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# Form 990

Department of the Treasury Internal Revenue Service

#### **Return of Organization Exempt From Income Tax**

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

- ▶ Do not enter social security numbers on this form as it may be made public
- ► Information about Form 990 and its instructions is at <a href="https://www.irs.gov/foim990">www.irs.gov/foim990</a>

OMB No 1545-0047

2015

Open to Public Inspection

itemic	l Revenue	Service											
Fo	r the 20:	5 calendar year, or tax year beginnin	g 01-01-2015 , and ending 12-31-20	)15									
_	ck if applic	NATIONAL EQUITY FUND INC			D Emplo	yer i	dentification number						
_	dress chan	0/2 VIEA DENIV			36-34	4902	31						
_	me change tıal return	Doing business as											
— Fir	nal	Number and street (or D.O. hourst m	all a not delivered to street address.) Decree	uuta.	_ E Teleph	one nu	umber						
	terminated ended retu	10 S RIVERSIDE PLAZA Suite STE 170	ail is not delivered to street address) Room/s	suite	(312)	360	-0400						
	ended retu dication pe		try, and ZIP or foreign postal code										
		CHICAGO, IL 60606			<b>G</b> Gross	receipt	ts \$ 55,675,713						
		<b>F</b> Name and address of princip	al officer	H(a) Is t	hıs a group	retu	rn for						
		JOSEPH HAGAN 10 S RIVERSIDE PLAZA		sub	ordinates?		☐ Yes 🗸						
		CHICAGO,IL 60606		No H(b) Are	o all subord	ınate	s — —						
Tax	-exempt s	tatus	(insert no ) 4947(a)(1) or 527	incl	uded?		Tes   No						
w	ebsite: ▶	WWW NEFINC ORG			•		t (see instructions)						
					oup exempt formation 19		number ►  M State of legal domicile IL						
Forn	of organiz	ation 🗸 Corporation   Trust   Associa	tion Other ►		ioimadon 15	707	FI State of legal doffficile IL						
Pa	rt I	Summary											
	<b>1</b> Briefl	y describe the organization's mission	_										
		- · · · · · · · · · · · · · · · · · · ·	CATED TO SUPPORTING THE DEV NG IN DISINVESTED COMMUNITI		AND PRES	ERV	ATION OF HIGH-						
,	<u> </u>	THE NEW PROPERTY OF THE PROPER	NO IN DISINVESTED COMMONITY										
,	<b>7</b> Cho	sk this how • Fifthe organization di	continued the energtions or disposed	l of more than	2 E 0/ of the	not.	accets						
3	2 Cite	the organization dis	scontinued its operations or disposed	i oi more mai	1 2 3 % 01 10	s net	assets						
5	3 Num	ber of voting members of the governi	ng body (Part VI, line 1a)			3	17						
	<b>4</b> Num	ber of independent voting members o	f the governing body (Part VI, line 1b	)		4	13						
	<b>5</b> Tota	al number of individuals employed in calendar year 2015 (Part V , line 2a)											
ť	<b>6</b> Tota	I number of volunteers (estimate if ne	ecessary)			6	0						
			rt VIII, column (C), line 12			7a	0						
	<b>b</b> Netu	nrelated business taxable income fro	m Form 990-T, line 34			7b							
	• 0		413	Pr	ior Year		Current Year						
<u> </u>		ontributions and grants (Part VIII, lii rogram service revenue (Part VIII, lii	•	•	42 102	0	52,341,811						
ēn Uō Aē		nvestment income (Part VIII, column			43,192, 151,		260,191						
Ϋ́ Ϋ́		ther revenue (Part VIII, column (A),		•	1,144,	_	3,073,711						
			(must equal Part VIII, column (A), lii	ne	44,489,		55,675,713						
		2)			44,409,	204							
		· · ·	IX, column (A), lines 1-3)		6,132,		7,579,000						
	_	enefits paid to or for members (Part I		•		0	0						
£		alaries, other compensation, employe - 10)	e benefits (Part IX, column (A), lines		24,265,	27,726,532							
SCE	<b>16</b> a P	rofessional fundraising fees (Part IX,	column (A), line 11e)			0	0						
Expenses	<b>b</b> To	otal fundraising expenses (Part IX, column (D)	, line 25) ▶ <mark>0</mark>										
-	<b>17</b> O	ther expenses (Part IX, column (A), l	ınes 11a-11d, 11f-24e)		15,393,	453	17,404,055						
	<b>18</b> T	otal expenses Add lines 13-17 (mus	st equal Part IX, column (A), line 25)		45,791,	389	52,709,587						
Œ	<b>19</b> R	evenue less expenses Subtract line	18 from line 12	-	-1,302,	105	2,966,126						
Fund Balances				Beginning	of Current	Year	End of Year						
alai	<b>20</b> T	otal assets (Part X, line 16)			71,740,	591	84,676,239						
(B)		otal liabilities (Part X, line 26)		36,743,	-	46,745,832							
3	<b>22</b> N	et assets or fund balances Subtract	line 21 from line 20		34,996,	691	37,930,407						
		ignature Block											
			mined this return, including accompa plete Declaration of preparer (other)										
		ny knowledge	place Decidiation of preparer (other)	and officer) I	S Basea on	un II							
	T k	*** ** *			2046 44 15								
ias		Signature of officer			2016-11-10 Date								
ign Iere		ALEX DENJA SVP TREAS & CFO											
		Type or print name and title											
	1,	Print/Type preparer's name MARGARET A BRADSHAW CPA		Date 2016-11-11 C	heck   If	PTIN	I 501222						
) aic	ı	The state of the s			lf-employed	1 . 55.							

► KPMG LLP

Firm's address ▶ 1676 International Drive Ste 1200

McLean, VA 22102

Fırm's name

**Preparer** 

**Use Only** 

Phone no (703) 286-8000

. ✓Yes No

orm	990 (2015)			Page <b>3</b>
Par	t IV Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1		No
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		No
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
	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		
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 I	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		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Pait V 🔰	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			
	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
С	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		No
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	<b>11</b> d		No
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Yes	
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	<b>11</b> f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year?  If "Yes," complete Schedule D, Parts XI and XII 2	<b>12</b> a		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	<b>12</b> b	Yes	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
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? If "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 $11e^{9}$ 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		No
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		

Form	1 990 (2015)			Page <b>4</b>
Pai	rt 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? If "Yes," complete Schedule J	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

24b

24c

24d

25a

25h

26

27

28a

28b

28c

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34

352

35b

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37

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Yes

Yes

Yes

Yes

Form 990 (2015)

Νo

Nο

Νo

Nο

Nο

Νo

Νo

Nο

Nο

Nο

Νo

Νo

Nο

**b** Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . . .

c Did the organization maintain an escrow account other than a refunding escrow at any time during the year

**d** Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? . . .

**b** Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior

32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?

35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?

year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?

or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons?

27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial

**b** A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L,

c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was

Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I .

an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV . . . . . . 29

Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M . . .

30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified

33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations

b If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled

and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?

contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family

Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes,"

25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.

31

instructions for applicable filing thresholds, conditions, and exceptions)

Pai	t V	Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this R		<b>N</b>			_
		Check if Schedule O Condains a response of note to any line in this r	Part	v	· ·	Yes	. No
1a	Enter	the number reported in Box 3 of Form 1096 Enter -0- if not applicable	1a	97			
b	Enter	the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b	0			
c		e organization comply with backup withholding rules for reportable payments to g (gambling) winnings to prize winners?	vend	dors and reportable	1c	Yes	
2a	Enter Tax St	the number of employees reported on Form W-3, Transmittal of Wage and tatements, filed for the calendar year ending with or within the year covered	2a	176			
b	If at le	s return	loym	ent tax returns?	2b	Yes	
3a	Did th	e organization have unrelated business gross income of \$1,000 or more during	the	year?	3a		No
b	If "Yes	s," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanatio	n in S	Schedule O	3b		
4a	over, a	r time during the calendar year, did the organization have an interest in, or a sig a financial account in a foreign country (such as a bank account, securities acc nt)?			4a		No
b	If "Yes See in (FBAR	s," enter the name of the foreign country   structions for filing requirements for FinCEN Form 114, Report of Foreign Bank  )	and	Financial Accounts			
5a	Was th	he organization a party to a prohibited tax shelter transaction at any time durin	g the	tax year?	5a		No
b	Did an	ly taxable party notify the organization that it was or is a party to a prohibited t	ax sh	elter transaction?	5b		No
С	If"Yes	s," to line 5a or 5b, did the organization file Form 8886-T?					
6a		the organization have annual gross receipts that are normally greater than \$10		·	5c 6a		No
b	If"Yes	zation solicit any contributions that were not tax deductible as charitable conti s," did the organization include with every solicitation an express statement th iot tax deductible?	at su	ch contributions or gifts	6b		
7		izations that may receive deductible contributions under section 170(c).					
	Did th	e organization receive a payment in excess of \$75 made partly as a contribution es provided to the payor?		d partly for goods and	7a		
b	If"Yes	s," did the organization notify the donor of the value of the goods or services pr	ovide	ed?	<b>7</b> b		
	file Fo	e organization sell, exchange, or otherwise dispose of tangible personal propert rm 8282?			<b>7</b> c		
d	If"Yes	s," indicate the number of Forms 8282 filed during the year	7d				
е	Dıd th	e organization receive any funds, directly or indirectly, to pay premiums on a po	erson	al benefit contract?	7e		
f	Did th	e organization, during the year, pay premiums, directly or indirectly, on a perso	nal b	enefit contract?	7f		
g	If the require	organization received a contribution of qualified intellectual property, did the or ed?	rganız • •	ation file Form 8899 as	7g		
h		organization received a contribution of cars, boats, airplanes, or other vehicles	, dıd	the organization file a	7h		
8	Did a	oring organizations maintaining donor advised funds. donor advised fund maintained by the sponsoring organization have excess bus the year?	ines:	s holdings at any time	8		
9a	Did th	e sponsoring organization make any taxable distributions under section 4966?			9a		
b	Did th	e sponsoring organization make a distribution to a donor, donor advisor, or rela	ted p	erson?	<b>9</b> b		
10	Sectio	on 501(c)(7) organizations. Enter					
			10a				
Ь	Gross facılıtı		10b				
11		n 501(c)(12) organizations. Enter					
		F	11a				
D		income from other sources (Do not net amounts due or paid to other sources amounts due or received from them )	11b				
		on 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990	ın lıe	u of Form 1041?	12a		
	year	L	12b				
13	Sectio	on 501(c)(29) qualified nonprofit health insurance issuers.					
а		organization licensed to issue qualified health plans in more than one state? <b>N</b> o onal information the organization must report on Schedule O	ote. S	ee the instructions for	13a		
b		the amount of reserves the organization is required to maintain by the states ch the organization is licensed to issue qualified health plans	13b				
c	Enter	the amount of reserves on hand	<b>13</b> c				
14a	Dıd th	e organization receive any payments for indoor tanning services during the tax	year	?	14a		No
b	If"Yes	s," has it filed a Form 720 to report these payments? <i>If "No," provide an explana</i> t	tion ir	Schedule O	14b		

orm	990 (2015)						Рa
Par	<b>TVI</b> Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" describe the circumstances, processes, or changes in Schedule O. S.	,		s 8a, 8b,	or 10	)b belo	w,
	Check if Schedule O contains a response or note to any line in this Part VI		 				
Se	ction A. Governing Body and Management						
						Yes	N
1a	Enter the number of voting members of the governing body at the end of the tax year	1a		17			
	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						

	,			_		
	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	1b	1	3		
2	Did any officer, director, trustee, or key employee have a family relationship or a bu other officer, director, trustee, or key employee?	sıness • •	relationship with any	2		No
3	Did the organization delegate control over management duties customarily performs supervision of officers, directors or trustees, or key employees to a management co			3		No
4	Did the organization make any significant changes to its governing documents sincifiled?	e the p	rior Form 990 was	4		No
5	Did the organization become aware during the year of a significant diversion of the o	rganız	ation's assets?	5		No
6	Did the organization have members or stockholders?			6	Yes	
7a	Did the organization have members, stockholders, or other persons who had the powmore members of the governing body?	wer to	elect or appoint one or	7a	Yes	
b	Are any governance decisions of the organization reserved to (or subject to approve or persons other than the governing body?		members, stockholders	s, <b>7b</b>		No
8	Did the organization contemporaneously document the meetings held or written active year by the following	ions ui	ndertaken during the			
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, organization's mailing address? If "Yes," provide the names and addresses in Schedule			ne <b>9</b>		No
Se	ection B. Policies (This Section B requests information about policies not	requi	red by the Internal	Reven	ue Cod	e.)
					Yes	No
0a	Did the organization have local chapters, branches, or affiliates?			10a		No
b	If "Yes," did the organization have written policies and procedures governing the ac affiliates, and branches to ensure their operations are consistent with the organization			10b		
1a	Has the organization provided a complete copy of this Form 990 to all members of ithe form?	ts gov	erning body before filin	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this	Form 9	90			
2a	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 annual rise to conflicts?	lly inte	rests that could give	12b	Yes	
С	Did the organization regularly and consistently monitor and enforce compliance with in Schedule O how this was done	the p	olicy? <i>If "Yes," des crib</i> e	e <b>12</b> c	Yes	
_						

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	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	<b>12</b> c	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?	<b>16</b> a	Yes	
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its			

#### Section C. Disclosure

17 List the States with which a copy of this Form 990 is required to be filed	► C A
-------------------------------------------------------------------------------	----------

18	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)

participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the 

- 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  $\,$
- State the name, address, and telephone number of the person who possesses the organization's books and records ►ALEX DENJA 10 S RIVERSIDE PLAZA SUITE 1700 CHICAGO, IL 60606 (312) 360-0400

**16**b

Yes

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

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's

- 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

<b>(A)</b> Name and Title	(B) A verage hours per week (list any hours	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						<b>(D)</b> Reportable compensation from the organization (W-	<b>(E)</b> Reportable compensation from related organizations	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	indradual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	2/1099-MISC)	(W- 2/1099- MISC)	organization and related organizations
See Additional Data Table										

<b>(A)</b> Name and Title	(B) A verage hours per week (list any hours	more t	han on is	one l both	box, an	heck unless officer stee)	5	(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
	for related organizations below dotted line)	individual trustee or director	Institutional Trustee	Officei	key employee	Highest compensated employee	Former			organization and related organizations
See Additional Data Table										
						• •				
c Total from continuation sho d Total (add lines 1b and 1c)	·			٠.	٠.	•		4,959,936	854,761	1,592,538
2 Total number of individuals \$100,000 of reportable cor						d abov	e) wl	ho received more t	han	

Yes No Did the organization list any former officer, director or trustee, key employee, or highest compensated employee 3 Νo For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule I for such 4 Yes Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person . . . . . . . . 5 Νo

### **Section B. Independent Contractors**

\$100,000 of compensation from the organization > 14

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.								
(A) Name and business address	(B) Description of services	(C) Compensation						
HOLLAND AND KNIGHT LLP, 11050 LAKE UNDERHILL ROAD SUITE 864 ORLANDO, FL 32825	LEGAL SERVICES	2,959,978						
NOVOGRADAC COMPANY LLP, 246 FIRST STREET 5TH FLOOR SAN FRANCISCO, CA 94105	AUDIT AND TAX SVCS	2,117,135						
BARNES THORNBURG LLP, 11 SOUTH MERIDIAN STREET INDIANAPOLIS, IN 46204	LEGAL SERVICES	1,465,368						
KPMG LLP, 717 N HARWOOD STREET SUITE 3100 DALLAS, TX 75201	AUDIT AND TAX SVCS	1,254,207						
SPARTA ADVISORS, 1880 MACKENZIE DR STE 200 COLUMBUS, OH 43220	CONSULTING SVCS	1,077,898						
2 Total number of independent contractors (including but not limited to thos	e listed above) who received more than							

orm 99	0 (20	15)						Page <b>9</b>
Part V	/++:	Statement of						_
		Check if Schedule	O contains a respor	se or note to any lin	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
s s	1a	Federated campa	ıgns <b>1a</b>					
Grants mounts	b	Membership dues	1b					
Ę, Ġ	С	Fundraising even	ts <b>1c</b>					
iffs ar A	d	Related organizat	nons 1d					
3, G ⊞	е	Government grants (	contributions) <b>1e</b>					
ion r Si	f	All other contributions						İ
Contributions, Gifts, Grants and Other Similar Amounts	۱ ,	similar amounts not included above  Noncash contributions included in lines						
Contributions, Gifts, and Other Similar A		1a-1f \$						
<u> </u>	h	Total. Add lines 1	.a-1f		0			
El e	3-	LOW INCOME HOUGH	IC DEVENUE	Business Code				
N-S-N	2a b	LOW INCOME HOUSIN	NG REVENUE	531390	52,341,811	52,341,811		1
Program Service Revenue								
	d	c d						
8	е		_					
grai	f	All other program	service revenue					
ĕ	g	Total. Add lines 2	!a-2f		52,341,811			
	3	Investment incor	ne (ıncludıng dıvıdendamounts)	ds, interest,	260,191	260,191		
	4		ent of tax-exempt bond p	-	0	,		
	5	Royalties	<u></u>	🔸	0			
			(ı) Real	(II) Personal				
	6a	Gross rents						
	b	Less rental expenses						
	С	Rental income or (loss)	0	0				
	d	Net rental income	e or (loss)		0			
	7a	Gross amount from sales of assets other than inventory	(ı) Securities	(II) O ther				
	b c d	Less cost or other basis and sales expenses Gain or (loss)			0			
			T		-			
Other Revenue		events (not include \$	_ eported on line 1c)					
er			a					
<b>₽</b>	C D	Less direct expe	nses <b>b</b> [ ss) from fundraising e	events ▶	o			
	9a	•	m gaming activities	,				
	b c	Less direct expenses b		vities	0			
	10a	Gross sales of inverturns and allow						
		Less cost of goo	L					
	С	Net income or (lo Miscellaneous F	ss) from sales of inve	Business Code	0			
	11a	LOAN LOSS REC		900099	2,235,273	2,235,273		
	ь	WORKOUT REIM	-	900099	653,557	653,557		
	С	PROJECT PARTN		900099	24,447	24,447		
	d	DISSOLUTIONS All other revenue			160,434	160,434		
	e	Total. Add lines 1		•	3,073,711			
	12	<b>Total revenue.</b> Se	ee Instructions	•	55,675,713	55,675,713		
	1			1	33,073,713	33,073,713		1

#### Part IX Statement of Functional Expenses

Section $501(c)(3)$ and $501(c)(4)$ organizations must complete all columns. All other organizations must complete column	Section 501(c)	1(3) and 501(c)(4	) organizations must com-	plete all columns All other	er organizations must com	plete column (
---------------------------------------------------------------------------------------------------------------------------	----------------	-------------------	---------------------------	-----------------------------	---------------------------	----------------

	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	<b>(B)</b> Program service expenses	(C) Management and general expenses	( <b>D)</b> Fundraising expenses					
1	Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	7,579,000	7,579,000							
2	Grants and other assistance to domestic individuals See Part IV, line 22	0								
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16	0								
4	Benefits paid to or for members	0								
5	Compensation of current officers, directors, trustees, and key employees	4,165,362	3,534,130	631,232						
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$ ) and persons described in section $4958(c)(3)(B)$	0								
7	Other salaries and wages	19,157,060	16,253,937	2,903,123						
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	1,393,495	1,182,320	211,175						
9	Other employee benefits	1,715,071	1,455,164	259,907						
10	Payroll taxes				· · · · · · · · · · · · · · · · · · ·					
		1,295,544	1,099,213	196,331						
11	Fees for services (non-employees)									
a	Management	0								
b	Legal	6,921,825	5,633,378	1,288,447						
с	Accounting	301,853	239,546	62,307						
d	Lobbying	0								
e	Professional fundraising services See Part IV, line 17	0								
f	Investment management fees	0								
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	4,070,777	3,442,400	628,377						
12	Advertising and promotion	667,600		667,600						
13	Office expenses	699,508	575,275	124,233						
14	Information technology	273,735	229,763	43,972						
15	Royalties	0								
16	Occupancy	1,268,505	978,760	289,745						
17	Travel	1,195,011	1,001,327	193,684						
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0								
19	Conferences, conventions, and meetings	134,171	100,438	33,733						
20	Interest	0								
21	Payments to affiliates	0								
22	Depreciation, depletion, and amortization	550,430	412,822	137,608						
23	Insurance	494,814	446,492	48,322						
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	LOAN ALLOWANCE	379,143	379,143	0	ı					
b	EQUIPMENT RENTAL	137,594	103,310	34,284						
c	BANK & FINANCE CHARGES	118,698	99,290	19,408						
d	SUNDRY TAXES	49,512	41,417	8,095						
е	All other expenses	140,879	117,254	23,625						
25	Total functional expenses. Add lines 1 through 24e	52,709,587	44,904,379	7,805,208						
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)									

Form	990 (2	2015)			Page <b>11</b>
Par	t X	Balance Sheet			
		Check if Schedule O contains a response or note to any line in this Part X $$ . $$ .			
			(A) Beginning of year		<b>(B)</b> End of year
	1	Cash-non-interest-bearing	Degining of year	1	End of year
	2	Savings and temporary cash investments	42,053,208	2	42,490,613
	3	Pledges and grants receivable, net	0	3	0
	4	Accounts receivable, net	7.805,408	4	8,853,695
	5	Loans and other receivables from current and former officers, directors, trustees	. ,	·	-,,
Assets		key employees, and highest compensated employees Complete Part II of Schedule L			
			0	5	0
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L			
			0	6	0
Ä	7	Notes and loans receivable, net	14,947,199	7	24,307,942
	8	Inventories for sale or use	0	8	0
	9	Prepaid expenses and deferred charges	610,160	9	651,876
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D  10a 6,633,83	-		
	Ь	Less accumulated depreciation <b>10b</b> 3,375,52	+	<b>10</b> c	3,258,316
	11	Investments—publicly traded securities	0	11	0
	12	Investments—other securities See Part IV, line 11	0	12	0
	13	Investments—program-related See Part IV, line 11	2,611,343	13	2,474,391
	14	Intangible assets	0	14	0
	15	Other assets See Part IV, line 11	279,053	15	2,639,406
	16	Total assets.Add lines 1 through 15 (must equal line 34)	71,740,591	16	84,676,239
	17	Accounts payable and accrued expenses	10,258,476	17	17,071,239
	18	Grants payable	0	18	0
	19	Deferred revenue	3,388,310	19	4,399,495
	20	Tax-exempt bond liabilities	0	20	0
	21	Escrow or custodial account liability $\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \$	0	21	0
lities	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified			
Liabi		persons Complete Part II of Schedule L	0	22	0
Ë	23	Secured mortgages and notes payable to unrelated third parties	0	23	0
	24	Unsecured notes and loans payable to unrelated third parties	0	24	0
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D			
			23,097,114	25	25,275,098
	26	Total liabilities. Add lines 17 through 25	36,743,900	26	46,745,832
Balances		Organizations that follow SFAS 117 (ASC 958), check here ▶			
ılar	27	Unrestricted net assets	34,996,691	27	37,930,407
æ	28	Temporarily restricted net assets	0	28	0

0 29

34,996,691

71,740,591

30

31

32

33

34

0

37,930,407

84,676,239

Form 990 (2015)

Permanently restricted net assets . .

Total net assets or fund balances . .

Capital stock or trust principal, or current funds .

complete lines 30 through 34.

Organizations that do not follow SFAS 117 (ASC 958), check here ▶ □ and

Paid-in or capital surplus, or land, building or equipment fund . . .

Retained earnings, endowment, accumulated income, or other funds

Total liabilities and net assets/fund balances . . . . . .

Total revenue (must equal Part VIII,	columr

Investment expenses .

column (B))

Schedule O

Schedule O

Separate basis

Separate basis

basis, consolidated basis, or both

Prior period adjustments .

n (A ), line 12 ) . . . . . . . Total expenses (must equal Part IX, column (A), line 25) . . . . .

2 3

1

6

7

8

9

10

4 5

34,996,691

Page **12** 

55,675,713

52,709,587

2,966,126

Νo

Nο

Form 990 (2015)

	Yes	No
	37,9	930,407
		-32,410

2a

2b

2c

3a

3b

Yes

Yes

Revenue less expenses Subtract line 2 from line 1 . . . . . . Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) . . . Net unrealized gains (losses) on investments . . . . . . Donated services and use of facilities .

Part XIII Financial Statements and Reporting

1 Accounting method used to prepare the Form 990

a separate basis, consolidated basis, or both

Single Audit Act and OMB Circular A-133?

Other changes in net assets or fund balances (explain in Schedule O) .

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

If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on

If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate

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

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the

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

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

Cash ✓ Accrual Other

Both consolidated and separate basis

Both consolidated and separate basis

10 Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,

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

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

Consolidated basis

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

✓ Consolidated basis

Software ID: Software Version:

**EIN:** 36-3490231

Name: NATIONAL EQUITY FUND INC

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Compensated Employees, and Independent Contractors											
(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	checker office Highest compensated	ess er e)	( <b>D</b> ) 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	
Joseph Hagan President & CEO	18 0 22 0	х		х				560,540	0	218,904	
Larry Dale Chairman	2 0	x		x				11,000	0	(	
Andrew Ditton DIRECTOR	1 9 0 1	×						3,500	0	(	
Helen Dunlap DIRECTOR	2 0	x						10,000	46,511	(	
Eldndge Edgecombe DIRECTOR	2 0	х						13,000	0	(	
Printice Gary DIRECTOR	2 0	х						8,000	0	(	
Michael Hearne DIRECTOR	2 0	×						0	277,052	8,413	
John Lindell DIRECTOR	2 0	×						14,000	0	(	
Robert Mantle DIRECTOR	19	x						0	0	(	
Michael May DIRECTOR	2 0	×						8,000	0	(	

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest **Compensated Employees, and Independent Contractors** ī

52,725

46,817

46,416

377,660

309,420

307,137

(A) Name and Title	(B) Average hours per week (list any hours for related	unles	nore ti ss pe	than ersoi icer	not one on is and		,	(D) Reportable compensation from the organization (W- 2/1099- MISC)	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the organization	
	organizations below dotted line)	individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee			MISC)	and related organizations	
John Mealey	2 0	×					[ '	0	0		
DIRECTOR	0 0	<u> '</u>	L'			'	<u>_'</u>	<u></u> '	1	1	
Herbert Morse	2 0	х						14,000	0	0	
DIRECTOR	0.0	<u> </u>	<u> </u>	Щ'	Щ'	<u> </u>	<u>↓</u> ′	<u> </u>	<b></b> '	<del></del>	
Elizabeth Pugh DIRECTOR	1 9  0 1	x						12,000	О	0	
Michael Rubinger VICE CHAIRMAN	2 0	x		×				0	531,198	48,796	
Edward Sigler DIRECTOR	2 0	x						0	0	0	
Sindy Spivak DIRECTOR	2 0	x						0	0	С	
Knsten Switzer	2 0	х			Г			2,000	0	0	

22 0

Х

Х

DIRECTOR

Kevin Boes

Alex Denia

SVP Treasurer & CFO

SVP Asset Management

SVP

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest

252,495

46,883

192,063

367,286

0

Compensated Employees, and Independent Contractors											
(A) Name and Title	(B) A verage hours per week (list any hours for related	Pos m unle:	ition ore t ss pe	(C (do han erso cer	not one n is and			organization (W- 2/1099-	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the organization and related organizations	
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former		MISC)		
Michael Jacobs SVP Onginations	40 0			×				345,917	0	49,811	
Karen Przypyszny SVP Equity Placement	18 0			×				346,757	0	46,873	
Judy Schneider SVP & Chief Risk Officer	19 0 21 0			×				343,764	0	48,176	
Greg Schuler SVP GENERAL COUNSEL & ASST SEC	18 0			×				311,457	0	46,593	
Mark Sıranovic SVP CAP MARKETS & ASST TREAS	18 0			×				345,140	0	49,705	
Thomas Flanagan VP & Secretary	18 0			×				173,138	0	24,553	

40 0

00 40 0

0 0

Χ

Χ

Χ

250,637

286,711

267,996

364,178

Todd Fabian

Joseph Forgue

Anthony Lyons

Rachel Rhodes

VP

SVP

VP

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Compensated Employees, and Inde	pendent co	ntrac	LOF	5			i i	i	i	
(A)	(B)			(C	)		(D)	(E)	(F)	
Name and Title	A verage hours per week (list any hours for related organizations below dotted line)	m unle:	ore t ss pe	(do han erso cer tor/t	not one n is and rust	tee)	Reportable compensation from the organization (W- 2/1099- MISC)	Reportable compensation from related organizations (W- 2/1099- MISC)	Estimated amount of other compensation from the organization and related organizations	
Ed Simon SVP/Chief Information Officer	40 0					×	273,984	0	46,029	

**SCHEDULE D** 

(Form 990)

Treasury

Department of the

### **Supplemental Financial Statements**

▶ Complete if the organization answered "Yes," on 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 <a href="www.irs.gov/form990">www.irs.gov/form990</a>.

OMB No 1545-0047

DLN: 93493319071336

Open to Public Inspection

Na	nal Revenue Service   me of the organization TIONAL EQUITY FUND INC			Empl	oyer identification number					
					490231					
Pa	Organizations Maintaining Donor Complete if the organization answere			nds c	or Accounts.					
		(a) Donor advised funds		(b)Funds and other accounts						
1	Total number at end of year									
2	Aggregate value of contributions to (during year)									
3	Aggregate value of grants from (during year)									
4	Aggregate value at end of year									
5	Did the organization inform all donors and donor a funds are the organization's property, subject to t			r advis	sed Yes No					
6	Did the organization inform all grantees, donors, a used only for charitable purposes and not for the conferring impermissible private benefit?				purpose Yes No					
Pa	rt III Conservation Easements. Comple	te if the organization answered	d "Yes" or	n Form	n 990, Part IV, line 7.					
1	Purpose(s) of conservation easements held by th	e organization (check all that apply)	)							
	Preservation of land for public use (e g , recreeducation)		atıon of an	histor	ically important land area					
	Protection of natural habitat	Preserva	ation of a c	ertifie	d historic structure					
	Preservation of open space									
2	Complete lines 2a through 2d if the organization easement on the last day of the tax year	held a qualified conservation contrib	oution in th	e form	of a conservation					
					Held at the End of the Year					
а	Total number of conservation easements		L	2a						
b	Total acreage restricted by conservation easeme	nts		2b						
c	Number of conservation easements on a certified	historic structure included in (a)		<b>2</b> c						
d	Number of conservation easements included in (o historic structure listed in the National Register	) acquired after 8/17/06, and not o	n a	2d						
3	Number of conservation easements modified, trai	nsferred, released, extinguished, or	terminated	by the	e organization during the					
	tax year <b>▶</b>									
4	Number of states where property subject to cons	ervation easement is located <b>&gt;</b>		_						
5	Does the organization have a written policy regar violations, and enforcement of the conservation e	- · · · · · · · · · · · · · · · · · · ·	tion, handl	ing of	☐ Yes ☐ No					
6	Staff and volunteer hours devoted to monitoring, year	nspecting, handling of violations, ar	nd enforcın	ig cons	ervation easements during the					
	<b>-</b>									
7	Amount of expenses incurred in monitoring, insper-	ecting, handling of violations, and en	nforcing co	nserva	tion easements during the year					
8	Does each conservation easement reported on lii (B)(i) and section 170(h)(4)(B)(ii)?	ne 2(d) above satisfy the requiremen	nts of sect	ion 17	0(h)(4) <b>Yes No</b>					
9	In Part XIII, describe how the organization report balance sheet, and include, if applicable, the text the organization's accounting for conservation ea	of the footnote to the organization's			se statement, and					
Pai	<b>Organizations Maintaining Collect</b> Complete if the organization answere			r Oth	er Similar Assets.					
1a	If the organization elected, as permitted under SF works of art, historical treasures, or other similar service, provide, in Part XIII, the text of the footi	AS 116 (ASC 958), not to report in assets held for public exhibition, ec	n its reveni ducation, o	r resea	arch in furtherance of public					
b	TTU									

If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the

following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

(i) Revenue included on Form 990, Part VIII, line 1

Revenue included on Form 990, Part VIII, line 1

(ii) Assets included in Form 990, Part X

Assets included in Form 990, Part X

**>** \$ \_

Par	t III	Organizations Maintaining (continued)	Collections of A	rt, His	torio	cal T	rea	sures, or	Oth	ner Similar	Asse	ets	
3		the organization's acquisition, accetion items (check all that apply)	ession, and other reco	ords, ch	neck a	ın <b>y</b> of	the f	ollowing tha	t are	a significant u	se of	its	
а		Public exhibition		d		Loai	nore	exchange pr	ogra	ms			
b		Scholarly research		e	Г	Oth	er						
C		Preservation for future generations											
4	Provi Part )	de a description of the organization's	s collections and exp	laın ho	w they	furth	er th	e organizati	on's	exempt purpos	e in		
5		g the year, did the organization solions to be sold to raise funds rather the								ımılar <b>🗆 Y</b>	es	∏ No	)
Pa	rt IV	Escrow and Custodial Arra Complete if the organization a Part X, line 21.		Form	990,	Part	IV, I	ıne 9, or r	еро	rted an amou	ınt o	n Forr	n 990,
1a		e organization an agent, trustee, cus ded on Form 990, Part X?	todian or other intern	nediary	forco	ontrib	ution	s or other a	sset	s not	es	┌ No	•
ь	If'	Yes," explain the arrangement in Pa	art XIII and complete	the fol	lowing	g table	e		Γ	Α	moun	t	
c		ginning balance	·		_			1	.c				
d		ditions during the year						1	.d				
e		tributions during the year						1	.e				
f		ding balance						1	lf				
<b>2</b> a		ne organization include an amount of	n Form 990, Part X, Iı	ne 21,	for es	crow	or cu	stodial acco	ount	liability? <b>Y</b>	es	┌ No	)
b	If"∀e	es," explain the arrangement in Part	XIII Check here if th	ne evnl	anatio	ın has	hee	n provided ii	n Pa	rt XIII			П
Pa	rt V	Endowment Funds. Comple											
		·	(a)Current year		or year			Two years back	<del>-</del> i-	Three years back		<b>)</b> Four ye	ars back
<b>1</b> a	Begır	nning of year balance											
b	Cont •	ributions · · · · · · · ·											
c	Netı losse	nvestment earnings, gains, and es											
d	Gran	ts or scholarships											
e		r expenditures for facilities programs											
f	A dmi	nistrative expenses							+				
g		of year balance											
2	Provi	de the estimated percentage of the (	current vear end bala	nce (lır	ne 1a.	colun	nn (a	)) held as					
а		I designated or quasi-endowment	<b>,</b>					,,					
ь													
		anent endowment ▶											
С	The p	orarily restricted endowment ► ercentages on lines 2a, 2b, and 2c	•										
За		nere endowment funds not in the pos ization by	ssession of the organ	ızatıon	that a	re hel	ld and	d administei	ed f	or the		Yes	No
		related organizations									3a(i)		
		lated organizations								[3	a(ii)		
b		rs" on 3a(II), are the related organization. The In Part XIII the Intended uses of					· ·		•		3b		
4 Da	rt VI	Land, Buildings, and Equip		naowin	entiu	nus							
	I C VI	Complete if the organization a		orm 9	90, P	art I	V, lır	ne 11a.See	e Fo	rm 990, Part	X, lı	ne 10.	
		Description of property				<b>a)</b> ther ba	asıs	<b>(b)</b> Cost or other b (other)		Accumulate (c)depreciation	d		k value
1a	Land				(			(30.10.)			$\dashv$		
		gs									0		
		old improvements		. —				3,197	,175	1,213,		:	1,983,687
		nent		. $\vdash$				2,108		1,513,	-		595,549
	Other							1 327			-		679 080

Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c))

(1)Financial	See Form 990, Part X, line 12.  (a) Description of security or categor (including name of security)  derivatives held equity interests	ry	(b)Book value	(c)Method of valuation Cost or end-of-year market value
(2)Closely-h				
	inera equity interests			
Total. (Columr	n (b) must equal Form 990, Part X, col (B) line 12)	•		
Part VIII	<b>Investments—Program Related.</b> Complete if the organization answere	ed 'Yes' on Form 9	90, Part IV, line 11c.s,	ee Form 990 Part X June 13
	(a) Description of investment		(b) Book value	(c) Method of valuation Cost or end-of-year market value
				Cost of enu-of-year market value
	n (b) must equal Form 990, Part X, col (B) line 13 )	•		
Part IX	Other Assets. Complete if the organizate (a) Des	cription scription	n Form 990, Part IV, line	(b) Book value
Tatal (Colum	on (h) must squal Form CCC. Both V. cal (D) lin	2.15.		
Part X	onn (b) must equal Form 990, Part X, col (B) line  Other Liabilities. Complete if the or		ed 'Yes' on Form 990,	
1.	See Form 990, Part X, line 25.  (a) Description of liability	(b) Book val	ue	
Federal incor	me taxes		0	
	W YORK EQUITY FUND, I	6 56	9,136	
	F COMM INVESTMENTS	16,11		
NOTES PAY	'ABLE TO RELATED ORGS	2,58	9,681	
			<del></del>	
Total /Column	n (b) must equal Form 990, Part X, col (B) line 25 )	<b>▶</b> 25,27	5.098	

Schedule D (Form 990) 2015

Part		venue per Audited Financial Statements With Revenue per zation answered 'Yes' on Form 990, Part IV, line 12a.	er Ro	eturn
1	<u> </u>	support per audited financial statements	1	
2	Amounts included on line 1 but	not on Form 990, Part VIII, line 12		
а	Net unrealized gains (losses) o	n investments 2a		
b	Donated services and use of fa	cilities 2b		
c	Recoveries of prior year grants			
d	Other (Describe in Part XIII )			
e	Add lines 2a through 2d		2e	
3	Subtract line <b>2e</b> from line <b>1</b> .		3	
4	Amounts included on Form 990	, Part VIII, line 12, but not on line <b>1</b>		
а	Investment expenses not inclu	ded on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIII )	4b		
C	Add lines <b>4a</b> and <b>4b</b>		4c	
5	Total revenue Add lines 3 and	<b>4c.</b> (This must equal Form 990, Part I, line 12)	5	
Part		penses per Audited Financial Statements With Expenses zation answered 'Yes' on Form 990, Part IV, line 12a.	per	Return.
1	Total expenses and losses per	audited financial statements	1	
2	A mounts included on line 1 but	not on Form 990, Part IX, line 25		
а	Donated services and use of fa	cilities 2a		
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII )			
e	Add lines 2a through 2d		2e	
3	Subtract line $\bf 2e$ from line $\bf 1$ .		3	
4	A mounts included on Form 990	Part IX, line 25, but not on line 1:		
а	Investment expenses not inclu	ded on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII )	4b		
c	Add lines 4a and 4b		4c	
5	Total expenses Add lines 3 an	d <b>4c.</b> (This must equal Form 990, Part I, line 18)	5	
Part	XIII Supplemental Info	ormation		
Provid Part V Inform	, line 4, Part X, line 2, Part XI,	Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to p	provid	ie any additional
	Return Reference	Explanation		

OF DECEMBER 31, 2015

IN UNRECOGNIZED TAX BENEFITS DUE TO CHANGES IN TAX pOSITIONS WITHIN ONE YEAR

Schedule D (Form 990) 2015		Page <b>5</b>				
Part XIII Supplemental Information (continued)						
Return Reference	Explanation					

efile GRAPHIC print - DO NOT PROCESS DLN: 93493319071336 As Filed Data -OMB No 1545-0047 Schedule I Grants and Other Assistance to Organizations, (Form 990) 2015 Governments and Individuals in the United States Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22. Open to Public Attach to Form 990. Department of the Inspection ▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990. Treasury Internal Revenue Service Name of the organization Employer identification number NATIONAL EQUITY FUND INC 36-3490231 **General Information on Grants and Assistance** Part I Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient Part II that received more than \$5,000 Part II can be duplicated if additional space is needed (a) Name and address of (d) A mount of cash **(b)** EIN (c) IRC section (e) A mount of non-(f) Method of (g) Description of (h) Purpose of grant organization if applicable grant cash valuation non-cash assistance or assistance or government (book, FMV, assistance appraisal, other) See Additional Data Table

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

(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
art IV Supplemental Inform	 nation. Provide the inf	 ormation required in	Part I, line 2, Part III,	column (b), and any other a	additional information.

Part IV Suppleme	ntal Information. Prov	vide the information re	quired in Part I, line 2,	Part III, column (b), and	l any other additional informa	ation.
Return Reference	Explanation					
SCHEDULE I, PART I, QUESTION 2	FURTHERANCE OF INCOME HOUSING SERVES AND THE I	NEF'S TAX-EXEMPT MIS PROJECT SPONSOR INC NTENDED USE OF THE F ONSOR IN ACHIEVING	SION THE PRIMARY FA CLUDE NEF'S DESIRE TO UNDS TYPICALLY, THE ITS STRATEGIC GOALS	CTORS CONSIDERED WHE SUPPORT THE UNDERPRI FUNDS ARE DESIGNATED , SENDING STAFF ON TRAI	LOW-INCOME HOUSING PROD N DECIDING TO AWARD A GRA VILEGED POPULATION THAT FOR A VARIETY OF PURPOSES NING PROGRAMS, HIRING COM	NT TO A LOW THE SPONSOR S INCLUDING NSULTANTS, OR

CORPORATION, A 501(C)(3) ENTITY, TO SUPPORT ITS COMMUNITY DEVELOPMENT INITIATIVES

THE SPONSOR TO ENSURE THAT THE GRANT WAS USED AS INTENDED GRANTS ARE ALSO MADE TO LOCAL INITIATIVES SUPPORT

#### **Additional Data**

**41 LEWIS STREET** 

GENEVA, NY 14456

CHICAGO REHAB NETWORK

140 SOUTH DEARBORN CHICAGO, IL 60603

1117 TEXAS AVENUE

HOUSTON, TX 77002

NEW HOPE HOUSING INC

36-2928136

73-1419279

Software ID: Software Version:

501(C)(3)

501(C)(3)

**EIN:** 36-3490231

Name: NATIONAL EQUITY FUND INC

10,000

10,000

(h) Purpose of grant

or assistance

SUPPORT LOW-INCOME HOUSING

DEVELOPMENT

SUPPORT LOW-INCOME HOUSING

DEVELOPMENT

SUPPORT LOW-

DEVELOPMENT

INCOME HOUSING

N/A

N/A

CASH

CASH

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 section if applicable	( <b>d)</b> A mount of cash grant		(f) Method of valuation (book, FMV, appraisal, other)	
FINGER LAKES COMMUNITY	16-1561999	501(C)(3)	100,000		CASH	N/A

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) N/A SOME (SO OTHERS MIGHT 23-7098123 501(C)(3) 13,000 CASH SUPPORT LOW-INCOME HOUSING EAT) 71 O STREET NW DEVELOPMENT WASHINGTON, DC 20001 DEVELOPMENT INI/A

VETERANS MULTI-SERVICE CENTER 213-217 N 4TH ST PHILADELPHIA,PA 19106	23-2764079	501(C)(3)	10,000	CASH	SUPPORT LOW- INCOME HOUSING DEVELOPMENT
CAMERON COUNTY HOUSING AUTHORITY	74-1946779	GOVT	25,000	CASH	SUPPORT LOW- INCOME HOUSING

(CCHA) DEVELOPMENT

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

65 CASTELLANO CIRCLE BROWNSVILLE, TX 78526

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. (a) Name and address of (b) EIN (c) IRC section (d) A mount of cash (e) A mount of non- (f) Method of valuation (h) Purpose of grant (a) Description of organization ıf applicable cash (book, FMV, appraisal, non-cash assistance orassistance grant or aovernment assistance other)

LOCAL INIATIVES SUPPORT CORPORATION 501 SEVENTH AVENUE	13-3030229	501(C)(3)	7,410,000	CASH	SUPPORT LOW- INCOME HOUSING

NEW YORK, NY 10018

Schedule J (Form 990)

Department of the

Internal Revenue Service

Treasury

**Compensation Information** 

For certain Officers, Directors, Trustees, Key Employees, and Highest **Compensated Employees** ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

▶ Attach to Form 990.

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

DLN: 93493319071336 OMB No 1545-0047

2015

Open to Public Inspection

	ne of the organization IONAL EQUITY FUND INC			Employer identification	on nur	nber	
INA	TOWNE EQUIT TOWN INC			36-3490231			
Pa	rt I Questions Regarding Compensation	on	·				
						Yes	No
1a	Check the appropriate box(es) if the organization pr 990, Part VII, Section A, line 1a Complete Part II						
	First-class or charter travel		Housing allowance or residence for	personal use			
	Travel for companions		Payments for business use of perso	onal residence			
	Tax idemnification and gross-up payments		Health or social club dues or initiat	ion fees			
	Discretionary spending account	Г	Personal services (e g , maid, chau	ffeur, chef)			
b	If any of the boxes in line 1a are checked, did the creimbursement or provision of all of the expenses of				1b		
2	Did the organization require substantiation prior to directors, trustees, officers, including the CEO/Exe				2		
3	Indicate which, if any, of the following the filing organization's CEO/Executive Director Check all tused by a related organization to establish compen	that apply	Do not check any boxes for method	is			
	▼ Compensation committee		Written employment contract				
	✓ Independent compensation consultant	<b>√</b>	Compensation survey or study				
	Form 990 of other organizations	<b>✓</b>	Approval by the board or compensa	ition committee			
4	During the year, did any person listed on Form 990 or a related organization	, Part VII	, Section A , line 1a with respect to t	he filing organization			
а	Receive a severance payment or change-of-contro	l payment	7		4a		Νo
b	Participate in, or receive payment from, a suppleme	ental nonq	jualified retirement plan?		4b	Yes	
c	Participate in, or receive payment from, an equity-l	based con	npensation arrangement?		4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and p	rovide the	e applicable amounts for each item ir	n Part III			
5	Only 501(c)(3), 501(c)(4), and 501(c)(29) organize For persons listed on Form 990, Part VII, Section a compensation contingent on the revenues of		•	any			
а	The organization?				5a		Νo
b	Any related organization? If "Yes," on line 5a or 5b, describe in Part III				5b	Yes	
6	For persons listed on Form 990, Part VII, Section a compensation contingent on the net earnings of	A, line 1a	, did the organization pay or accrue a	any			
а	The organization?				<b>6</b> a		Νo
b	Any related organization?				6b		Νo
	If "Yes," on line 6a or 6b, describe in Part III						
7	For persons listed on Form 990, Part VII, Section payments not described in lines 5 and 6? If "Yes,"			n-fixed	7	Yes	
8	Were any amounts reported on Form 990, Part VII	, paid or a	ccured pursuant to a contract that w				
	subject to the initial contract exception described in Part III	ın Regulat	ions section 53 4958-4(a)(3)? If "Y	es," describe	8		No
9	If "Yes" on line 8, did the organization also follow to section 53 4958-6(c)?	he rebutta	ble presumption procedure describe	d in Regulations	9		140
					_	_	

Selledales (Form 550) 2015					r age 🕳			
Part III Officers, Directors,	Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.							
ınstructions, on row (II) Do not list ar	tion must be reported on Schedule J, report compensation from the ony individuals that are not listed on Form 990, Part VII for each listed individual must equal the total amount of Form 990, F	.,	-	·				
(A) Name and Title	(B) Breakdown of W-2 and/or 1099-MISC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation in			

#### other deferred benefits (B)(ı)-(D) column(B) reported (ii) (iii) Base as deferred on prior Bonus & incentive Other reportable compensation (I) compensation compensation compensation Form 990

Schedule 1 (Form 990) 2015

See Additional Data Table

Page 2

\$325,399 NATIONAL EQUITY FUND, INC. AWARDS A LONGEVITY BONUS ACCRUED FOR AN ELIGIBLE EMPLOYEE. IN 2015, \$166,667 WAS ACCRUED FOR JOSEPH HAGAN SCHEDULE J. PART I. LINE 5B Contingent Compensation NATIONAL EQUITY FUND, INC. AWARDS INCENTIVE PAYOUTS TO ORIGINATIONS STAFF BASED ON FEES EARNED FROM ORIGINATING LOW INCOME HOUSING PROJECTS WHICH FULFILL THE MISSION OF DEVELOPING AND PRESERVING HIGH-OUALITY AFFORDABLE RENTAL HOUSING IN DISINVESTED COMMUNITIES SCHEDULE J, PART I, LINE 7 NON-FIXED PAYMENTS NATIONAL EQUITY FUND, INC. AWARDS DISCRETIONARY BONUSES TO ELIGIBLE EMPLOYEES. UNDER THIS

Schedule J (Form 990) 2015

DISCRETIONARY BONUS PLAN. THE TOTAL AMOUNT OF BONUSES THAT CAN BE PAID IS LIMITED TO THE AMOUNT AVAILABLE IN A POOL WHICH IS CALCULATED AS A PERCENTAGE OF NET REVENUES. THE AMOUNTS AWARDED TO INDIVIDUALS FROM THE BONUS POOLS ARE BASED ON INDIVIDUAL AND TEAM PERFORMANCE TO ENSURE THAT BONUSES ARE BASED ON ACCOMPLISHMENTS THAT FURTHER THE MANAGEMENT AND THE PERSONNEL COMMITTEE OF THE BOARD OF DIRECTORS. AND ON A PERIODIC BASIS BY INDEPENDENT

Page 3

Schedule J (Form 990) 2015

## Software ID: Software Version:

**EIN:** 36-3490231

Name: NATIONAL EQUITY FUND INC Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (B) Breakdown of W-2 and/or 1099-MISC compensation (A) Name and Title (C) Retirement and (D) Nontaxable (E) Total of columns (F) Compensation in other deferred benefits (B)(I)-(D)column (B) (iii) (ii) (i) compensation reported as deferred Base Bonus & Other on prior Form 990 Compensation ıncentive reportable compensation compensation 1Joseph Hagan 358,560 200,000 1,980 197,142 22,282 779,964 President & CEO (11) Ω 1Kevin BoesSVP 242,360 (1) 135,000 300 28,463 25,982 432,105 (11) 2Alex Denja 214,120 (1) 300 24,955 95,000 23,822 358,197 SVP Treasurer & CFO (11) 3Peter Harrison 210,847 (1) 95,000 1,290 24,654 25,282 357,073 SVP Asset Management (11) 4Michael Jacobs (1) 215,227 130,000 690 25,549 27,782 399,248 SVP Originations (11) 5Karen Przypyszny SVP Equity Placement 215,467 (1) 130,000 1,290 25,111 23,732 395,600 0 (11) **6**Judy Schneider (1) 217,474 125,000 1,290 25,414 24,362 393,540 0 SVP & Chief Risk Officer (11) 0 **7**Greg Schuler SVP GENERAL COUNSEL & ASST SEC 214,477 95,000 1,980 24,831 22,282 358.570 n 8Mark Sıranovic (1) 214,450 690 25,343 26,867 397,350 130.000 0 SVP CAP MARKETS & ASST TREAS Ω 9Thomas Flanagan 155,045 17,851 7,222 16,113 1,980 198,211 VP & Secretary (11) 10Michael HearneDIRECTOR (1) 0 0 (11) 276,362 690 8,413 287.709 2.244 11Michael Rubinger VICE CHAIRMAN (11) 524,760 6,438 27,528 23,733 582,459 12Todd FabianVP (1) 173,560 76,627 450 230,733 22,282 503,652 (11) 0 13Joseph ForgueSVP (1) 190,421 95,000 1,290 22,621 27,542 336,874 (11) 14Anthony LyonsVP (1) 176,500 90,206 1,290 191,963 620 460,579 0 15Rachel RhodesVP (1) 173,560 270 345,524 190,348 22,282 731,984 (11) 0 16Ed Simon 188.684 (1) 85,000 300 22,267 25,782 322,033 SVP/Chief Information Officer

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**Employer identification number** 

#### **SCHEDULE 0** (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

NATIONAL EQUITY FUND INC

#### Supplemental Information to Form 990 or 990-EZ

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

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

OMB No 1545-0047

Open to Public Inspection

36-3490231 Return Explanation Reference ORGANIZATION'S MISSION NATIONAL EQUITY FUND, INC ("NEF, INC") IS DEDICATED TO SUPPORTING THE DEVELOPMENT AND Part III. Line PRESERVATION OF HIGH-QUALITY AFFORDABLE RENTAL HOUSING THAT UNDERPINS THE SUSTAINABLE REVITALIZATION OF DISINVESTED COMMUNITIES NEF. INC. IS A LEADING NATIONAL SYNDICATOR OF LOW-INCOME HOUSING TAX CREDITS. IT SERVES AS THE GENERAL PARTNER OR MANAGING MEMBER OF INVESTMENT FUNDS THAT PLACE EQUITY INVESTMENTS IN PROJECT LIMITED PARTNERSHIPS AND LIMITED LIABILITY COMPANIES THAT ACQUIRE, CONSTRUCT. OPERATE AND REHABILITATE LOW-INCOME HOUSING PROJECTS IN ADDITION, NEF, INC PROVIDES AND/OR FACILITATES PREDEVELOPMENT GRANTS AND LOANS. PERMANENT AND CONSTRUCTION FINANCING AND VARIOUS LEVELS OF TECHNICAL ASSISTANCE AND ASSET MANAGEMENT TO SUPPORT OUR PARTNERS' DEVELOPMENT EFFORTS. NEF, INC. WAS CREATED IN 1987 BY LOCAL INITIATIVES SUPPORT CORPORATION (LISC), A SECTION 501(C)(3) PUBLIC CHARITY, IN THE WAKE OF THE TAX REFORM ACT OF 1986. WHICH ENACTED THE LOW-INCOME HOUSING TAX CREDIT. LISC WANTED TO MAKE SURE THAT THE CAPITAL ATTRACTED BY THE CREDIT MADE ITS WAY TO THE AREAS THAT NEEDED IT MOST. IN THE INTERVENING YEARS, NEF INC.'S SUCCESS HAS HELPED TRANSFORM THE CREDIT INTO A MAINSTREAM INVESTMENT TOOL WITH A LASTING IMPACT ON BOTH INDIVIDUALS AND THEIR COMMUNITIES THE FUNDAMENTAL TENET WITH WHICH NEF BEGAN STILL HOLDS TRUE STRONG, VIBRANT COMMUNITIES FLOW FROM THE EFFORTS OF DEVELOPERS. RESIDENTS. COMMUNITY GROUPS AND OTHERS FOCUSED ON THE UNIQUE NEEDS OF THEIR NEIGHBORHOODS THOSE NEEDS MAY DIFFER FROM STATE TO STATE AND FROM TOWN TO TOWN BUT THE IMPORTANCE OF QUALITY AFFORDABLE HOUSING TO COMMUNITY REVITALIZATION AND STABILITY IS A CONSTANT NEF, INC. UNDERSTANDS HOW THE CONCEPT OF "HOME" ANCHORS A COMMUNITY, HOW IT HELPS NURTURE LOCAL CULTURE AND SUPPORT LONG-TERM STABILITY THAT'S WHY, TOGETHER WITH OUR PARENT LISC, WE ARE HELPING NEIGHBORS BUILD COMMUNITIES NEF, INC 'S PORTFOLIO INCLUDES OVER 2,400 LOW-INCOME PROJECTS THAT RESPOND TO A DIVERSITY OF LOCAL HOUSING CONCERNS. IN BOTH URBAN AND RURAL COMMUNITIES. WE INVEST TAX-CREDIT EQUITY IN MULTIFAMILY AND SINGLE-FAMILY DEVELOPMENTS. AS WELL AS IN SUPPORTIVE HOUSING. PUBLIC HOUSING REVITALIZATION, ASSISTED LIVING AND HISTORIC REHABILITATION THE NEF, INC. TRACK RECORD ---INVESTED MORE THAN \$12.4 BILLION TO SUPPORT OVER 2.400 PROJECTS ---FINANCED THE DEVELOPMENT OF 149.082 HOMES ---PARTNERED WITH MORE THAN 1.000 PRIMARILY NONPROFIT DEVELOPERS ---HELPED REVITALIZE COMMUNITIES IN 46 STATES + THE DISTRICT OF COLUMBIA, PUERTO RICO, AND THE VIRGIN ISLANDS HOW WE WORK NEF, INC. IS AN INTERMEDIARY EACH YEAR. WE RAISE CAPITAL TO CREATE MULTI-INVESTOR POOLS AND SINGLE-INVESTOR FUNDS WE THEN INVEST THAT EQUITY IN A FFORDABLE HOUSING PROJECTS THAT HAVE BEEN ALLOCATED LOW-INCOME HOUSING TAX CREDITS BY THEIR STATE OR LOCAL HOUSING FINANCE AGENCY OUR PROJECTS NEF. INC 'S PORTFOLIO INCLUDES OVER 2.400 PROJECTS THAT RESPOND TO A DIVERSITY OF LOCAL HOUSING CONCERNS. IN BOTH URBAIN AND RURAL COMMUNITIES, WE INVEST TAX-CREDIT EQUITY IN MULTIFAMILY AND SINGLE-FAMILY DEVELOPMENTS, AS WELL AS IN SUPPORTIVE HOUSING, PUBLIC HOUSING REVITALIZATION. ASSISTED LIVING AND HISTORIC REHABS OUR SPONSOR PARTNERS FOR CLOSE TO 30 YEARS. NEF INC HAS COLLABORATED WITH LOCAL AND NATIONAL AFFORDABLE HOUSING DEVELOPERS IN 776 CITIES AND TOWNS ACROSS THE COUNTRY OUR PARTNERS ARE AS DIVERSE AS OUR PROJECTS. INCLUDING LOCAL COMMUNITY DEVELOPMENT CORPORATIONS, PUBLIC HOUSING AUTHORITIES, NATIONAL NON-PROFIT GROUPS AND FOR-PROFIT DEVELOPERS WITH A COMMITMENT TO COMMUNITY DEVELOPMENT BECAUSE OF OUR ROOTS AS A NONPROFIT. WE SHARE THEIR PASSION FOR DEVELOPING HIGH-QUALITY, AFFORDABLE HOUSING THAT IS RESPONSIVE TO COMMUNITY NEEDS, AS A SEASONED FINANCIAL INTERMEDIARY. WE HAVE THE TECHNICAL AND FINANCIAL TOOLS TO SUPPORT THOSE EFFORTS

Return Reference	Explanation
PART VI,	SECTION A, LINES 6 & 7A LOCAL INITIATIVES SUPPORT CORPORATION ("LISC") IS THE PARENT AND SOLE VOTING
GOVERNANCE,	MEMBER OF NEF, INC. LISC IS A SECTION 501(C)(3) PUBLIC CHARITY WHOSE MISSION IS TO TRANSFORM
MANAGEMENT, AND	DISTRESSED URBAN AND RURAL COMMUNITIES INTO HEALTHY AND SUSTAINABLE COMMUNITIES LISC CARRIES
DISCLOSURE	OUT THIS CHARITABLE MISSION BY MARSHALING PUBLIC AND PRIVATE SECTOR RESOURCES TO PROVIDE LOCAL
	COMMUNITY DEVELOPMENT ORGANIZATIONS WITH TECHNICAL AND MANAGEMENT ASSISTANCE AND FINANCIAL
	SUPPORT LISC APPROVES AND APPOINTS ALL BOARD MEMBERS TO NEF INC 'S BOARD

Return Reference	Explanation
PART VI,	SECTION B, LINE 11B NEF'S FORM 990 IS PREPARED BY AN INDEPENDENT ACCOUNTING FIRM BASED ON
GOVERNANCE,	INFORMATION PROVIDED BY THE ORGANIZATION AND IN CONSULTATION WITH NEF STAFF MEMBERS THE DRAFT
MANAGEMENT, AND	PREPARED BY THE ACCOUNTING FIRM IS THEN REVIEWED BY NEF'S FINANCE AND LEGAL DEPARTMENTS. THE FINAL
DISCLOSURE	DRAFT IS THEN SENT TO THE AUDIT COMMITTEE OF THE BOARD OF DIRECTORS NEF'S BOARD OF DIRECTORS HAS
	DELEGATED RESPONSIBILITY TO REVIEW AND APPROVE THE FORM 990 TO THE AUDIT COMMITTEE A COPY OF THE
	FINAL VERSION OF THE FORM 990 IS PROVIDED TO EACH MEMBER OF THE FULL BOARD OF DIRECTORS PRIOR TO
	FILING WITH THE INTERNAL REVENUE SERVICE

Return Reference	Explanation
PART VI, GOVERNANCE, MANAGEMENT, AND DISCLOSURE	SECTION B, LINE 12C NEF HAS A CONFLICT OF INTEREST POLICY COVERING ITS BOARD MEMBERS AND OFFICERS ALL DIRECTORS AND OFFICERS ARE REQUIRED TO CERTIFY THEIR COMPLIANCE WITH THE COMPANY'S CONFLICT OF INTEREST POLICY AND DISCLOSE ANY POTENTIAL CONFLICTS ANNUALLY THE GENERAL COUNSEL IS RESPONSIBLE FOR REVIEWING THE CERTIFICATIONS AND ANY DISCLOSURES IF A POTENTIAL CONFLICT OF INTEREST IS REPORTED, IT IS THE GENERAL COUNSEL'S RESPONSIBILITY TO DETERMINE WHETHER OR NOT A CONFLICT DOES, IN FACT, EXIST AND TO REVIEW THE SITUATION WITH THE CEO, THE CHAIRMAN OF THE BOARD, AND THE CHAIRMAN OF THE AUDIT COMMITTEE TO DETERMINE HOW THE ISSUE SHOULD BE RESOLVED A CONFLICTED OFFICER OR BOARD MEMBER WOULD BE EXCLUDED FROM PARTICIPATING IN DELIBERATIONS AND DECISIONS CONCERNING THE MATTER

Return Reference	Explanation
PART VI, GOVERNANCE, MANA GEMENT, AND DISCLOSURE	FORM 990, PART VI, SECTION B, LINES 15A AND 15B COMPENSATION FOR SENIOR MANAGEMENT IS DETERMINED BY THE PERSONNEL COMMITTEE OF NEF'S BOARD OF DIRECTORS NO INDIVIDUALS WITH A CONFLICT OF INTEREST MAY BE INVOLVED IN THE COMPENSATION DETERMINATION PROCESS NEF PERIODICALLY ENGAGES INDEPENDENT COMPENSATION CONSULTANTS TO PROVIDE COMPARABILITY DATA FOR SIMILARLY QUALIFIED PERSONS IN FUNCTIONALLY COMPARABLE POSITIONS AT SIMILARLY SITUATED ORGANIZATIONS THE MINUTES OF THE PERSONNEL COMMITTEE DOCUMENT THE COMMITTEE'S DELIBERATIONS AND DECISIONS REGARDING COMPENSATION

Return Reference	Explanation
PART VI, GOVERNANCE, MANAGEMENT, AND DISCLOSURE	SECTION C, LINE 19 NEF MAKES ITS FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC ON ITS WEBSITE IT DOES NOT CURRENTLY MAKE ITS GOVERNING DOCUMENTS OR CONFLICT OF INTEREST POLICY AVAILABLE TO THE PUBLIC

Return Reference	Explanation	
,	OTHER CHANGES IN NET ASSETS Capital Contributions to Related Orgs - \$(42,410) RECOVERY OF PRIOR YEAR GRANT - \$10,000 \$(32,410)	

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## **SCHEDULE R** (Form 990)

# **Related Organizations and Unrelated Partnerships**

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

Open to Public

Department of the Treasury Internal Revenue Service Name of the organization ▶ Attach to Form 990. ▶ Information about Schedule R (Form 990) and its instructions is at www.irs.qov/form990.

Inspection **Employer identification number** 

NATIONAL EQUITY FUND INC				36-34902	2 2 1			
Part I Identification of Disregarded Entities Co	omplete if the organization	answered "Yes" on	Form 990, Part	-	231			
(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income Er	<b>(e)</b> nd-of-year assets	Din	(f) ect controlling entity		
Part II Identification of Related Tax-Exempt Or or more related tax-exempt organizations dur		he organization ans	wered "Yes" on	Form 990, Pa	art IV, lır	ne 34 because it	had one	
(a)  Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code secti	Public charity (if section 50	ty status Direct controllir		Section (13) co ent	ntroll tity?
(1)NEF COMMUNITY INVESTMENTS INC 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	IL	501(C)(4)	N/A	1	NEF INC	Yes	No
CHICAGO, IL 60606 36-4229337 (2)NEW YORK EQUITY FUND INC 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	IL	501(C)(4)	N/A	1	NEF INC	Yes	_
CHICAGO, IL 60606 36-4041986  (3)LOCAL INITIATIVES SUPPORT CORPORATION	COMMUNITY DEV	NY	501(C)(3)	7	1	NA	<u> </u>	No
501 SEVENTH AVENUE  NEW YORK, NY 10018 13-3030229								
(4)THE RETAIL INITIATIVE INC 501 SEVENTH AVENUE NEW YORK, NY 10018	COMMUNITY DEV	NY	501(C)(3)	9	ı	LISC		No
13-3690780  (5)LOCAL INITIATIVES MANAGED ASSET CORP 501 SEVENTH AVENUE	LOWINCOMEHOUS	NY	501(C)(3)	9	I	LISC		No
NEW YORK, NY 10018 11-2848981 (6)OREGON CORP FOR AFFORDABLE HOUSING 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	OR	501(C)(3)	9	1	NEF INC	Yes	
CHICAGO, IL 60606 93-1113844								

Part III	Identification of Related Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, F	art IV, lin	ie 34
	because it had one or more related organizations treated as a partnership during the tax year.		

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	Direct controlling ir entity	egal Direct micile controlling ate or entity reign	(e) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income			(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	mana part	ral or aging	<b>(k)</b> Percentage ownership
				,		Yes	No		Yes	No		
See Additional Data Table												
Part TV Identification of Polated Organizations Tayable		_										

Part IV Identification of Related Organizations Taxable as a Corporation or Trust Complete if 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) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end- of-year assets	(h) Percentage ownership	(i) Section 512 (b)(13) controlled entity?	
Con Address   Date Table								Yes	No
See Additional Data Table									$\vdash$
									$\vdash$

Part V	Transactions With Re	elated Organizations (	Complete if the organ	ization answered "Yes" o	on Form 990, Part IV	', line 34, 35b, or 36.

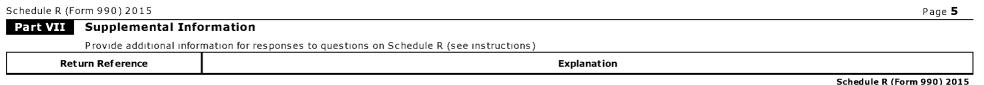
Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule		Yes	No
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	. 1a		No
<b>b</b> Gift, grant, or capital contribution to related organization(s)	. 1b	Yes	
c Gift, grant, or capital contribution from related organization(s)			No
d Loans or loan guarantees to or for related organization(s)	<b>—</b>	Yes	
e Loans or loan guarantees by related organization(s)	1e	Yes	
f Dividends from related organization(s)	1f		No
g Sale of assets to related organization(s)	<b>1</b> g		No
h Purchase of assets from related organization(s)	1h		No
i Exchange of assets with related organization(s)	1i		No
${f j}$ Lease of facilities, equipment, or other assets to related organization(s)	<b>1</b> j		No
${f k}$ Lease of facilities, equipment, or other assets from related organization(s)	1k		No
I Performance of services or membership or fundraising solicitations for related organization(s)	11	Yes	
	1100	Yes	ı
m Performance of services or membership or fundraising solicitations by related organization(s)	1n		No
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)			NO
o Sharing of paid employees with related organization(s)	10	Yes	
p Reimbursement paid to related organization(s) for expenses	. 1p	Yes	-
q Reimbursement paid by related organization(s) for expenses			<del>                                     </del>
4 Normburselliene para by related organization(s) for expenses	.	1	
r Other transfer of cash or property to related organization(s)	. 1r		No
s Other transfer of cash or property from related organization(s)	1s		No
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	 on thresholds		

(a) Name of related organization	<b>(b)</b> Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1)NEF SUPPORT CORPORATION	D	51,790,351	FMV
(2)NEF COMMUNITY INVESTMENTS INC	L	36,823,994	FMV
(3)NYEF INC	L	844,332	FMV
(4)OREGON CORP FOR AFFORDABLE HSG	L	751,059	FMV

#### 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, actives, and FIN of entity   Capt   Capt		revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships																		
	(a) Name, address, and EIN of entity	(b) Primary activity	domicile (state or foreign	(related, unrelated, excluded from tax under sections 512-	organizations?		(e) Are all partners section 501(c)(3) organizations?		501(c)(3) organizations?		organizations?		total end-of-year		(g) Share of Disproprtionat d-of-year assets allocations?		box 20 of Schedule K-1		General or managing partner?	
	9			314)	Yes	No			Yes	No		Yes	No							
													1 I							
														_						
														_						
														_						



### **Additional Data**

#### Software ID: Software Version:

**EIN:** 36-3490231

Name: NATIONAL EQUITY FUND INC

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c) (3))	(f) Direct controlling entity	Section (b)(contraction ent	n 512 13) folled ity?
NEF COMMUNITY INVESTMENTS INC 10 S RIVERSIDE PLAZA STE 1700 CHICAGO, IL 60606 36-4229337	LOWINCOMEHOUS	IL	501(C)(4)	N/A	NEFINC	Yes	No
NEW YORK EQUITY FUND INC 10 S RIVERSIDE PLAZA STE 1700 CHICAGO, IL 60606 36-4041986	LOWINCOMEHOUS	IL	501(C)(4)	N/A	NEFINC	Yes	
LOCAL INITIATIVES SUPPORT CORPORATION 501 SEVENTH AVENUE NEW YORK, NY 10018 13-3030229	COMMUNITY DEV	NY	501(C)(3)	7	NA		No
THE RETAIL INITIATIVE INC 501 SEVENTH AVENUE NEW YORK, NY 10018 13-3690780	COMMUNITY DEV	NY	501(C)(3)	9	LISC		No
LOCAL INITIATIVES MANAGED ASSET CORP 501 SEVENTH AVENUE NEW YORK, NY 10018 11-2848981	LOWINCOMEHOUS	NY	501(C)(3)	9	LISC		No
OREGON CORP FOR AFFORDABLE HOUSING 10 S RIVERSIDE PLAZA STE 1700 CHICAGO, IL 60606 93-1113844	LOWINCOMEHOUS	OR	501(C)(3)	9	NEF INC	Yes	

Form 990, Schedule R	, Part III - Identif	1	of Related O	rganizations	Taxable as a	Partnership	ı	I	1	'	
<b>(a)</b> Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) 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	(h) Disproprtionate allocations?	(i) Code V-UBI amount in Box 20 of Schedule K-1 (Form 1065)	Gen Mana Part	or aging ner?	<b>(k)</b> Percentage ownership
335 Greenacre Road LP	LowIncomeHous	SC	CDA TCG Inc	,	0	0	Yes No	0	Yes	No No	
10 S Riverside Plaza Ste											
1700 Chicago, IL 60606 _20-2376845											
Alston Lake LP	LowIncomeHous	SC	CDA TCG Inc	N/A	0	0	No	0		No	
10 S Riverside Plaza Ste 1700 Chicago, IL 60606 20-0740773											
Banc of America CHIF II LLC	LowIncomeHous	DE	NEF Inc	RELATED	-340	75,252	No	0	Yes		0 010 %
10 S Riverside Plaza Ste 1700 Chicago, IL 60606											
20-0296106  Banc of America CHIF III LP	LowIncomeHous	DE	NEF Inc	RELATED	-698	5,307	No	0	Yes		0 010 %
10 S Riverside Plaza Ste 1700 Chicago, IL 60606											
20-3697681 Bank of America CHIF IV LP	LowIncomeHous	DE	NEF Inc	RELATED	-167	24,975	No	0	Yes		0 010 %
10 S Riverside Plaza Ste 1700 Chicago, IL 60606 26-1851404											
Bank of America CHIF V LP	LowIncomeHous	DE	NEFCI	N/A	0	0	No	0		No	
10 S Riverside Plaza Ste 1700 Chicago, IL 60606 26-3751207											
Bank of America CHIF VI LP	LowIncomeHous		BOACHIF FundMgr	N/A	0	0	No	0		Νo	
10 S Riverside Plaza Ste 1700 Chicago, IL 60606 27-3402632											
Bank of America CHIF VII	LowIncomeHous		BOACHIF FundMgr	N/A	0	0	No	0		No	
10 S Riverside Plaza Ste 1700 Chicago, IL 60606											
90-0885709 Belle Haven LP	LowIncomeHous	MN	CDA Inc	N/A	0	0	No	0		No	
10 S Riverside Plaza Ste 1700 Chicago, IL 60606 20-3927517											
California Equity Fund 1995 LP	LowIncomeHous	CA	NEF Inc	RELATED	0	0	No	0	Yes		0 010 %
10 S Riverside Plaza Ste 1700 Chicago, IL 60606											
36-4025432 California Equity Fund 1996 LP	LowIncomeHous	СА	NEF Inc	RELATED	17,260	-5,148	No	0	Yes		0 010 %
10 S Riverside Plaza Ste 1700 Chicago, IL 60606											
36-4089379 California Equity Fund 1997 LP	LowIncomeHous	CA	NEF Inc	RELATED	1,000	-8,368	No	0	Yes		0 010 %
10 S Riverside Plaza Ste 1700 Chicago, IL 60606											
36-4159240 California Equity Fund 1998 LP	LowIncomeHous	CA	NEF Inc	RELATED	-209	-5,117	No	0	Yes		0 010 %
10 S Riverside Plaza Ste 1700 Chicago, IL 60606 36-4234307											
California Equity Fund 1999 LP	LowIncomeHous	CA	NEF Inc	RELATED	-286	-1,624	No	0	Yes		0 010 %
10 S Riverside Plaza Ste 1700 Chicago, IL 60606 36-4296157											
California Equity Fund 2000 LP	LowIncomeHous	DE	NEF Inc	RELATED	-6	34,069	No	0	Yes		0 %
10 S Riverside Plaza Ste 1700 Chicago, IL 60606 36-4380675											
		_					•				

Form 990, Schedule R, Part III - Identification of Related Organizations Taxable as a Partnership (c) (h) **(e)** Predominant General Legal (d) (f) (g) Disproprtionate Code V-UBI amount (k) (b) (a) Domicile Direct Share of total Share of end-of-Name, address, and EIN of allocations? Percentage Primary activity ncome(related ın (State Controllingyear assets Managing Box 20 of Schedule ownership related organization unrelated, Entity Partner? K-1 excluded from Foreign (Form 1065) tax under Country) sections 512-514) No Yes No Yes California Equity Fund 2002 LowIncomeHous DΕ NEF Inc RELATED -1 101 Νo 0 Yes 0 % 10 S Riverside Plaza Ste 1700 Chicago, IL 60606 94-3427611 116 California Equity Fund 2003 LowIncomeHous NEF Inc DΕ RELATED Νo Yes 0 % 10 S Riverside Plaza Ste 1700 Chicago, IL 60606 20-0233867 California Equity Fund 2004 LowIncomeHous 209 DE NEF Inc RELATED 0 % Νo Yes 10 S Riverside Plaza Ste 1700 Chicago, IL 60606 20-1384513 California Equity Fund 2013 LowIncomeHous NEFCI 0 0 DΕ N/A Νo Νo 10 S Riverside Plaza Ste 1700 Chicago, IL 60606 61-1695178 Casa Puebla Investors LLC LowIncomeHous DΕ NEFCI N/A 0 Νo 0 Νo 10 S Riverside Plaza Ste 1700 Chicago, IL 60606 36-4473104 NEF Comm 0 0 0 CDC Tax Credit III ΙL N/A LowIncomeHous Νo Νo Сар 10 S Riverside Plaza Ste 1700 Chicago, IL 60606 36-4235882 Chicago Equity Fund 1995 LowIncomeHous ΙL NEFCI N/A Νo Νo 10 S Riverside Plaza Ste 1700 Chicago, IL 60606 36-4039330 Chicago Equity Fund 1996 LowIncomeHous ΙL NEFCI N/A 0 0 Νo 0 Νo 10 S Riverside Plaza Ste 1700 Chicago, IL 60606 36-4098780 NEFCI Chicago Equity Fund 1997 LowIncomeHous ΙL N/A 0 0 Νo 0 Νo 10 S Riverside Plaza Ste 1700 Chicago, IL 60606 36-4186158 Chicago Equity Fund 1998 | LowIncomeHous NEFCI 0 ΙL N/A Νo Νo 10 S Riverside Plaza Ste 1700 Chicago, IL 60606 36-4282144 Chicago Equity Fund 2000 ΙL NEFCI N/A Νo 0 Νo LowIncomeHous 10 S Riverside Plaza Ste 1700 Chicago, IL 60606 36-4325575 NEFCI Chicago Equity Fund 2001 LowIncomeHous ΙL N/A 0 Νo 0 Νo 10 S Riverside Plaza Ste 1700 Chicago, IL 60606 36-4416840 Chicago Equity Fund 2002 | LowIncomeHous 0 ΙL NEFCI N/A Νo Νo 10 S Riverside Plaza Ste 1700 Chicago, IL 60606 30-0066665 Chicago Equity Fund 2003 LowIncomeHous ΙL NEFCI N/A 0 Νo Νo 10 S Riverside Plaza Ste 1700 Chicago, IL 60606 30-0149138 Chicago Equity Fund 2004 NEFCI N/A 0 0 0 LowIncomeHous Νo Νo 10 S Riverside Plaza Ste 1700 Chicago, IL 60606 32-0106888

(a) Name, address, and EIN of	(b)	(c)		<u> </u>		i e						
related organization	Primary activity	Legal Domicile (State or Foreign Country)	<b>(d)</b> Direct Controlling Entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512-514)	(f) Share of total Income	<b>(g)</b> Share of end-of- year assets		rtionate tions?	(i) Code V-UBI amount In Box 20 of Schedule K-1 (Form 1065)	Gen o Mana Parti	eral r iging ner?	(k) Percentage ownership
Citigroup CCDE Low	wIncomeHous	DE	NEF Inc	RELATED	-96	78,705	163	No	0	Yes	NO	0 010 %
10 S Riverside Plaza Ste 1700 Chicago, IL 60606 36-4425650												
Covington Investment Lov Fund LLC	wIncomeHous	DE	NEFCI	N/A	0	0		No	0		No	
10 S Riverside Plaza Ste 1700 Chicago, IL 60606 27-1490747												
Crescent Community Low Investment Fund LP	wIncomeHous	DE	NEFCI	N/A	0	0		No	0		No	
10 S Riverside Plaza Ste 1700 Chicago, IL 60606 26-0859985												
Deborah's Place III Lov Investors LP	wIncomeHous	IL	NEFCI	N/A	0	0		No	0		No	
10 S Riverside Plaza Ste 1700 Chicago, IL 60606 36-4261308												
Fifth Third Investment Low Fund LLC	wIncomeHous	DE	NEFCI	N/A	0	0		No	0		No	
10 S Riverside Plaza Ste 1700 Chicago, IL 60606 95-3427804												
First Chicago Leasing IF Lot LLC	wIncomeHous	DE	NEF Inc	RELATED	0	0		No	0	Yes		0 010 %
10 S Riverside Plaza Ste 1700 Chicago, IL 60606 20-1005813												
FNBC Leasing Investment Low Fund LLC	wIncomeHous	DE	NEF Inc	RELATED	-345	9,616		No	0	Yes		0 010 %
10 S Riverside Plaza Ste 1700 Chicago, IL 60606 20-5046285												
Four Eighty-One Housing Low Invest Fund II	wIncomeHous	IL	NEFCI	N/A	0	0		No	0		No	
10 S Riverside Plaza Ste 1700 Chicago, IL 60606 45-3754747												
Four Eighty-One Housing Low Investment Fund	wIncomeHous	DE	NEFCI	N/A	0	0		No	0		No	
10 S Riverside Plaza Ste 1700 Chicago, IL 60606 27-0711050												
Four Eighty-One Housing Low Invest Fund III	wIncomeHous	DE	NEFCI	N/A	0	0		No	0		No	
10 S Riverside Plaza Ste 1700 CHICAGO, IL 60606 90-0929576												
Glenville Homes III LP Lov	wIncomeHous	ОН	CDA East Inc	N/A	0	0		No	0		No	
10 S Riverside Plaza Ste 1700 CHICAGO, IL 60606 14-1873156												
GS-NYEF 2009 LLC Low 10 S Riverside Plaza Ste	wIncomeHous	DE	NYEF Inc	N/A	0	0		No	0		No	
1700 Chicago, IL 60606 27-1086070												
Harbor View Phase I  10 S Riverside Plaza Ste	wIncomeHous	DE	CDA TCG Inc	N/A	0	0		No	0		No	
1700 Chicago, IL 60606 56-2281877												
Hillcrest Commons LP Low	wIncomeHous	DE	CDA TCG Inc	N/A	0	0		No	0		No	
10 S Riverside Plaza Ste 1700 Chicago, IL 60606 20-0433943												
Propriet Fnd LP	wIncomeHous		Oregon Aff Hsg	N/A	0	0		No	0		No	
10 S Riverside Plaza Ste 1700 Chicago, IL 60606 76-0720406												

Form 990, Schedule R,	Part III - Identific	1	Related Or	ganizations T	axable as a	Partnership	ı		I	ı	. 1	
(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal Domicile (State or Foreign	(d) Direct Controlling Entity	(e) Predominant Income(related, unrelated, excluded from tax under	(f) Share of total Income	(g) Share of end- of-year assets	(h) Disprop alloca	rtionate tions?	(i) Code V-UBI amount In Box 20 of Schedule K-1 (Form 1065)	۱ <sup>٥</sup>	eral r agıng	<b>(k)</b> Percentage ownership
		Country)		sections 512-514)					(FORM 1065)			_
Homestead Equity Fund A - Oregon LP	LowIncomeHous	OR	Oregon Aff Hsg	N/A	0	0	Yes	No No	0	Yes	No No	
10 S Riverside Plaza Ste 1700 Chicago, IL 60606 93-1309851												
Homestead Equity Fund A - Washington LP	LowIncomeHous		O regon Aff Hsg	N/A	0	0		No	0		No	
10 S Riverside Plaza Ste 1700 Chicago, IL 60606 93-1309850												
Homestead Equity Fund B- Oregon LP	LowIncomeHous	OR	O regon Aff Hsg	N/A	0	0		No	0		No	
10 S Riverside Plaza Ste 1700 Chicago, IL 60606 74-3068676												
	LowIncomeHous	OR	O regon Aff Hsg	N/A	0	0		No	0		No	
10 S Riverside Plaza Ste 1700 Chicago, IL 60606 93-1305114			_									
Homestead Equity Fund III	LowIncomeHous	OR	Oregon Aff Hsg	N/A	0	0		No	0		No	
10 S Riverside Plaza Ste 1700 Chicago, IL 60606			ilag									
26-0018664 Homestead Equity Fund IV	LowIncomeHous		O regon A ff	N/A	0	0		No	0		No	
LP 10 S Riverside Plaza Ste 1700 Chicago, IL 60606			Hsg									
72-1552615  Homestead Equity Fund LP	LowIncomeHous	OR	O regon A ff	N/A	0	0		No	0		No	
10 S Riverside Plaza Ste 1700 Chicago, IL 60606			Hsg									
	LowIncomeHous		O regon A ff	N/A	0	0		No	0		No	
LP 10 S Riverside Plaza Ste 1700 Chicago, IL 60606			Hsg									
. ,	LowIncomeHous	OR	O regon A ff	N/A	0	0		No	0		No	
LP 10 S Riverside Plaza Ste 1700 Chicago, IL 60606			Hsg									
20-3624501 Homestead Equity Fund VII	LowIncomeHous	OR	O regon A ff	N/A	0	0		No	0		No	
LP 10 S Riverside Plaza Ste 1700 Chicago, IL 60606			Hsg									
26-0796373 Homestead Equity Fund	LowIncomeHous	OR	O regon A ff	N/A	0	0		No	0		No	
VIII LP  10 S Riverside Plaza Ste 1700 Chicago II, 60606			Hsg									
Chicago, IL 60606 26-3897389 Homestead Equity Fund X	LowIncomeHous	DE	NEFCI	N/A	0	0	_	No	0		No	
Limited Partners	LOWINCOMETIONS		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					110			110	
10 S Riverside Plaza Ste 1700 Chicago, IL 60606 38-3889070												
Homestead Equity Fund XI Limited Partner	LowIncomeHous	DE	NEFCI	N/A	0	0		No	0		No	
10 S Riverside Plaza Ste 1700 Chicago, IL 60606 90-0973765												
Homestead Northern California Fund LP	LowIncomeHous		O regon Aff Hsg	N/A	0	0		No	0		No	
10 S Riverside Plaza Ste 1700 Chicago, IL 60606			1139									
20-4596836 Homestead Preservation	LowIncomeHous	IL	O regon Aff	N/A	0	0	-	No	0		No	
LLC 10 S Riverside Plaza Ste			Hsg									
1700 Chicago, IL 60606 27-3520887												

Form 990, Schedule R, Part III - Identification of Related Organizations Taxable as a Partnership **(j)** General (c) (i) Code V-UBI (e) Legal Domicile (d) Direct (g) Share of end-of-**(k)** Percentage (b) Predominant Disproprtionate Share of total or allocations? Name, address, and EIN of Primary activity income(related. amount in (State Controlling ıncome year assets Managing related organization unrelated, Box 20 of Schedule owners hip Partner? or Entity excluded from K - 1 Foreign (Form 1065) tax under Country sections 512-514) Yes No Yes 0 0 Homestead Western LowIncomeHous OR O regon Aff N/A Νo Νo Hsg Communities Fund LP 10 S Riverside Plaza Ste 1700 Chicago, IL 60606 20-0912505 CDA TCG Inc N/A Horizon Village One LP 0 0 LowIncomeHous 10 S Riverside Plaza Ste 1700 Chicago, IL 60606 20-0014388 0 0 Imanı Neighborhood LowIncomeHous ٧A CDA South N/A Νo Νo Revitalization Partne 10 S Riverside Plaza Ste 1700 Chicago, IL 60606 80-0081682 JP Morgan Chase Low-LowIncomeHous DE NEF Inc RELATED -192 -966 Νo Yes 0 010 % Income HF LLC 10 S Riverside Plaza Ste 1700 Chicago, IL 60606 36-4406946 203,880 -13 NEF Inc  ${\sf Key\ CDC\ Investment\ Fund}$ LowIncomeHous DE RELATED Νo Yes 0 010 % 10 S Riverside Plaza Ste Chicago, IL 60606 95-4893445 NEF Inc RELATED -10 176,028 Key USA Investment Fund DE Yes 0 010 % LowIncomeHous Νo 10 S Riverside Plaza Ste 1700 Chicago, IL 60606 95-4893448 0 0 0 Maury Senior Retirement VΑ CDA Central N/A Νo Νo LowIncomeHous 10 S Riverside Plaza Ste Chicago, IL 60606 54-1984348 320,455 NEF Inc MetLife Investment Fund LowIncomeHous DE RELATED Νo Yes 0 010 % 10 S Riverside Plaza Ste 1700 Chicago, IL 60606 36-4426157 NEFCI 0 0 0 MLI Investment Fund II LP LowIncomeHous N/A Νo Νo 10 S Riverside Plaza Ste Chicago, IL 60606 26-2554858 N/A Mountain View Terrace Apts LowIncomeHous ΑZ CDA South Νo Νo 10 S Riverside Plaza Ste 1700 Chicago, IL 60606 86-0932708 MS Shared Investment Fund LowIncomeHous NEFCI N/A 0 0 0 Νo Νo 10 S Riverside Plaza Ste 1700 Chicago, IL 60606 27-1490797  ${\sf MS\ Single\ Investor\ Fund\ I}$ LowIncomeHous DE MS Fund Mgr N/A 0 0 Νo 0 Νo LLC 10 S Riverside Plaza Ste 1700 Chicago, IL 60606 27-1499871 MS Single Investor Fund II LowIncomeHous MS Fund Mgr 0 0 0 N/A ΙL Νo Νo LLC 10 S Riverside Plaza Ste 1700 Chicago, IL 60606 90-0859804 -132 846,532 NAHIF XVII - NEF LLC NEF Inc RELATED Yes 0 010 % LowIncomeHous DE Νo 10 S Riverside Plaza Ste Chicago, IL 60606 90-6061443 NAHIF XX - NEF LLC NEFCI LowIncomeHous N/A Νo Νo 10 S Riverside Plaza Ste 1700 Chicago, IL 60606 20-1651241

Form 990, Schedule R	, Part III - Identif	1	of Related C	Organizations	Taxable as a	Partnership	1	ı	1	,	;, l	
(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) 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) Dispropr allocat	ions?	amount in Box 20 of Schedule K-1	Ger Mana	j) leral or aging ner?	(k) Percentage ownership
		Country)		tax under sections 512-514)			V T	NI-	(Form 1065)	V	No.	
National Affordable Housing Inv I LP	LowIncomeHous	DE	NEFCI	N/A	0	0		No No	0	Yes	No No	
10 S Riverside Plaza Ste 1700 Chicago, IL 60606 26-1177748												
National Affordable Housing Inv XIV-NEF	LowIncomeHous	DE	NEF Inc	RELATED	605,945	-605,842		No	0	Yes		0 010 %
10 S Riverside Plaza Ste 1700 Chicago, IL 60606 20-0690738												
National City Investment Fund LLC	LowIncomeHous	DE	NEF Inc	RELATED	-418	169,861		No	0	Yes		1 000 %
10 S Riverside Plaza Ste 1700 Chicago, IL 60606 95-4893437												
National Equity Fund 1993 LP	LowIncomeHous	DE	NEF Inc	RELATED	-91	0		No	0	Yes		0 010 %
10 S Riverside Plaza Ste 1700 Chicago, IL 60606 36-3878944					30	65,607			0			
National Equity Fund 1994 LP 10 S Riverside Plaza Ste 1700	LowIncomeHous	DE	NEF Inc	RELATED	30	65,607		No	U	Yes		0 010 %
Chicago, IL 60606 36-3958151 National Equity Fund 1995 LP	LowIncomeHous	DE	NEF Inc	RELATED	-75	0		No	0	Yes		0 010 %
10 S Riverside Plaza Ste 1700 Chicago, IL 60606 36-4025434												
National Equity Fund 1995 Series II LP	LowIncomeHous	DE	NEF Inc	RELATED	-11	0		No	0	Yes		0 010 %
10 S Riverside Plaza Ste 1700 Chicago, IL 60606												
36-4025433 National Equity Fund 1996 LP	LowIncomeHous	DE	NEF Inc	RELATED	-184	-16,058		No	0	Yes		0 010 %
10 S Riverside Plaza Ste 1700 Chicago, IL 60606 36-4094851												
National Equity Fund 1996 Series II LP	LowIncomeHous	DE	NEF Inc	RELATED	186	-4,314		No	0	Yes		0 010 %
10 S Riverside Plaza Ste 1700 Chicago, IL 60606 36-4097771												
National Equity Fund 1997 LP	LowIncomeHous	DE	NEF Inc	RELATED	11,804	-6,884		No	0	Yes		0 010 %
10 S Riverside Plaza Ste 1700 Chicago, IL 60606 36-4188807												
National Equity Fund 1997 Series II LP	LowIncomeHous	DE	NEF Inc	RELATED	8,112	478,409		No	0	Yes		0 010 %
10 S Riverside Plaza Ste 1700 Chicago, IL 60606 36-4192679												
National Equity Fund 1999 LP 10 S Riverside Plaza Ste	LowIncomeHous	DE	NEF Inc	RELATED	-187	15,560		No	0	Yes		0 010 %
10 S Riverside Plaza Ste 1700 Chicago, IL 60606 36-4262821												
National Equity Fund 1999 Series II LP	LowIncomeHous	DE	NEF Inc	RELATED	-503	241,785		No	0	Yes		0 010 %
10 S Riverside Plaza Ste 1700 Chicago, IL 60606 36-4284872												
National Equity Fund 2000 LLC	LowIncomeHous	DE	NEF Inc	RELATED	-25	69,399		No	0	Yes		0 001 %
10 S Riverside Plaza Ste 1700 Chicago, IL 60606 36-4373745												
National Equity Fund 2001 LLC	LowIncomeHous	DE	NEF Inc	RELATED	-7	860,718		No	0	Yes		0 %
10 S Riverside Plaza Ste 1700 Chicago, IL 60606 36-4437162												

Form 990, Schedule R	, Part III - Identif	1	of Related Or	ganizations	Taxable as a	Partnership	ı		I	. م	1	
(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal Domicile (State or Foreign Country)	Controlling Entity	(e) Predominant Income(related, unrelated, excluded from tax under	(f) Share of total Income	(g) Share of end-of- year assets		rtionate tions?	(i) Code V-UBI amount in Box 20 of Schedule K-1 (Form 1065)	Gen o Mana Part	eral r agıng	<b>(k)</b> Percentage ownership
				sections 512-514)			Yes	No		Yes	No	
National Equity Fund 2002 LLC	LowIncomeHous	DE	NEF Inc	RELATED	-16	675,749		No	0	Yes		0 %
10 S Riverside Plaza Ste 1700 Chicago, IL 60606 75-3045298												
National Equity Fund 2003 LLC	LowIncomeHous	DE	NEF Inc	RELATED	-16	1,018,575		No	0	Yes		0 %
10 S Riverside Plaza Ste 1700 Chicago, IL 60606 20-0083344												
National Equity Fund 2004 LLC	LowIncomeHous	DE	NEF Inc	RELATED	-17	1,778,821		No	0	Yes		0 %
10 S Riverside Plaza Ste 1700 Chicago, IL 60606 20-1909507												
National Equity Fund 2005 LP	LowIncomeHous	DE	NEFCI	N/A	0	0		No	0		No	
10 S Riverside Plaza Ste 1700 Chicago, IL 60606 20-3052057												
National Equity Fund 2006 LP	LowIncomeHous	DE	NEFCI	N/A	0	0		No	0		No	
10 S Riverside Plaza Ste 1700 Chicago, IL 60606 20-4587136												
National Equity Fund 2006 Series II LP	LowIncomeHous	DE	NEFCI	N/A	0	0		No	0		Νo	
10 S Riverside Plaza Ste 1700 Chicago, IL 60606 20-5575038												
National Equity Fund 2007 LP	LowIncomeHous	DE	NEFCI	N/A	0	0		No	0		No	
10 S Riverside Plaza Ste 1700 Chicago, IL 60606 20-8189381												
National Equity Fund 2007 Series II LP	LowIncomeHous	DE	NEFCI	N/A	0	0		No	0		Νo	
10 S Riverside Plaza Ste 1700 Chicago, IL 60606 20-8864796												
National Equity Fund 2008 LP	LowIncomeHous	DE	NEFCI	N/A	0	0		No	0		Νo	
10 S Riverside Plaza Ste 1700 Chicago, IL 60606 26-1775928												
National Equity Fund 2008 Series II LP	LowIncomeHous	DE	NEFCI	N/A	0	0		No	0		No	
10 S Riverside Plaza Ste 1700 Chicago, IL 60606 26-2740220												
NATIONAL EQUITY FUND 2009 LP	LowIncomeHous	DE	NEF 2009 LLC	N/A	0	0		No	0		Νo	
10 S Riverside Plaza Ste 1700 Chicago, IL 60606 26-4818735												
National Equity Fund 2011 Inv Fund LP	LowIncomeHous		NEF 2011FundMgr	N/A	0	0		No	0		Νo	
10 S Riverside Plaza Ste 1700 Chicago, IL 60606 45-2642927												
National Equity Fund 2011 LP	LowIncomeHous	IL	NEF 2011 LLC	N/A	0	0		No	0		No	
10 S Riverside Plaza Ste 1700 Chicago, IL 60606 45-3062097												
National Equity Fund 2012 LP	LowIncomeHous		NEF 2012FundMgr	N/A	0	0		No	0		No	
10 S Riverside Plaza Ste 1700 Chicago, IL 60606 90-0808241												
National Equity Fund 2013 LP	LowIncomeHous		NEF 2013FundMgr	N/A	0	0		No	0		Νo	
10 S Riverside Plaza Ste 1700 Chicago, IL 60606 90-0937028												

Form 990, Schedule R, F	Part III - Identific	1	Related Organ		able as a Pa	rtnership	1			1		
(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal Domicile (State or Foreign Country)	Entity	(e) Predominant Income (related, unrelated, excluded from tax under sections	(f) Share of total Income	(g) Share of end- of-year assets	alloca		(i) Code V-UBI amount in Box 20 of Schedule K-1 (Form 1065)	Gen Mana Part		<b>(k)</b> Percentage ownership
NEF Afford Hous Invst Fund	LowIncomeHous	DE	NEFCI	512-514) N/A	0	0	Yes	<b>No</b> No	0	Yes	No No	
LP 10 S Riverside Plaza Ste 1700 Chicago, IL 60606 27-0719219												
NEF Afford Hous Invst Fund II LP	LowIncomeHous	DE	NEFCI	N/A	0	0		No	0		No	
10 S Riverside Plaza Ste 1700 Chicago, IL 60606 27-2395998												
NEF Affordable Housing Inv Fund III LP	LowIncomeHous	DE	NEFCI	N/A	0	0		No	0		Νo	
10 S Riverside Plaza Ste 1700 Chicago, IL 60606 45-1682803					0	0						
NEF Capital One Investment Fund LLC	LowIncomeHous	IL	NEFCI	N/A	0	0		No	0		No	
10 S Riverside Plaza Ste 1700 Chicago, IL 60606 90-0843727					475							
NEF Community Investment Fund II LP	LowIncomeHous	DE	NEF Inc	RELATED	-475	541		No	0	Yes		1 000 %
10 S Riverside Plaza Ste 1700 Chicago, IL 60606 20-1309458 NEF Encanto Pointe Middle	LowIncomeHous	IL	NEFEncantoPtM gr	N/A	0	0		No	0		No	
Tier Fund LLC												
10 S Riverside Plaza Ste 1700 Chicago, IL 60606												
45-3343607  NEF First Niagara  Investment Fund LLC	LowIncomeHous	IL	NEFCI	N/A	0	0		No	0		No	
10 S Riverside Plaza Ste 1700												
Chicago, IL 60606 45-2756618 NEF Heartland Fund LLC	LowIncomeHous	DE	NEF Inc	RELATED	-2	157		No	0	Yes		0 %
10 S Riverside Plaza Ste	Lowincomerious		INCE THE	RELATED		13,		NO	v	les		U 78
1700 Chicago, IL 60606 _20-0083309												
NEF Investment Partners Fund I LLC	LowIncomeHous	DE	NEFCI	N/A	0	0		No	0		Νo	
10 S Riverside Plaza Ste 1700 Chicago, IL 60606 27-0186285												
NEF Investment Partners Fund II LLC	LowIncomeHous	DE	NEFCI	N/A	0	0		No	0		No	
10 S Riverside Plaza Ste 1700 Chicago, IL 60606 27-2772231 NEF Investment Partners	LowIncomeHous	IL	NEFCI	N/A	0	0		No	0		No	
Fund III LLC												
10 S Riverside Plaza Ste 1700 Chicago, IL 60606 45-3343649												
NEF Investment Partners Fund IV LLC	LowIncomeHous	IL	NEFCI	N/A	0	0		No	0		No	
10 S Riverside Plaza Ste 1700 Chicago, IL 60606 61-1686144												
NEF National Community Inv	LowIncomeHous	DE	NEFCI	N/A	0	0		No	0		No	
10 S Riverside Plaza Ste 1700 Chicago, IL 60606 45-1167950												
NEF NEIGHBORHOOD REVITALIATION FUND I	LowIncomeHous	DE	NEFCI	N/A	0	0		No	0		No	
10 S Riverside Plaza Ste 1700 Chicago, IL 60606 27-0186322												
NEF NEIGHBORHOOD REVITALIZ FUND II LLC	LowIncomeHous		NN RevFundIIMgr	N/A	0	0		No	0		No	
10 S Riverside Plaza Ste 1700 Chicago, IL 60606 27-4033192			J									

Form 990, Schedule	R, Part III - Iden		n of Related Org		axable as a P	artnership						
(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal Domicile (State or Foreign Country)	Entity	(e) Predominant income (related, unrelated, excluded from tax under	(f) Share of total Income	(g) Share of end-of- year assets		ortionate itions?	(i) Code V-UBI amount in Box 20 of Schedule K-1 (Form 1065)	Gen o Mana	r	(k) Percentage ownership
NEF New York Special	LowIncomeHous		NEFCI	sections 512-514) N/A	0	0	Yes	No No	0	Yes	No No	
Tax Credit Fund 200  10 S Riverside Plaza Ste 1700 Chicago, IL 60606												
27-0365747 NEF Orchard Westchase	LowIncomeHous	IL	NEFO rchardWC Mgr	N/A	0	0		No	0		No	
Middle Tier Fd LLC  10 S Riverside Plaza Ste												
1700 Chicago, IL 60606 45-3343435												
NEF RBS Citizens Investment Fund I LP	LowIncomeHous	IL	NEFCI	N/A	0	0		No	0		No	
10 S Riverside Plaza Ste 1700 Chicago, IL 60606 90-1021547												
NEF Regional Fund I - Chicago LP	LowIncomeHous	IL	NEFCI	N/A	0	0		No	0		No	
10 S Riverside Plaza Ste 1700 Chicago, IL 60606												
80-0944868 New York Equity Fund 1988 LP	LowIncomeHous	NY	NEF Inc	RELATED	190,178	-298,140		No	0	Yes		0 020 %
10 S Riverside Plaza Ste 1700 Chicago, IL 60606 36-3602373												
New York Equity Fund 1989 LP	LowIncomeHous	NY	NEF Inc	RELATED	51,351	-184,892		No	0	Yes		0 010 %
10 S Riverside Plaza Ste 1700 Chicago, IL 60606 36-3680405												
New York Equity Fund 1990 LP	LowIncomeHous	NY	NEF Inc	RELATED	46,602	-3,605		No	0	Yes		0 010 %
10 S Riverside Plaza Ste 1700 Chicago, IL 60606												
36-3744662 New York Equity Fund 1992 LP	LowIncomeHous	NY	NEF Inc	RELATED	3,511	-6,898		No	0	Yes		0 010 %
10 S Riverside Plaza Ste 1700 Chicago, IL 60606												
36-3831681 New York Equity Fund 1993 LP	LowIncomeHous	NY	NEF Inc	RELATED	451	-614		No	0	Yes		0 010 %
10 S Riverside Plaza Ste 1700 Chicago, IL 60606												
36-3924008 New York Equity Fund 1994 LP	LowIncomeHous	NY	NEF Inc	RELATED	4,473	-4,132		No	0	Yes		0 010 %
10 S Riverside Plaza Ste 1700 Chicago, IL 60606												
36-3970081 New York Equity Fund 1995 LP	LowIncomeHous	NY	NEF Inc	RELATED	12,493	2,602		No	0	Yes		0 010 %
10 S Riverside Plaza Ste 1700 Chicago, IL 60606												
36-4033218 New York Equity Fund 1995 Series II LP	LowIncomeHous	NY	NEF Inc	RELATED	377	-22,444		No	0	Yes		0 010 %
10 S Riverside Plaza Ste 1700 Chicago, IL 60606 36-4047569												
New York Equity Fund 2000 LP	LowIncomeHous	NY	NEF Inc	RELATED	-397	913		No	0	Yes		0 010 %
10 S Riverside Plaza Ste 1700 Chicago, IL 60606 36-4187874												
New York Equity Fund 2000 Series II LP	LowIncomeHous	NY	NYEF Inc	N/A	0	0		No	0		No	
10 S Riverside Plaza Ste 1700 Chicago, IL 60606												
36-4190655 New York Equity Fund 2001 LLC	LowIncomeHous	DE	NYEF Inc	N/A	0	0		No	0		No	
10 S Riverside Plaza Ste 1700 Chicago, IL 60606 36-4402575												
	1	1	1	1		1	•	<u>.                                      </u>		1		

Form 990, Schedule R, Part III - Identification of Related Organizations Taxable as a Partnership (c) (i) Code V-UBI (e) General **(d)** Direct **(f)** Share of total Legal (g) Share of end-of-**(k)** Percentage Predominant Disproprtionate Domicile allocations? Name, address, and EIN of Primary activity ncome(related, amount in Controlling (State ıncome year assets Managing unrelated, Box 20 of Schedule related organization Partner? or Entity excluded from K - 1 Foreign (Form 1065) tax under Country) sections 512-514) Yes No Yes No New York Equity Fund 2002 LowIncomeHous NYEF Inc DE ln/a Νo Νo 10 S Riverside Plaza Ste 1700 Chicago, IL 60606 72-1536444 New York Equity Fund 2003 LowIncomeHous NYEF Inc DE In/A Νo Νo 10 S Riverside Plaza Ste 1700 Chicago, IL 60606 20-0335458 New York Equity Fund 2004 LowIncomeHous DE NYEF Inc N/A Νo Νo 10 S Riverside Plaza Ste 1700 Chicago, IL 60606 80-0132471 0 0 0 New York Equity Fund 2005 LowIncomeHous NYEF Inc N/A Νo Νo 10 S Riverside Plaza Ste 1700 Chicago, IL 60606 20-3760899 New York Equity Fund 2006 LowIncomeHous NYEF Inc 0 0 0 N/A Νo Νo 10 S Riverside Plaza Ste 1700 Chicago, IL 60606 20-5705331 New York Equity Fund 2008 LowIncomeHous NYEF Inc N/A 0 0 Νo 0 Νo 10 S Riverside Plaza Ste 1700 Chicago, IL 60606 26-2775151 Newark Community LowIncomeHous NEF Inc RELATED -58 -768 Νo 0 0 010 % Yes Investment Fund LLC 10 S Riverside Plaza Ste 1700 Chicago, IL 60606 36-4424438 Northern California LowIncomeHous DE NEFCI N/A 0 0 Νo 0 Νo Investment Fund I LP 10 S Riverside Plaza Ste 1700 Chicago, IL 60606 45-3077326 937,953 One Economy Fund I LLC LowIncomeHous DΕ NEF Inc RELATED -3 Νo 0 Yes 0 % 10 S Riverside Plaza Ste 1700 Chicago, IL 60606 20-2660021 Oregon Equity Fund II LP 0 0 0 LowIncomeHous O regon Aff N/A Νo Νo Hsg 10 S Riverside Plaza Ste Chicago, IL 60606 93-1169181 O regon Aff 0 0 0 Oregon Equity Fund III LP LowIncomeHous OR In/A Νo Νo Hsg 10 S Riverside Plaza Ste 1700 Chicago, IL 60606 93-1231023 Oregon Equity Fund IV LP LowIncomeHous OR O regon Aff N/A 0 0 Νo 0 Νo lHsg 10 S Riverside Plaza Ste 1700 Chicago, IL 60606 93-1258939 Preservation LLC NEFCI N/A 0 0 Νo 0 Νo LowIncomeHous 10 S Riverside Plaza Ste 1700 Chicago, IL 60606 20-5160740 Progressive Fremont LP LowIncomeHous SC CDA South ln/A Νo Νo Inc 10 S Riverside Plaza Ste 1700 Chicago, IL 60606 58-2529371 0 Reliance-LaSalle LowIncomeHous LA CDA South N/A 0 0 Νo Νo Associates LP Inc 10 S Riverside Plaza Ste Chicago, IL 60606 45-2696077

Form 990, Schedule K,	Part III - Identific		f Related Or	ganizations '	Taxable as a	Partnership	ı		I	1 -	. , ,	
(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) 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	(h) Disprop alloca	ortionate tions?	(i) Code V-UBI amount in Box 20 of Schedule K-1 (Form 1065)	(j Gen o Mana Part	eral or aging ner?	(k) Percentage ownership
South Loop Investors LP	LowIncomeHous	IL	NEFCI	N/A	0	0	163	No	0	163	No	
10 S Riverside Plaza Ste 1700 Chicago, IL 60606 36-4243402					0	0			0			
St Johns Avenue One LP  10 S Riverside Plaza Ste 1700 Chicago, IL 60606 36-0060542	LowIncomeHous	SC	CDA TCG Inc	IN/A	U	0		No	U		No	
Standard Fund I LP	LowIncomeHous	DE	NEFCI	N/A	0	0		No	0		No	
10 S Riverside Plaza Ste 1700 Chicago, IL 60606 45-2066675 State Farm Good Neighbor Fund LP	LowIncomeHous	DE	NEFCI	N/A	0	0		No	0		No	
10 S Riverside Plaza Ste 1700 Chicago, IL 60606 27-1973833												
TD BankNorth Housing Investment Fund LP  10 S Riverside Plaza Ste	LowIncomeHous	DE	NEFCI	N/A	0	0		No	0		No	
1700 Chicago, IL 60606 20-4417284												
The La Quinta Equity Fund LP	LowIncomeHous	DE	NEFCI	N/A	0	0		No	0		No	
10 S Riverside Plaza Ste 1700 Chicago, IL 60606 26-2400960												
Tipson Road Apartments LP	LowIncomeHous	SC	CDA TCG Inc	N/A	0	0		No	0		No	
10 S Riverside Plaza Ste 1700 Chicago, IL 60606 51-0430350												
University Dale Apartments LP	LowIncomeHous	MN	CDA Dale Inc	N/A	0	0		No	0		No	
10 S Riverside Plaza Ste 1700 Chicago, IL 60606 20-1389113												
US Affordable Housing CIF	LowIncomeHous	DE	NEF Inc	RELATED	-20	4,389		No	0	Yes		0 010 %
10 S Riverside Plaza Ste 1700 Chicago, IL 60606 20-4417160												
US Affordable Housing CIF LLC	LowIncomeHous	DE	NEF Inc	RELATED	-155	504		No	0	Yes		0 010 %
10 S Riverside Plaza Ste 1700 Chicago, IL 60606 94-3414697												
Washington Mutual CIF LLC	LowIncomeHous	DE	NEF Inc	RELATED	-76	461		No	0	Yes		0 010 %
10 S Riverside Plaza Ste 1700 Chicago, IL 60606 36-4419044												
WFCIH Investment Fund I LLC	LowIncomeHous	DE	NEFCI	N/A	0	0		No	0		No	
10 S Riverside Plaza Ste 1700 Chicago, IL 60606 27-2007684												
WFCIH Investment Fund II LLC	LowIncomeHous	DE	NEFCI	N/A	0	0		No	0		No	
10 S Riverside Plaza Ste 1700 Chicago, IL 60606 27-5558178												
Wintrust Community Investment Fund LP	LowIncomeHous	DE	NEFCI	N/A	0	0		No	0		No	
10 S Riverside Plaza Ste 1700 Chicago, IL 60606 27-2440641												
Chapin Housing LP	LowIncomeHous	DC	CDA DC Inc	N/A	0	0		No	0		No	
10 S Riverside Plaza Ste 1700 Chicago, IL 60606 52-2324692												

Form 990, Schedule R, Part III - Identification of Related Organizations Taxable as a Partnership (j) (c) (h) (i) (e) General Legal (d) (f) (g) Disproprtionate Code V-UBI (k) (b) Predominant (a) Domicile Direct Share of total Share of end-ofor Name, address, and EIN of allocations? Percentage amount in Primary activity ncome(related (State Controlling income year assets Managing Box 20 of Schedule ownership unrelated, related organization Partner? Entity excluded from K-1 Foreign (Form 1065) tax under Country) sections 512-514) Yes No Yes No Euclid Housing LP LowIncomeHous CDA DC Inc N/A 0 0 Νo 0 Νo 10 S Riverside Plaza Ste Chicago, IL 60606 52-2324688 ΙL NEFCI N/A 0 0 California Equity Fund LowIncomeHous Νo Νo 2014 LP 10 S Riverside Plaza Ste 1700 Chicago, IL 60606 35-2484320 National Equity Fund 2014 LowIncomeHous NEF 2014 ΙL N/A Νo Νo lFund M 10 S Riverside Plaza Ste 1700 Chicago, IL 60606 61-1735239 ΙL NEFCI N/A 0 0 **NEF Investment Partners** LowIncomeHous Νo Νo Fund V LLC 10 S Riverside Plaza Ste 1700 Chicago, IL 60606 35-2504836 NEF National Community LowIncomeHous  $\mathsf{IL}$ NEFCI N/A Νo 0 Νo Inv Fund III LP 10 S Riverside Plaza Ste 1700 Chicago, IL 60606 38-3939169 NEF Regional Fund II -NEFCI 0 0 0 ΙL N/A LowIncomeHous Νo Νo Florida LP 10 S Riverside Plaza Ste 1700 Chicago, IL 60606 32-0421685 0 NEF Regional Fund IV owIncomeHous ΙL NEF 2014 N/A Νo Νo Region Northeast LP 10 S Riverside Plaza Ste 1700 Chicago, IL 60606 38-3926967 NEF Regional Fund V -LowIncomeHous NEF 2014 0 0 0  $\mathsf{IL}$ N/A Νo Νo Chicago LP Region 10 S Riverside Plaza Ste 1700 Chicago, IL 60606 36-4792159 N/A 0 0  ${\sf MS\ Single\ Investor\ Fund}$ LowIncomeHous  $\mathsf{IL}$ MS Fund Mgr 0 Νo Νo III LLC LLC 10 S Riverside Plaza Ste 1700 Chicago, IL 60606 35-2458273 ΙL BOACHIF N/A 0 0 Bank of America CHIF VIII LowIncomeHous Νo Νo Fund Ma 10 S Riverside Plaza Ste 1700 Chicago, IL 60606 30-0829863 NEFCI 0 0 0 Cathay Shared Investment | LowIncomeHous  $\mathsf{IL}$ N/A Νo Νo Fund I LP 10 S Riverside Plaza Ste 1700 Chicago, IL 60606 37-1761153 **NEF Compass Shared** LowIncomeHous NEFCI N/A 0 0 Νo 0 Νo Investment Fund I LP 10 S Riverside Plaza Ste 1700 Chicago, IL 60606 30-0848864 33,877 NYC Distressed Low&Mod Inc Hsg DΕ NYC DMH LLC N/A Νo Νo 2 0 3 1 % Multifamily Hsg Fund I LP 10 S Riverside Plaza Ste 1700 Chicago, IL 60606 32-0417959 California Equity Fund NEFCI N/A 0 ΙL Νo Νo LowIncomeHous 2015 LP 10 S Riverside Plaza Ste 1700 Chicago, IL 60606 61-1756884 Four Eighty-One Housing \_owIncomeHous NEFCI N/A 0 Νo 0 Νo Investment Fund 10 S Riverside Plaza Ste 1700 Chicago, IL 60606 32-0449544

Form 990, Schedule R,	Part III - Identifi	1	f Related Or	ganizations '	Taxable as a	Partnership	ı		1	ı		
<b>(a)</b> Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal Domicile (State or Foreign Country)	<b>(d)</b> Direct 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	alloca	ortionate tions?	(i) Code V-UBI amount in Box 20 of Schedule K-1 (Form 1065)	Gen o Mana Part	eral r aging ner?	(k) Percentage ownership
Homestead Equity Fund XII Limited Partne	LowIncomeHous	IL	NEFCI	N/A	0	0	Yes	No No	0	Yes	No No	
10 S Riverside Plaza Ste 1700 Chicago, IL 60606 38-3958343					1.100	1.070						
NEF Community Investment Fund LP	LowIncomeHous	DE	NEF Inc	RELATED	4,499	1,973		No	0	Yes		0 010 %
10 S Riverside Plaza Ste 1700 Chicago, IL 60606 36-4406954			NEED	N/4	0	0		No	0		N. a	
NEF Investment Partners Fund VI LP	LowIncomeHous	IL	NEFCI	N/A		Ů		No			No	
10 S Riverside Plaza Ste 1700 Chicago, IL 60606 38-3971141					0	0			0			
NEF Key Shared Investment Fund LP	LowIncomeHous	IL	NEF Key Fund Ma	N/A	0	0		No	0		No	
10 S Riverside Plaza Ste 1700 Chicago, IL 60606 30-0877385												
NEF Preservation Fund I LP 10 S Riverside Plaza Ste 1700 Chicago, IL 60606 32-0456396	LowIncomeHous	1	NEF Preservatio	N/A	0	0		No	0		Νο	
NEF Regional Fund VII - Chicago LP	LowIncomeHous	1	NEF 2015 Region	N/A	0	0		No	0		No	
10 S Riverside Plaza Ste 1700 Chicago, IL 60606 35-2532766			Region									
NEF STCC Affordable Housing Fund I LP	LowIncomeHous	IL	NEFCI	N/A	0	0		No	0		Νo	
10 S Riverside Plaza Ste 1700 Chicago, IL 60606 36-4808360												
NEF Webster LIHTC Fund I LP	LowIncomeHous	DE	NEFCI	N/A	0	0		No	0		Νo	
10 S Riverside Plaza Ste 1700 Chicago, IL 60606 35-2534716 Northern California Investment Fund II L	LowIncomeHous	IL	NEFCI	N/A	0	0		No	0		No	
10 S Riverside Plaza Ste 1700 Chicago, IL 60606 35-2511685												
WFCIH Investment Fund III LP	LowIncomeHous	IL	NEFCI	N/A	0	0		No	0		Νo	
10 S Riverside Plaza Ste 1700 Chicago, IL 60606 38-3968675												
Melrose East II LLC	LowIncomeHous	LA	CDA Melrose Inc	N/A	0	0		No	0		Νo	
10 S Riverside Plaza Ste 1700 Chicago, IL 60606 72-1481657 Chase NMTC Winters	COMMUNITY DEV	DE	NA	N/A	0	0		No	0		No	
Building LLC  Chase NMTC Winters  Building LLC	COMMONITI DEV	DL	NA .	N/A	, and the second			No	, and the second		No	
Chicago, IL 60606 27-0226436 Coral New Haven	LowIncomeHous	СТ	N A	N/A	0	0		No	0		No	
Associates II LLC  Coral New Haven Associates II LLC	Lowincomenous	CI	IV A	IN/A	, and the second	, and the second		NO	Ů		NO	
Chicago, IL 60606 06-1526805												
East Harlem Abyssınıan Trıangle LLC	LowIncomeHous	NY	NA	N/A	0	0		No	0		No	
East Harlem Abyssinian Triangle LLC Chicago, IL 60606 13-3874719												
LISCBOA NM 40 Investment Fund LLC	COMMUNITY DEV	DE	N A	N/A	0	0		No	0		Νo	
LISC/BOA NM 40 Investment Fund LLC Chicago, IL 60606 26-2667429												

Form 990, Schedule R,	Part III - Identifi		f Related Or	ganizations '	Taxable as a	Partnership	1		1	۱ ،	, I	
(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal Domicile (State or Foreign Country)	<b>(d)</b> Direct 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	(h) Disprop alloca		(i) Code V-UBI amount In Box 20 of Schedule K-1 (Form 1065)	Gen o Mana Parti	eral r iging	(k) Percentage ownership
New Markets Investment 37 LLC	COMMUNITY DEV	DE	NA	N/A	0	0		No	0		No	
New Markets Investment 37 LLC Chicago, IL 60606 26-1283428 New Markets Investment 38 LLC	COMMUNITY DEV	DE	N A	N/A	0	0		No	0		No	
New Markets Investment 38 LLC Chicago, IL 60606 26-1283547												
New Markets Investment 39 LLC	COMMUNITY DEV	DE	NA	N/A	0	0		Νo	0		No	
New Markets Investment 39 LLC Chicago, IL 60606 26-1283590 New Markets Investment 40 LLC	COMMUNITY DEV	DE	N A	N/A	0	0		No	0		No	
New Markets Investment 40 LLC Chicago, IL 60606												
26-1283633 New Markets Investment	COMMUNITY DEV	DE	NA	N/A	0	0		No	0		No	
New Markets Investment 44 LLC Chicago, IL 60606												
26-1284745 New Markets Investment 53 LLC	COMMUNITY DEV	DE	NA	N/A	0	0		No	0		No	
New Markets Investment 53 LLC Chicago, IL 60606 26-3667103												
New Markets Investment 54 LLC	COMMUNITY DEV	DE	NA	N/A	0	0		Νo	0		No	
New Markets Investment 54 LLC Chicago, IL 60606 26-3667492												
New Markets Investment 55 LLC	COMMUNITY DEV	DE	NA	N/A	0	0		No	0		No	
New Markets Investment 55 LLC Chicago, IL 60606 26-3667554  New Markets Investment	COMMUNITY DEV	DE	N A	N/A	0	0		No	0		No	
56 LLC	COMMONITY DEV		N A	IN/A	J			NO	, and the second		NO	
New Markets Investment 56 LLC Chicago, IL 60606 26-3667638												
New Markets Investment 57 LLC	COMMUNITY DEV	DE	NA	N/A	0	0		No	0		No	
New Markets Investment 57 LLC Chicago, IL 60606 26-3667699												
New Markets Investment 58 LLC	COMMUNITY DEV	DE	NA	N/A	0	0		No	0		No	
New Markets Investment 58 LLC Chicago, IL 60606 26-3667743												
New Markets Investment 59 LLC	COMMUNITY DEV	DE	NA	N/A	0	0		No	0		No	
New Markets Investment 59 LLC Chicago, IL 60606 26-3667805												
New Markets Investment 60 LLC	COMMUNITY DEV	DE	NA	N/A	0	0		No	0		No	
New Markets Investment 60 LLC Chicago, IL 60606 26-3667849												
New Markets Investment 61 LLC	COMMUNITY DEV	DE	NA	N/A	0	0		No	0		No	
New Markets Investment 61 LLC Chicago, IL 60606 26-3667884												
New Markets Investment 62 LLC	COMMUNITY DEV	DE	NA	N/A	0	0		Νo	0		No	<del></del>
New Markets Investment 62 LLC Chicago, IL 60606 26-3667945												

Form 990, Schedule R,	Part III - Identifi	1	f Related O	ganizations	Taxable as a	Partnership	1		1	1		
(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal Domicile (State or Foreign Country)	<b>(d)</b> Direct 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	alloca		(i) Code V-UBI amount In Box 20 of Schedule K-1 (Form 1065)	Gen o Mana Parti	eral r agıng	(k) Percentage ownership
New Markets Investment 63 LLC	COMMUNITY DEV	DE	N A	N/A	0	0		No	0	Yes	No	
New Markets Investment 63 LLC Chicago, IL 60606 26-3667997												
New Markets Investment 64 LLC	COMMUNITY DEV	DE	N A	N/A	0	0		No	0		No	
New Markets Investment 64 LLC Chicago, IL 60606 26-3668030												
New Markets Investment 65 LLC	COMMUNITY DEV	DE	NΑ	N/A	0	0		No	0		No	
New Markets Investment 65 LLC Chicago, IL 60606 26-3668049												
New Markets Investment 66 LLC	COMMUNITY DEV	DE	NΑ	N/A	0	0		No	0		No	
New Markets Investment 66 LLC Chicago, IL 60606 26-3668078	COMMUNITY DEV	25	N.A.	N/A	0	0		No	0		N. a	
67 LLC New Markets Investment 67 LLC	COMMUNITY DEV	DE	NA	N/A	U	0		No	U		No	
Chicago, IL 60606 45-3279307 New Markets Investment	COMMUNITY DEV	DE	N A	N/A	0	0		No	0		No	
68 LLC New Markets Investment 68 LLC Chicago, IL 60606												
45-3279651	COMMUNITY DEV	DE	N A	N/A	0	0		No	0		No	
69 LLC New Markets Investment 69 LLC												
Chicago, IL 60606 45-3279761 New Markets Investment	COMMUNITY DEV	DE	NA	N/A	0	0		No	0		No	
70 LLC	COMMUNITY DEV	DE	IN A	IN/A	U			NO	, o		NO	
New Markets Investment 70 LLC Chicago, IL 60606 45-3279832  New Markets Investment	COMMUNITY DEV	DE	N A	N/A	0	0		No	0		No	
71 LLC  New Markets Investment 71 LLC	COMMUNITY DEV	DE	N A	N/A	C			NO	J		NO	
Chicago, IL 60606 45-3279898 New Markets Investment	COMMUNITY DEV	DE	N A	N/A	0	0		No	0		No	
72 LLC  New Markets Investment 72 LLC Chicago, IL 60606	COMMUNITY DEV	DE	NA	N/A	v	J J		NO			NU	
45-3971018	COMMUNITY DEV	DE	N A	N/A	0	0		No	0		No	
73 LLC  New Markets Investment 73 LLC  Chicago, IL 60606 45-3971311					_							
New Markets Investment 74 LLC	COMMUNITY DEV	DE	NΑ	N/A	0	0		No	0		No	
New Markets Investment 74 LLC Chicago, IL 60606 45-3971382												
New Markets Investment 75 LLC	COMMUNITY DEV	DE	N A	N/A	0	0		No	0		No	
New Markets Investment 75 LLC Chicago, IL 60606 45-3971476												
New Markets Investmetn 76 LLC	COMMUNITY DEV	DE	NA	N/A	0	0		No	0		No	
New Markets Investmetn 76 LLC Chicago, IL 60606 45-3971577												
New Markets Investment 77 LLC	COMMUNITY DEV	DE	NΑ	N/A	0	0		No	0		No	
New Markets Investment 77 LLC Chicago, IL 60606 45-3970628												

Form 990, Schedule R,	Part III - Identifi		f Related Or	ganizations '	Taxable as a	Partnership	1		ı	۱ ,.	, I	
(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal Domicile (State or Foreign Country)	<b>(d)</b> Direct 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	(h) Disprop alloca	ortionate tions?	(i) Code V-UBI amount In Box 20 of Schedule K-1 (Form 1065)	Geno O Mana Parti	eral r iging	(k) Percentage ownership
New Markets Investment 78 LLC	COMMUNITY DEV	DE	NA	N/A	0	0		No	0		No	
New Markets Investment 78 LLC Chicago, IL 60606 45-3980698 New Markets Investment 79 LLC	COMMUNITY DEV	DE	N A	N/A	0	0		No	0		No	
New Markets Investment 79 LLC Chicago, IL 60606 45-3980767												
New Markets Investment 80 LLC	COMMUNITY DEV	DE	NA	N/A	0	0		Νo	0		No	
New Markets Investment 80 LLC Chicago, IL 60606 46-0669356 New Markets Investment 81 LLC	COMMUNITY DEV	DE	N A	N/A	0	0		No	0		No	
New Markets Investment 81 LLC Chicago, IL 60606												
46-0671920 New Markets Investment	COMMUNITY DEV	DE	NA	N/A	0	0		No	0		No	
82 LLC  New Markets Investment 82 LLC Chicago, IL 60606												
46-0682374  New Markets Investment 83 LLC	COMMUNITY DEV	DE	NA	N/A	0	0		No	0		No	
New Markets Investment 83 LLC Chicago, IL 60606 46-0691987												
New Markets Investment 84 LLC	COMMUNITY DEV	DE	NA	N/A	0	0		Νo	0		No	
New Markets Investment 84 LLC Chicago, IL 60606 46-0704978												
New Markets Investment 85 LLC	COMMUNITY DEV	DE	NA	N/A	0	0		No	0		Νo	
New Markets Investment 85 LLC Chicago, IL 60606 46-0711358 New Markets Investment	COMMUNITY DEV	DE	N A	N/A	0	0		No	0		No	
86 LLC	COMMONITY DEV		NA	N/A	J			NO	, and the second		NO	
New Markets Investment 86 LLC Chicago, IL 60606 46-5303240												
New Markets Investment 87 LLC New Markets Investment	COMMUNITY DEV	DE	NA	N/A	0	0		No	0		No	
87 LLC Chicago, IL 60606 46-5312921												
New Markets Investment 88 LLC	COMMUNITY DEV	DE	NA	N/A	0	0		Νo	0		No	
New Markets Investment 88 LLC Chicago, IL 60606 46-5325114												
New Markets Investment 89 LLC	COMMUNITY DEV	DE	NA	N/A	0	0		No	0		Νo	
New Markets Investment 89 LLC Chicago, IL 60606 46-5341901												
New Markets Investment 90 LLC	COMMUNITY DEV	DE	NA	N/A	0	0		No	0		No	
New Markets Investment 90 LLC Chicago, IL 60606 46-5351645												
New Markets Investment 91 LLC	COMMUNITY DEV	DE	NA	N/A	0	0		No	0		No	
New Markets Investment 91 LLC Chicago, IL 60606 46-5364281												
New Markets Investment 92 LLC	COMMUNITY DEV	DE	NA	N/A	0	0		No	0		No	
New Markets Investment 92 LLC Chicago, IL 60606 47-3783527												

Form 990, Schedule R, F	Part III - Identific	1	Related Or	ganizations T	axable as a	Partnership	ı		1	I	. 1	
(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal Domicile (State or Foreign Country)	<b>(d)</b> Direct 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	(h) Disprop alloca		(i) Code V-UBI amount In Box 20 of Schedule K-1 (Form 1065)	(j Gen o Mana Parti	eral r aging ner?	(k) Percentage ownership
New Markets Investment 93	COMMUNITY DEV	DE	NA	N/A	0	0	Yes	No No	0	Yes	No No	
LLC												
New Markets Investment 93 LLC												
Chicago, IL 60606 47-3791775	COMMUNITY DEV	DE	NI A	N (A	0	0		N -	0		N	
New Markets Investment 94 LLC	COMMUNITY DEV	DE	NA	N/A	U			No	Ů		No	
New Markets Investment 94 LLC Chicago, IL 60606 47-3808700												
	COMMUNITY DEV	DE	NA	N/A	0	0		No	0		No	
New Markets Investment 95 LLC Chicago, IL 60606 47-3819046												
	COMMUNITY DEV	DE	NA	N/A	0	0		No	0		No	
New Markets Investment 96 LLC Chicago, IL 60606 47-3829370	COMMUNITY DEV	DE	NA	N/A	0	0		No			No	
LLC New Markets Investment 97 LLC Chicago, IL 60606												
47-3850210	COMMUNITY DEV	DE	NA	N/A	0	0		No			No	
New Markets Investment 98 LLC Chicago, IL 60606												
47-3858415 New Markets Investment 99	COMMUNITY DEV	DE	NA	N/A	0	0		No			No	
LLC  New Markets Investment 99												
LLC Chicago, IL 60606												
47-3871365 New Markets Investment	COMMUNITY DEV	DE	N A	N/A	0	0		No			No	
100 LLC	COMMONITY DEV		NA					110			110	
New Markets Investment 100 LLC Chicago, IL 60606 47-3884222												
New Markets Investment III LLC	COMMUNITY DEV	DE	NA	N/A	0	0		No			No	
New Markets Investment III LLC Chicago, IL 60606 20-0192549												
NEW MARKETS INVESTMENT IX LLC	COMMUNITY DEV	DE	NA	N/A	0	0		No			No	
NEW MARKETS INVESTMENT IX LLC Chicago, IL 60606 20-1582167												
New Markets Investment XIII LLC	COMMUNITY DEV	DE	N A	N/A	0	0		No			No	
New Markets Investment XIII LLC Chicago, IL 60606 20-3158182												
New Markets Investment XIV LLC	COMMUNITY DEV	DE	NA	N/A	0	0		No			No	
New Markets Investment XIV LLC Chicago, IL 60606												
20-3158233 New Markets Investment XVI LLC	COMMUNITY DEV	DE	NA	N/A	0	0		No			No	
New Markets Investment XVI LLC Chicago, IL 60606												
	COMMUNITY DEV	DE	NA	N/A	0	0		No			No	
XVII LLC  New Markets Investment  XVII LLC  Chicago, IL 60606												
20-3158359  New Markets Investment	COMMUNITY DEV	DE	NA	N/A	0	0		No			No	
XVIII LLC												
New Markets Investment XVIII LLC Chicago, IL 60606 20-3158395												

Form 990, Schedule R, Part III - Identification of Related Organizations Taxable as a Partnership (j) (c) (h) (i) General Legal (d) (f) (g) Disproprtionate Code V-UBI amount Predominant (k) (a) (b) Domicile Direct Share of total Share of endor allocations? Percentage Name, address, and EIN of Primary activity income(related, Controlling Managing (State ıncome of-year assets Box 20 of Schedule ownership related organization unrelated, Partner? Entity or excluded from K-1 Foreign tax under (Form 1065) Country) sections 512-514) Yes Yes No No 0 0 New Markets Investment COMMUNITY DEV DΕ NΑ N/A Νo Νo XX LLC New Markets Investment XX LLC Chicago, IL 60606 20-5200245 COMMUNITY DEV NΑ N/A 0 0 New Markets Investment DE Νo Νo XXII LLC New Markets Investment XXII LLC Chicago, IL 60606 20-5200310 0 0 New Markets Investment COMMUNITY DEV DΕ NΑ N/A Νo Νo XXIX LLC New Markets Investment XXIX LLC Chicago, IL 60606 20-5200500 COMMUNITY DEV NΑ N/A New Markets Investment DE Νo Νo XXV LLC New Markets Investment XXV LLC Chicago, IL 60606 20-5200396 COMMUNITY DEV lnα N/A New Markets Investment DΕ Νo Νo XXXI LLC New Markets Investment XXXI LLC Chicago, IL 60606 20-5200571 New Markets Investment COMMUNITY DEV DE NΑ N/A Νo Νo XXXIV LLC New Markets Investment XXXIV LLC Chicago, IL 60606 20-5200657 NM 44 Pyramid Investment COMMUNITY DEV 0 DΕ lnα N/A Νo Νo Fund LLC NM 44 Pyramid Investment Fund LLC Chicago, IL 60606 26-3487837 0 NMI XVI Investment Fund COMMUNITY DEV DE IN A N/A Νo Νo LLC NMI XVI Investment Fund LLC Chicago, IL 60606 04-3844149 Tangerine Plaza Investment COMMUNITY DEV 0 N/A Νo 0 % Fund LLC Tangerine Plaza Investment Fund LL Chicago, IL 60606 20-3937882

Form 990, Schedule R, Part IV - Identification of Related Organizations Taxable as a Corporation or Trust									
(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total Income	<b>(g)</b> Share of end-of- year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?  Yes No	
(1) NEF Assignment Corporation 10 S RIVERSIDE PLAZA STE 1700 CHICAGO, IL 60606 36-4326848	LowIncomeHous	IL	NA	C Corp	0	100,000	1 000 %	Yes	
(1) NEF Support Corporation 10 S RIVERSIDE PLAZA STE 1700 CHICAGO, IL 60606 36-4326845	LowIncomeHous	IL	NA	C Corp	222,816	70,452,314	1 000 %	Yes	
(2) NEF Mortgage Corporation 10 S RIVERSIDE PLAZA STE 1700 CHICAGO, IL 60606 83-0337773	LowIncomeHous	IL	NA	C Corp	2,242	303,740	1 000 %	Yes	
(3) NEF Community Capital Inc 10 S RIVERSIDE PLAZA STE 1700 CHICAGO, IL 60606 36-4222908	LowIncomeHous	IL	NA	C Corp	0	116,522	1 000 %	Yes	
(4) Community Development Advocates Inc 10 S RIVERSIDE PLAZA STE 1700 CHICAGO, IL 60606 36-4009754	LowIncomeHous	IL	N A	C Corp	0	100,931	1 000 %	Yes	
(5) Community Development Advocates East Inc 10 S RIVERSIDE PLAZA STE 1700 CHICAGO, IL 60606 26-0807410	LowIncomeHous	IL	NA	C Corp	50	100,000	1 000 %	Yes	
Community Development Advocates (6) South 10 S RIVERSIDE PLAZA STE 1700 CHICAGO, IL 60606 26-0807437	LowIncomeHous	IL	N A	C Corp	11	101,305	1 000 %	Yes	
Community Development Advocates (7) Midwest 10 S RIVERSIDE PLAZA STE 1700 CHICAGO, IL 60606 26-0807338	LowIncomeHous	IL	N A	C Corp	0	100,000	1 000 %	Yes	
(8) Community Development Advocates West Inc 10 S RIVERSIDE PLAZA STE 1700 CHICAGO, IL 60606 26-0807380	LowIncomeHous	IL	NA	C Corp	0	100,000	1 000 %	Yes	
Community Development Advocates (9) Central 10 S RIVERSIDE PLAZA STE 1700 CHICAGO, IL 60606 26-1793642	LowIncomeHous	IL	NA	C Corp	0	100,000	1 000 %	Yes	
(10) Community Development Advocates TCG Inc 10 S RIVERSIDE PLAZA STE 1700 CHICAGO, IL 60606 27-2082864	LowIncomeHous	IL	NA	C Corp	0	100,042	1 000 %	Yes	
(11) Community Development Advocates Dale Inc 10 S RIVERSIDE PLAZA STE 1700 CHICAGO, IL 60606 45-2281616	LowIncomeHous	MN	NA	C Corp	49,719	100,000	1 000 %	Yes	
(12) Community Development Advocates - CHI In 10 S RIVERSIDE PLAZA STE 1700 CHICAGO, IL 60606 27-2442712	LowIncomeHous	IL	NA	C Corp	0	1,000	1 000 %	Yes	
(13) Community Development Advocates - SNAP 10 S RIVERSIDE PLAZA STE 1700 CHICAGO, IL 60606 30-0795331	LowIncomeHous	GA	NA	C Corp	0	100,000	1 000 %	Yes	
(14) Community Development Advocates DC Inc 10 S RIVERSIDE PLAZA STE 1700 CHICAGO, IL 60606 61-1732817	LowI ncomeHous	IL	NA	C Corp	0	100,000	1 000 %	Yes	

Form 990, Schedule R. Part IV - Identification of Related Organizations Taxable as a Corporation or Trust (a) (g) Direct controlling Type of entity Share of total Share of end-of-Section Name, address, and EIN of Primary activity Legal Percentage related organization 512(b)(13) domicile entity (C corp, S ownership income vear (state or foreign assets controlled corp, entity? country) or trust) Yes No I owIncome Hous 317 100.000 1 000 % Yes Community Development Advocates IC Corp (16) Melrose 10 S RIVERSIDE PLAZA STE 1700 CHICAGO, IL 60606 36-4793220