, or capital contribution to related organization(s)	1b		No
Gift, grant, or capital contribution from related organization(s)	1c		No
Loans or loan guarantees to or for related organization(s)	1d		No
Loans or loan guarantees by related organization(s)	1e		No
Dividends from related organization(s)	1f	Yes	
Sale of assets to related organization(s)	1g		No
Purchase of assets from related organization(s)	1h		No
Exchange of assets with related organization(s)	1i		No
Lease of facilities, equipment, or other assets to related organization(s)	1j		No
		i '	
Lease of facilities, equipment, or other assets from related organization(s)	1k		No
Performance of services or membership or fundraising solicitations for related organization(s)	11	Yes	
n Performance of services or membership or fundraising solicitations by related organization(s)	1m		No
Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n	Yes	
Sharing of paid employees with related organization(s)	10	Yes	
	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 uring the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV? Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity Gift, grant, or capital contribution from related organization(s) Gift, grant, or capital contribution from related organization(s) Loans or loan guarantees to or for related organization(s) Loans or loan guarantees by related organization(s) Dividends from related organization(s) Sale of assets to related organization(s) Exchange of assets mrelated organization(s) Lease of facilities, equipment, or other assets to related organization(s) Performance of services or membership or fundraising solicitations for related organization(s) Performance of services or membership or fundraising solicitations by related organization(s) Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	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 uring the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV? Receipt of (i) interest, (iii) annuities, (iii) royalties, or (iv) rent from a controlled entity Ia Gift, grant, or capital contribution to related organization(s) Ic Loans or loan guarantees to or for related organization(s) Loans or loan guarantees by related organization(s) If Sale of assets to related organization(s) Purchase of assets to related organization(s) Exchange of assets with related organization(s) Lease of facilities, equipment, or other assets to related organization(s) Lease of facilities, equipment, or other assets from related organization(s) Performance of services or membership or fundraising solicitations by related organization(s) In Performance of services or membership or fundraising solicitations by related organization(s) In Performance of services or membership or fundraising solicitations by related organization(s) In Performance of services or membership or fundraising solicitations by related organization(s)	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 uring the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV? Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity Ia. Gift, grant, or capital contribution to related organization(s) Gift, grant, or capital contribution from related organization(s) Loans or loan guarantees to or for related organization(s) Loans or loan guarantees by related organization(s) Dividends from related organization(s) Purchase of assets to related organization(s) Exchange of assets to related organization(s) Exchange of assets with related organization(s) Lease of facilities, equipment, or other assets from related organization(s) Performance of services or membership or fundraising solicitations for related organization(s) Performance of services or membership or fundraising solicitations by related organization(s) In Yes Sharing of facilities, equipment, mailing lists, or other assets with 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
(1) BUILDING FOR THE FUTURE	R	1,245,860	COST

No

1q Yes

Yes

Yes

1r

Part VI Unrelated Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

Name, address, and EIN of entity Name, address, and ent	[·								
514)			Legal domicile (state or foreign	Predominant income (related, unrelated, excluded from tax under	50 orga	all partners section 01(c)(3)	Share of total	Share of end-of-year	Disproprtiona		Code V-UBI amount in box 20 of Schedule K-1	General or managing		Percentage
				514)	Yes	No	1		Yes	No	ı İ	Yes	No	
					اتــــــــــــــــــــــــــــــــــــ				163					ļ

Schedule R (Form 990) 2014

Part VII Supplemental Information

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

Return Reference Explanation

Schedule R (Form 990) 2014

Page **5**

Software ID: **Software Version:**

EIN: 13-3238657

Name: NONPROFIT FINANCE FUND

Form 990, Schedule R, Part III -	- Identification of Related	d Organizations Taxa	ble as a Partnership
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Form 990, Schedule R, Part III - Identification of Related Organizations Taxable as a Partnership (c) (e) (h) (i) (i)										
(a) Name, address, and EIN of related organization	(b) Primary activity	Legal Domicile (State or Foreign	(d) Direct Controlling Entity	(e) Predominant income(related, unrelated, excluded from	(f) Share of total Income	(g) Share of end-of- year assets	(h) Disproprtional allocations?	(i) te Code V-UBI amount In Box 20 of Schedule K-1	Canara	Percentage g ownership
		Country)		tax under sections 512-514)			·	(Form 1065)	.	
NFF NEW MARKETS FUND I LLC	FINANCE PROJECTS THAT BENEFIT SMALL AND		NONPROFIT FINANCE FUND	RELATED	28	7	Yes No		Yes No	0 010 %
70 WEST 36TH STREET 11TH FL NEW YORK, NY 10018	MIDDLE-SIZED NONPROFITS		TOND							
20-5899397 NFF NEW MARKETS FUND II LLC	FINANCE PROJECTS THAT BENEFIT SMALL AND		NONPROFIT FINANCE FUND	RELATED			No		Yes	0 010 %
70 WEST 36TH STREET 11TH FL NEW YORK, NY 10018 20-5899444	MIDDLE-SIZED NONPROFITS									
NFF NEW MARKETS FUND III LLC	FINANCE PROJECTS THAT BENEFIT SMALL AND		NONPROFIT FINANCE FUND	RELATED	2	1,149	No		Yes	0 010 %
70 WEST 36TH STREET 11TH FL NEW YORK, NY 10018 26-1409447	MIDDLE-SIZED NONPROFITS									
NFF NEW MARKETS FUND IV LLC	THAT BENEFIT SMALL AND		NONPROFIT FINANCE FUND	RELATED	4	744	No		Yes	0 010 %
70 WEST 36TH STREET 11TH FL NEW YORK, NY 10018 26-3757583	MIDDLE-SIZED NONPROFITS									
NFF NEW MARKETS FUND V LLC	THAT BENEFIT SMALL AND		NONPROFIT FINANCE FUND	RELATED	1	985	No		Yes	0 010 %
70 WEST 36TH STREET 11TH FL NEW YORK, NY 10018 26-3757655	MIDDLE-SIZED NONPROFITS									
NFF NEW MARKETS FUND VI LLC	FINANCE PROJECTS THAT BENEFIT SMALL AND		NONPROFIT FINANCE FUND	RELATED	1	986	No		Yes	0 010 %
70 WEST 36TH STREET 11TH FL NEW YORK, NY 10018 26-3757776	MIDDLE-SIZED NONPROFITS									
NFF NEW MARKETS FUND VII LLC	THAT BENEFIT SMALL AND		NONPROFIT FINANCE FUND	RELATED	54	1,382	No		Yes	0 010 %
70 WEST 36TH STREET 11TH FL NEW YORK, NY 10018 26-3757955	MIDDLE-SIZED NONPROFITS									
NFF NEW MARKETS FUND VIII LLC	THAT BENEFIT SMALL AND		NONPROFIT FINANCE FUND	RELATED	1	1,095	No		Yes	0 010 %
70 WEST 36TH STREET 11TH FL NEW YORK, NY 10018 26-3758074	MIDDLE-SIZED NONPROFITS									
NFF NEW MARKETS FUND IX LLC	THAT BENEFIT SMALL AND		NONPROFIT FINANCE FUND	RELATED	34	1,189	No		Yes	0 010 %
70 WEST 36TH STREET 11TH FL NEW YORK, NY 10018 26-3758286	MIDDLE-SIZED NONPROFITS									
NFF NEW MARKETS FUND X LLC 70 WEST 36TH STREET	FINANCE PROJECTS THAT BENEFIT SMALL AND MIDDLE-SIZED		NONPROFIT FINANCE FUND	RELATED	11	989	No		Yes	0 010 %
11TH FL NEW YORK, NY 10018 26-3758444	NONPROFITS									
NFF NEW MARKETS FUND XI LLC	THAT BENEFIT SMALL AND		NONPROFIT FINANCE FUND	RELATED	46	1,561	No		Yes	0 010 %
70 WEST 36TH STREET 11TH FL NEW YORK, NY 10018 26-3758447	MIDDLE-SIZED NONPROFITS									
NFF NEW MARKETS FUND XII LLC	THAT BENEFIT SMALL AND		NONPROFIT FINANCE FUND	RELATED	6	830	No		Yes	0 010 %
70 WEST 36TH STREET 11TH FL NEW YORK, NY 10018 27-3226575	MIDDLE-SIZED NONPROFITS									
NFF NEW MARKETS FUND XIII LLC	FINANCE PROJECTS THAT BENEFIT SMALL AND		NONPROFIT FINANCE FUND	RELATED	5	795	No		Yes	0 010 %
70 WEST 36TH STREET 11TH FL NEW YORK, NY 10018 27-3226658	MIDDLE-SIZED NONPROFITS									
NFF NEW MARKETS FUND XIV LLC	THAT BENEFIT SMALL AND		NONPROFIT FINANCE FUND	RELATED	2	495	No		Yes	0 010 %
70 WEST 36TH STREET 11TH FL NEW YORK, NY 10018 27-3226785	MIDDLE-SIZED NONPROFITS									
NFF NEW MARKETS FUND XV LLC	FINANCE PROJECTS THAT BENEFIT SMALL AND		NONPROFIT FINANCE FUND	RELATED	4	796	No		Yes	0 010 %
70 WEST 36TH STREET 11TH FL NEW YORK, NY 10018	MIDDLE-SIZED NONPROFITS									
27-3227041	l		I	I			ı I		i l	

Form 990, Schedule R, Part III - Identification of Related Organizations Taxable as a Partnership (c) (e)

Form 990, Schedule R, Part III - Identification of Related Organizations Taxable as a Partnership (c) (b) (j)												
(a) Name, address, and EIN of related organization	Primary activity	Legal Domicile (State or Foreign Country)	Controlling Entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512-514)	(f) Share of total Income	(g) Share of end-of- year assets	anocatio		(i) Code V-UBI amount in Box 20 of Schedule K-1 (Form 1065)	Gene or Manag Partn	ral ging er?	(k) Percentage ownership
XVI LLC 70 WEST 36TH STREET 11TH FL	FINANCE PROJECTS THAT BENEFIT SMALL AND MIDDLE-SIZED NONPROFITS		NONPROFIT FINANCE FUND	RELATED		987		No		Yes		0 010 %
NEW YORK, NY 10018 27-3227226						1 001						
	FINANCE PROJECTS THAT BENEFIT SMALL AND MIDDLE-SIZED NONPROFITS		NONPROFIT FINANCE FUND	RELATED	41	1,091		No		Yes		0 010 %
XVIII LLC	FINANCE PROJECTS THAT BENEFIT SMALL AND MIDDLE-SIZED NONPROFITS	NY	NONPROFIT FINANCE FUND	RELATED	1	398		No		Yes		0 010 %
XIX LLC 70 WEST 36TH STREET	FINANCE PROJECTS THAT BENEFIT SMALL AND MIDDLE-SIZED NONPROFITS	NY	NONPROFIT FINANCE FUND	RELATED	4	893		No		Yes		0 010 %
NFF NEW MARKETS FUND XX LLC 70 WEST 36TH STREET	FINANCE PROJECTS THAT BENEFIT SMALL AND MIDDLE-SIZED NONPROFITS	NY	NONPROFIT FINANCE FUND	RELATED	1	597		No		Yes		0 010 %
NFF NEW MARKETS FUND XXI LLC 70 WEST 36TH STREET	FINANCE PROJECTS THAT BENEFIT SMALL AND MIDDLE-SIZED NONPROFITS		NONPROFIT FINANCE FUND	RELATED	1	996		No		Yes		0 010 %
NFF NEW MARKETS FUND XXII LLC 70 WEST 36TH STREET	FINANCE PROJECTS THAT BENEFIT SMALL AND MIDDLE-SIZED NONPROFITS		NONPROFIT FINANCE FUND	RELATED		797		No		Yes		0 010 %
XXIII LLC 70 WEST 36TH STREET	FINANCE PROJECTS THAT BENEFIT SMALL AND MIDDLE-SIZED NONPROFITS	NY	NONPROFIT FINANCE FUND	RELATED	3	700		No		Yes		0 010 %
	FINANCE PROJECTS THAT BENEFIT SMALL AND MIDDLE-SIZED NONPROFITS	NY	NONPROFIT FINANCE FUND	RELATED	-2	498		No		Yes		0 010 %
NFF NEW MARKETS FUND XXV LLC 70 WEST 36TH STREET 11TH FL NEW YORK, NY 10018 27-3228011	FINANCE PROJECTS THAT BENEFIT SMALL AND MIDDLE-SIZED NONPROFITS	NY	NONPROFIT FINANCE FUND	RELATED	4	996		No		Yes		0 010 %
NFF NEW MARKETS WAREHOUSE LLC 70 WEST 36TH STREET 11TH FL NEW YORK, NY 10018 20-5899492	FINANCE PROJECTS THAT BENEFIT SMALL AND MIDDLE-SIZED NONPROFITS		NONPROFIT FINANCE FUND	RELATED	21	533		No		Yes		0 010 %
INVESTMENT FUND LLC 70 WEST 36TH STREET	FINANCE PROJECTS THAT BENEFIT SMALL AND MIDDLE-SIZED NONPROFITS		NONPROFIT FINANCE FUND	RELATED	-3	653		No		Yes		0 010 %
INVESTMENT FUND LLC 70 WEST 36TH STREET	FINANCE PROJECTS THAT BENEFIT SMALL AND MIDDLE-SIZED NONPROFITS		NONPROFIT FINANCE FUND	RELATED	-5	758		No		Yes		0 010 %