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SCANNED OCI & 2 2010

Form 990

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

OMB No 1545-0047
2009
Open to Public Inspection

	Als .	0000	In desired and and and and and and and and and an			
<u>A F</u>	or the	2009 ca	lendar year, or tax year beginning and ending			
Bo	heck of pplicable	use IRS	C Name of organization	D Employer identi	fication number	
	Addres	s label or print or	NEW VENTURE FUND			
X	Name change	type	Doing Business As	20-	5806345	
	Initial	See	Number and street (or P.O. box if mail is not delivered to street address) Room/su			
\ <u></u>	_iretum]Termin	Canada	1			
누	ated Ameno	Instruc-			<u>-595-1020</u>	
<u></u>	∟retum		City or town, state or country, and ZIP + 4	G Gross receipts \$	26,814,026.	
$ldsymbol{le}}}}}}}$	Application		WASHINGTON, DC 20005	H(a) Is this a group		
	pendin	⁹ F Nan	ne and address of principal officer: ERIC KESSLER	for affiliates?	Yes X No	
		SAM	E AS C ABOVE	H(b) Are all affiliates i	ncluded? Yes No	
1 7	ax-exe	mpt statu	us. X 501(c) (3		a list (see instructions)	
			W.NEWVENTUREFUND.ORG	H(c) Group exempt	•	
					M State of legal domicile: DC	
		Summ		cal of formation. 2000	M State of legal domicile. DC	
Fe	rt I			DO TIDIOTIA OTTE		
ø			scribe the organization's mission or most significant activities: TO SUPPO	RT INNOVATIV	E AND	
ä		<u>EFFEC</u>	TIVE PUBLIC INTEREST PROJECTS.			
Activities & Governance	2	Check this	s box 🕨 📖 if the organization discontinued its operations or disposed of m	ore than 25% of its net	assets	
Š	3	Number o	f voting members of the governing body (Part VI, line 1a)		5	
Ġ	4	Number o	f independent voting members of the governing body (Part VI, line 1b)	4	4	
တ			iber of employees (Part V, line 2a)	5		
章			ber of volunteers (estimate if necessary)	6		
≨				7.		
Ą		_	s unrelated business revenue from Part VIII, column (C), line 12	· · · · · · · ·		
	ь	Net unrela	ated business taxable income from Form 990-T, line 34	. 71		
				Prior Year	Current Year	
ø	8 (Contributi	ons and grants (Part VIII, line 1h)	5,998,667		
Ĭ	9 1	⊃rogram s	service revenue (Part VIII, line 2g)		2,908,485.	
Revenue	10	nvestmer	nt <u>income (Part VIII,</u> column (A), lines 3, 4, and 7d)	13,115	15,282.	
Œ			erue (Par (Par (C)) (Par (N)) (
			nue - add-lines 8-through-11- (must equal Part VIII, column (A), line 12)	6,011,782	. 26,812,567.	
			dismilar amounts paid (Part IX, comm (A), lines 1-3)	2,172,460		
	13 1	31 a1 113 a1 1	paid to or for members (ParVIX, column (A), line 4)	2,172,400	3,200,141.	
			ו ועטו		<u> </u>	
es			other compensation, employee benefits (Part IX, column (A), lines 5-10)		170 010	
Expenses			nal fundral (A), line 11e)		172,018.	
Ř	b	Total fund	Iraising expenses (Part IX, column (b), line 25) ► 172,018.	· · · · · · · · · · · · · · · · · · ·		
ш	17	Other exp	enses (Part IX, column (A), lines 11a-11d, 11f-24f)	<u>1,810,957</u>		
	18	Total expe	enses Add lines 13-17 (must equal Part IX, column (A), line 25)	3,983,417	. 13,847,145.	
		-	less expenses. Subtract line 18 from line 12	2,028,365	. 12,965,422.	
Net Assets or Fund Balances				Beginning of Current Year		
anc	20	Total acco	ets (Part X, line 16)	2,982,228		
Sas				100,885		
agt agt			Ities (Part X, line 26)	2,881,343		
쬱			s or fund balances. Subtract line 21 from line 20	2,001,343	. 16,229,856.	
Pa	rt II		ture Block			
			Ities of perjury, I declare that I have examined this return, including accompanying schedules and statemer te. Declaration of preparer (other than officer) is based on all information of which preparer has any knowled		edge and belief, it is true, correct,	
		·	1 12 1	. 01	-/	
Sign	,		and ken	9/2	7/10	
Her	- 1	Sign	nature of offices	Date		
		► ER	IC KESSLER, PRESIDENT			
			e or print name and title			
		 -	Date	Check if Prep	arer's identifying number	
Paid		Preparer's	$\mathcal{L}(\mathcal{L}(\mathcal{L}))$	self- fmployed ► [] (see	instructions)	
_	arer's	signature	THURST TIPUDO			
•	Only	Firm's name yours if	o HANSONALINEN LIJE	EIN ►		
self-employed. 2900 SOUTH QUINCY ST., SUITE 150						
		address, an ZIP + 4	ARLINGTON, VA 22206	Phone no. ► '	703-998-5100	
Mav	the IF	S discuss	s this return with the preparer shown above? (see instructions)		X Yes No	
			· · · · · · · · · · · · · · · · · · ·	 		

	10-990 (2009) NEW VENTURE FUND 20-5806345 Page 2
	rt III Statement of Program Service Accomplishments
1	Briefly describe the organization's mission: DEDICATED TO SUPPORTING INNOVATIVE AND EFFECTIVE PUBLIC INTEREST PROJECTS.
2	Did the organization undertake any significant program services during the year which were not listed on
-	the prior Form 990 or 990-EZ?
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes X No
_	If "Yes," describe these changes on Schedule O.
4	Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.
4a	(Code)(Expenses \$ 5,174,848. Including grants of \$ 492,575.)(Revenue \$ 2,908,485.) LIVING PROOF PROJECT (LPP): LPP ENHANCES THE GLOBAL HEALTH LANDSCAPE BY PROVIDING TIMELY, EFFICIENT AND COST-EFFECTIVE FUNDING TO GLOBAL HEALTH ADVOCACY PROJECTS FOCUSED ON DEVELOPING MEDIA CONTENT THAT DEMONSTRATES THE IMPACT OF GLOBAL HEALTH AID.
4b	(Code)(Expenses \$ 1,738,308. including grants of \$ 100,000.)(Revenue \$ 10148210.) WESTERN LANDS CONSERVATION PROJECT (WLCP): WLCP WORKS TO SUPPORT INITIATIVES THROUGH FUNDING THAT PROMOTE CONSERVATION EFFORTS IN WESTERN US STATES.
4c	(Code:) (Expenses \$ 1,246,042. including grants of \$ 423,092.) (Revenue \$ 0.) GLOBAL HEALTH ADVOCACY SMALL GRANTS INITIATIVE: THIS PROGRAM IS
	DESIGNED TO ENHANCE THE CURRENT GLOBAL HEALTH LANDSCAPE BY PROVIDING TIMELY, EFFECTIVE AND COST-EFFECTIVE FUNDING TO ORGANIZATIONS FOCUSED
	ON GLOBAL HEALTH ADVOCACY.
4d	Other program services. (Describe in Schedule O) (Expenses \$ 5,035,961. including grants of \$ 2,190,474.) (Revenue \$)
4e	Total program service expenses ▶\$ 13,195,159.

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?		ł	
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			1
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4	X	
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and			
	reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		_X_
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X, or provide			
	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments?			
	If "Yes," complete Schedule D, Part V	10		X
11	is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VIII, IX, or X	i		
	as applicable	11	X	
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,		-	
	Part VI.			
•	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.		1	
•	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total	-		
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.			
•	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX		İ	
•	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.			
•	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			:
	the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X			
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI, XII, and XIII.	12	X	
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? Yes No			
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional X			37
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		<u>X</u>
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		<u>X</u>
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b	X	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization		v	
40	or entity located outside the United States? If "Yes," complete Schedule F, Part II	15	X	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part III	4.0		v
47		16		<u>X</u>
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	,,	x	
10	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	17		
18	1- and 0-0 if Even I complete Calcadida C. Dout II	10		x
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	18		-22
13	complete Schedule G, Part III	19		Х
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		X
	and the dispersional operate only of more indeptition in the judgments derived to 11		990 (

Part IV Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the			
	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	X	<u> </u>
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX,			
	column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete		ĺ	
	Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No", go to line 25	24a	ļ	X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	ļ	ļ
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a			
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified			
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete			
	Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties, (see Schedule L, Part IV	Ì		
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	X	
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was			
	an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	Х	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		<u> </u>
31	Did the organization liquidate, terminate, or dissolve and cease operations?			7.5
	If "Yes," complete Schedule N, Part I	31		<u> </u>
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			7.5
	Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations		v	
	sections 301.7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33	X	
34	Was the organization related to any tax-exempt or taxable entity?			v
05	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		X
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?			7.5
06	If "Yes," complete Schedule R, Part V, line 2	35		<u> </u>
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	_		v
97	If "Yes," complete Schedule R, Part V, line 2	36		<u> </u>
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			v
20	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		<u> </u>
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O.	00	x	
	Note. All Form 330 filets are required to complete Scriedule O.	38 Form 9		3000,

			Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of			
	U.S. Information Returns. Enter -0- if not applicable <u>1a</u> <u>29</u>			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			ĺ
	(gambling) winnings to prize winners?	_1c_	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			1
	filed for the calendar year ending with or within the year covered by this return			1
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
b	If *Yes," enter the name of the foreign country: ►			l
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and			l
	Financial Accounts.			l
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b_		_X_
C	If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited			
	Tax Shelter Transaction?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
	any contributions that were not tax deductible?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).		1	
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services		ł	
	provided to the payor?	7a		X
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7c		<u>X</u>
	If "Yes," indicate the number of Forms 8282 filed during the year		i	
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal	_	ŀ	v
	benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7f		
у ь	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7g 7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the		1	
Ŭ	supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings	i		
	at any time during the year?	8		•
9	Sponsoring organizations maintaining donor advised funds.			
a	Did the organization make any taxable distributions under section 4966?	9a	-	
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12		·	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	Ì		
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders	٠	•	,
b	Gross income from other sources (Do not net amounts due or paid to other sources against	.	4	t
	amounts due or received from them)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
		Form	990 (2	2009)

20-5806345

NEW VENTURE FUND

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

Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body			
b	Enter the number of voting members that are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2_		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision	•		
	of officers, directors or trustees, or key employees to a management company or other person?	3_	X	
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4	X	ļ
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		Х
6	Does the organization have members or stockholders?	6		X
7a	- · · · · · · · · · · · · · · · · · · ·			
	governing body?	7a		X
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b_		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year		•	
	by the following:			
а	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b		X
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
	Does the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with those of the organization?	10b	v	
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11	X	
11A			v	
12a		12a	Х	
Ь		40.	v	
	to conflicts?	12b	X	
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	40.	х	
40	In Schedule O how this is done	12c	X	
13	Does the organization have a written whistleblower policy?	13	X	
14	Does the organization have a written document retention and destruction policy?	14	Δ	
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?			-,
_	The organization's CEO, Executive Director, or top management official	150		X
a	Other officers or key employees of the organization	15a 15b		X
U	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)	130	;	
162	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
···a	taxable entity during the year?	16a		x
h	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation	104		
	in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's	-		, - '
	exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure	100		<u> </u>
17	List the states with which a copy of this Form 990 is required to be filed ► NONE			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available	for		
	public inspection. Indicate how you make these available. Check all that apply.			
	Own website Another's website X Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, ai	nd fina	ncial	
.5	statements available to the public.	Id	. ,	
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organizar	tion. 🕨	•	
	ARABELLA PHILANTHROPIC INVESTMENT ADVISORS, LLC - 202-595-1020			
	734 15TH STREET, NW; SUITE 600, WASHINGTON, DC 20005			

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

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

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

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees. See instructions for definition of "key employee"
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

(A)	(B)		v current officer, directo					(D)	(E)	(F)
Name and Title	Average					Position		Reportable	Reportable	Estimated
	hours per	\vdash			ck all that apply)		ly)	compensation from	compensation from related	amount of other
	week	rector					-	the	organizations	compensation
		e or d	tee.			sated		organization	(W-2/1099-MISC)	from the
		truste	al trus		a k	ышс		(W-2/1099-MISC)		organization and related
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
		pul	lsul	통	Key	운동	ē			
ERIC KESSLER								_	_	_
PRESIDENT/DIRECTOR	1.00	X		X				0.	0.	0.
KATHERINE MILLER	4 00									•
SECRETARY/DIRECTOR	1.00	X	-	X		1	_	0.	0.	0.
ADAM EICHBERG	1 00	7.		٦,						^
TREASURER/DIRECTOR	1.00	X		X		-		0.	0.	0.
HARRY DRUCKER DIRECTOR	1.00	~						0.	0.	^
JOSEPH "PJ" SIMMONS	1.00	^	-	-				0.	0.	0.
DIRECTOR	1.00	v						o.	0.	0.
DIRECTOR	1.00	^	-	-		 		0.	0.	0.
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20-5806345

Ра	Section A. Officers, Directors, True	<u>ıstees, Key E</u>	mple	oyee	s, a	ind l	<u>High</u>	<u>iest</u>	Compensated Employe	es (continued)				
	(A)	(B)	(C)		(D)	(E)		1	(F)					
	Name and title	Average	Position		1		Reportable Reportab		,	E	stimate	ed		
		hours	(c	hecl	(all	that	app	ly)	compensation compensat			ar	nount	of
		per	ţ						from	from related			other	
		week	direc	İ			2	ŀ	the	organization			pensa	
			tee or	stee			nsate		organization	(W-2/1099-MI	SC)		rom th	
			trus	lal tr		oyee	gmo		(W-2/1099-MISC)			_	janızat d relat	
			individual trustee or director	Institutional trustee	je.	Key employee	nest c	ᇐ					anızatı	
		Institutional frustee or difference of the modification (M-5/1099-MISC) Institutional frustee or difference of the modification (M-5/1099-MISC) Institutional frustee or difference or									, O.g.	u,	00	
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								l						
	- Controller - Con		_			-								
											1			
	Total	I	L	L		.	_	l	0.		0.			0.
2	Total number of individuals (including but n	ot limited to th	nose	liste	 ad al	hove	a) wt			000 in reportab				<u> </u>
_	compensation from the organization	or invited to th	1000		.u u	0010	<i>-,</i> •••		cocived more than \$100,	осо и теропав				(
	Compensation from the organization								·	· · · · · · · · · · · · · · · · · · ·			Yes	No
3	Did the organization list any former officer,	director or tru	stee	key	v em	olar	vee	or h	nighest compensated em	nlovee on	ſ			
٠	line 1a? If "Yes," complete Schedule J for s			, 110						pioyee on		3		Х
4	For any individual listed on line 1a, is the su			· mn						 ne organization	Ì		-	
•	and related organizations greater than \$150									ic organization	1	4	1	х
5	Did any person listed on line 1a receive or a								- · ·	es rendered to	. †			
•	the organization? If "Yes," complete Sched					uiiy	U.	Olat	od organization for our re	oo rendered to		5	l	X
Sec	tion B. Independent Contractors	<u> </u>	00,0	<u> </u>			-		 	·				
1	Complete this table for your five highest co	mnensated inc	dene	ende	nt c	ontr	acto	ors t	hat received more than 9	100 000 of con	onens:	ation f	rom	
٠	the organization.	portoatou iit	-ope		0	J. 111	4010	U L	10001100 IIIOIO IIIAII (,001130	ACIO111	. 0.11	
—	(A)								(B)	Τ.		(0	<u>.,</u>	
	Name and business	address							Description of se	ervices	C		∕) nsatıoı	า
PB	TS							_h	EVENT					
									_ · · -					

the organization.	· · · · · · · · · · · · · · · · · · ·	·
(A) ⁻	(B)	(C)
Name and business address	Description of services	Compensation
PBJS	EVENT	
2226 3RD AVENUE , SEATTLE, WA 98121	PLANNING/EXECUTION	1,718,448.
ARABELLA PHILANTHROPIC INVESTMENT ADVISORS,	MANAGEMENT/OPERATION	
734 15TH STREET, NW; SUITE 600, WASHINGTON,	SVCS, CONSULTING	1,345,054.
HOME FRONT COMMUNICATION	CONSULTING/MEDIA	
1121 14TH ST. NW, WASHINGTON, DC 20005	PRODUCTION	1,251,920.
REDSTONE STRATEGY GROUP LLC	STRATEGIC	
1542 HIGH STREET, BOULDER, CO 80304	CONSULTING/PROJECT M	1,250,000.
IONAL MEDIA RESEARCH PLAN AND PLACEMENT	PUBLIC	
815 SLATERS LANE, ALEXANDRIA, VA 22314	RELATIONS/MEDIA ASSI	997,787.
2 Total number of independent contractors (including but not limited to those liste	d above) who received more than	,
\$100,000 in compensation from the organization > 20		•

		(2009) NEW VENTURE I	UND			20-5806	345 Page 9
Pa	rt VI	II Statement of Revenue	-				
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	b c d e f	Federated campaigns Membership dues Fundraising events Related organizations Government grants (contributions) All other contributions, gifts, grants, and similar amounts not included above Noncash contributions included in lines 1a-1f \$ Total. Add lines 1a-1f	23,888,800.	23 888 800.			
e e	2 a b	CONSULTING REVENUE	Business Code 900099	2908485.	2908485.		
Program Service Revenue	c d e						
Ŗ.		All other program service revenue Total. Add lines 2a-2f		2908485.			
	3	Investment income (including dividends, interother similar amounts)	▶	16,741.			16,741.
	4 5	Royalties	oroceeds (ii) Personal				
	С						
	7 a	Gross amount from sales of assets other than inventory Less: cost or other basis	(ii) Other		-		1
	d	and sales expenses Gain or (loss) Net gain or (loss)	1,459. -1,459.	-1,459.			-1,459.
Other Revenue		Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18 a Less: direct expenses b					
°		Net income or (loss) from fundraising events Gross income from gaming activities. See Part IV, line 19	>				
	С	Less: direct expenses b Net income or (loss) from gaming activities Gross sales of inventory, less returns					-
	b	and allowances a Less: cost of goods sold b					- <u>-</u> '
		Net income or (loss) from sales of inventory . Miscellaneous Revenue	Business Code		-		
	11 a b c						
		All other revenue Total. Add lines 11a-11d	▶				
93200 02-04	12 19 -10	Total revenue. See instructions.	>	26,812,567.	2908485.	0.	15,282. Form 990 (2009)

Form 990 (2009) NEW VENTURE FUND Part IX Statement of Functional Expenses

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

	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D). Fundraising expenses
1	Grants and other assistance to governments and		0/40/1000	goneral expended	одреноев
	organizations in the U.S. See Part IV, line 21	3,206,141.	3,206,141.		-
2	Grants and other assistance to individuals in	,			
	the U.S See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the U.S.				
	See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees				
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				·
7	Other salaries and wages				
8	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees):				
а	Management .	362,131.			
b	Legal .	82,896.	67,075.	15,821.	
	Accounting	5,204.		5,204.	· · · · · · · · · · · · · · · · · · ·
	Lobbying				
е	Professional fundraising services. See Part IV, line 17	172,018.			172,018.
f	Investment management fees				
g	Other	8,914,243.	8,459,779.	454,464.	
12	Advertising and promotion	TO COE	50.004		
13	Office expenses	72,685.	72,384.	301.	
14	Information technology	329,544.	329,544.		
15	Royalties	21 050	21 050	<u>_</u>	
16	Occupancy	21,050.	21,050.		
17	Travel	399,218.	399,218.		
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	4,530.	3,530.	1 000	
19	Conferences, conventions, and meetings	4,550.	3,330.	1,000.	
20	Interest				
21	Payments to affiliates	863.	863.		
22 23	Depreciation, depletion, and amortization Insurance	1,275.	1,275.		
	Other expenses. Itemize expenses not covered	1,413.			
24	above. (Expenses grouped together and labeled			,	•
	miscellàneous may not exceed 5% of total expenses shown on line 25 below.)	•	,		
2	DUES & SUBCRIPTIONS	183,805.	181,575.	2,230.	
a h	MISCELLANEOUS EXPENSES	91,542.	90,594.	948.	
n		7 + 1 2 = 4 •	JU/JJE•	7=0.	
c d					_
e					
	All other expenses				
25	Total functional expenses. Add lines 1 through 24f	13,847,145.	13,195,159.	479,968.	172,018.
<u>23 </u>	Joint costs. Check here Infollowing			_,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	<u> </u>
	SOP 98-2. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation				

Pa	rt X	Balance Sheet			
			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	2,195,787.	1	5,108,872.
	2	Savings and temporary cash investments	784,673.	2	$6,685,\overline{482}$.
	3	Pledges and grants receivable, net		3	4,587,500.
	4	Accounts receivable, net		4	
	5	Receivables from current and former officers, directors, trustees, key			
		employees, and highest compensated employees. Complete Part II			
		of Schedule L		5	
	6	Receivables from other disqualified persons (as defined under section			
		4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete			
		Part II of Schedule L		6	
इ	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use		8	
å	9	Prepaid expenses and deferred charges		9	389,163.
	10a	Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D 10a 3, 05	51.		
	b	Less: accumulated depreciation	1,768.	10c	2,497.
	11	Investments - publicly traded securities		11	
	12	Investments - other securities. See Part IV, line 11		12	
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)	2,982,228.	16	16,773,514.
•	17	Accounts payable and accrued expenses	100,885.	17	543,658.
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
ģ	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
Liabilities	22	Payables to current and former officers, directors, trustees, key employees,			1. %
abi		highest compensated employees, and disqualified persons. Complete Part I	1		
Ï		of Schedule L	_	22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities. Complete Part X of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	100,885.	26	543,658.
		Organizations that follow SFAS 117, check here X and complete	е .		
es		lines 27 through 29, and lines 33 and 34.		,	€
auc	27	Unrestricted net assets	2,028,295.	27	311,136.
Fund Balances	28	Temporarily restricted net assets	853,048.	28	15,918,720.
둳	29	Permanently restricted net assets		29	
Ξ		Organizations that do not follow SFAS 117, check here			1
ō		complete lines 30 through 34.	'	٠,	*
ets	30	Capital stock or trust principal, or current funds		30	
Net Assets	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
<u>[</u>	32	Retained earnings, endowment, accumulated income, or other funds		32	
Z	33	Total net assets or fund balances	2,881,343.	33	16,229,856.
	34	Total liabilities and net assets/fund balances	2,982,228.	34	16,773,514.

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.

Form **990** (2009)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

2009

Department of the Treasury Internal Revenue Service Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

Open to Public

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

Name of the organization Employer identification number NEW VENTURE FUND 20-5806345 Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions The organization is not a private foundation because it is: (For lines 1 through 11, check only one box) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, An organization operated for the benefit of a college or university owned or operated by a governmental unit described in 5 section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III) An organization organized and operated exclusively to test for public safety. See section 509(a)(4), 10 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h. ___ Type I b ____ Type II c Type III - Functionally integrated By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disgualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? q A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, Yes the governing body of the supported organization? 11g(i) (ii) A family member of a person described in (i) above? 11g(ii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? 11g(iii) Provide the following information about the supported organization(s). h (vi) Is the organization in col. (iii) Type of (iv) is the organization (v) Did you notify the (i) Name of supported (ii) EIN (vii) Amount of organization in col. (i) listed in your organization in col. organization (i) organized in the support (described on lines 1-9 governing document? (i) of your support? above or IRC section (see instructions)) Yes Yes No No Yes

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

Schedule A (Form 990 or 990-EZ) 2009

Schedule A (Form 990 or 990-EZ) 2009 NEW VENTURE FUND 20-5806345 Page 2 Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I) Section A. Public Support (c) 2007 Calendar year (or fiscal year beginning in) (a) 2005 (d) 2008 **(b)** 2006 (e) 2009 (f) Total 1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") 545,100. 1,658,161 5,998,667 23,888,800, 32,090,728. 2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 3 The value of services or facilities furnished by a governmental unit to the organization without charge 545,100. 4 Total. Add lines 1 through 3 1,658,161 5,998,667 23,888,800 32,090,728. 5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11. column (f) 24,038,146. 6 Public support. Subtract line 5 from line 4 8 052 582 Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2005 (b) 2006 (c) 2007 (e) 2009 (d) 2008 (f) Total 545,100. 7 Amounts from line 4 1,658,161 5,998,667 23,888,800 32,090,728. 8 Gross income from interest, dividends, payments received on

Sec	ction C. Computation of Publ		rcentage	•	• • • • • • • • • • • • • • • • • • • •		
	organization, check this box and stor	n here					. ▶ [X]
13	First five years. If the Form 990 is for	r the organization's	s first, second, thir	d, fourth, or fifth ta	x year as a section	n 501(c)(3)	
12	Gross receipts from related activities,	, etc. (see instruction	ons)			12 2	,908,485.
	Total support. Add lines 7 through 10					· ·	32,125,786
	assets (Explain in Part IV)						
	or loss from the sale of capital						
10	Other income. Do not include gain	:					
	business is regularly carried on						
	activities, whether or not the						
9	Net income from unrelated business						
	and income from similar sources			5,202.	13,115.	16,741.	35,058
	securities loans, rents, royalties						

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

Schedule A (Form 990 or 990-EZ) 2009

Section A Public Support	Organizations	Described in	Section Susta	(Complete only	y if you checked the b	ox on line 9 of Part I.
Section A. Public Support	T	1 (1) (2) (2)	1 1 2007	/ 8 0000	1 1 10000	
Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and						
membership fees received (Do not						
include any "unusual grants ") .				<u> </u>		
2 Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that						
are not an unrelated trade or bus-						
iness under section 513						
4 Tax revenues levied for the organ- ization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities						
furnished by a governmental unit to						
the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and			1			
3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6)					'	. ,
Section B. Total Support		<u> </u>			- t-	
Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9 Amounts from line 6 10a Gross income from interest,						
dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income					1	
(less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support (Add lines 9, 10c, 11, and 12)						
14 First five years. If the Form 990 is fo	r the organization'	s first, second, thu	d, fourth, or fifth ta	ax year as a section	on 501(c)(3) organiz	ation,
check this box and stop here						▶□
Section C. Computation of Pub	lic Support Pe	ercentage				
15 Public support percentage for 2009	(line 8, column (f) c	divided by line 13,	column (f))		15	%
16 Public support percentage from 2008	8 Schedule A, Parl	t III, line 15			16	%
Section D. Computation of Inve						
17 Investment income percentage for 20					17	%
18 Investment income percentage from	=		, 20.2 (1/)	• • •	18	%
19a 33 1/3% support tests - 2009. If the			on line 14, and line	a 15 is more than	·	
more than 33 1/3%, check this box a	_					., 13 HOL
b 33 1/3% support tests - 2008. If the	e organization did i	not check a box or	n line 14 or line 19a	a, and line 16 is m	ore than 33 1/3%,	and
line 18 is not more than 33 1/3%, ch		•			_	. ▶∐
20 Private foundation. If the organization	on did not check a	box on line 14, 19	a, or 19b, check th	his box and see in	structions	▶□

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

2009

Open to Public Inspection

Department of the Treasury Internal Revenue Service For Organizations Exempt From income Tax onder section 30 hc/ and section 327

Complete if the organization is described below.

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

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

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

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

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

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

 Section 501(c)(4), (5), or (6) organizat 	tions: Complete Part III.			
Name of organization			E	mployer identification number
	TURE FUND			20-5806345
Part I-A Complete if the org	janization is exempt unde	er section 501(c)	or is a section 52	7 organization.
1 Provide a description of the organiz2 Political expenditures	ation's direct and indirect politica	l campaign activities	ın Part IV.	≻ \$
3 Volunteer hours				-
Part I-B Complete if the org	janization is exempt unde	er section 501(c)	(3).	
1 Enter the amount of any excise tax	incurred by the organization unde	er section 4955		> \$
2 Enter the amount of any excise tax	incurred by organization manage	rs under section 4955	5)	≻ \$
3 If the organization incurred a section 4a Was a correction made?	n 4955 tax, did it file Form 4720 f	or this year?		Yes No
b If "Yes," describe in Part IV.			• ••	
Part I-C Complete if the org	janization is exempt unde	er section 501(c)	, except section 5	01(c)(3).
1 Enter the amount directly expended	by the filing organization for sec	tion 527 exempt func	tion activities	\$
2 Enter the amount of the filing organi	zation's funds contributed to oth	er organizations for s	ection 527	
exempt function activities				> \$
3 Total exempt function expenditures	. Add lines 1 and 2 Enter here an	d on Form 1120-POL	• 1	
line 17b			.)	> \$
4 Did the filing organization file Form	1120-POL for this year?			└── Yes └── No
5 Enter the names, addresses and en	• •	•	_	• •
For each organization listed, enter the		•	•	
that were promptly and directly deli- (PAC). If additional space is needed		nization, such as a se	parate segregated tund	or a political action committee
· · · · · · · · · · · · · · · · · · ·		T	T	
(a) Name	(b) Address	(c) EIN	(d) Amount paid fro filing organization's	contributions received and
			funds. If none, enter	-O promptly and directly delivered to a separate
				political organization.
				If none, enter -0-
			-	

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

Schedule C (Form 990 or 990-EZ) 2009

Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)). A Check	m 990 or 990 EZ) 2009 NEW VENT				806345 Page 2			
A Check if the filing organization belongs to an affiliated group. B Check if the filing organization checked box A and "limited control" provisions apply Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.) 1a Total lobbying expenditures to influence public opinion (grass roots lobbying) b Total lobbying expenditures to influence a legislative body (direct lobbying) c Total lobbying expenditures (add lines 1a and 1b) d Other exempt purpose expenditures e Total exempt purpose expenditures (add lines 1c and 1d) f Lobbying nontaxable amount. Enter the amount from the following table in both columns. If the amount on line 1e, column (a) or (b) is: The lobbying nontaxable amount is: Not over \$500,000		empt under sectio	n 501(c)(3) and file	ed Form 5768				
Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.) 1a Total lobbying expenditures to influence public opinion (grass roots lobbying) b Total lobbying expenditures to influence a legislative body (direct lobbying) c Total lobbying expenditures (add lines 1a and 1b) d Other exempt purpose expenditures e Total exempt purpose expenditures (add lines 1c and 1d) f Lobbying nontaxable amount. Enter the amount from the following table in both columns. If the amount on line 1e, column (a) or (b) is: Not over \$500,000 (a) Filing organization's totals (b) Affiliated grounds and year. (b) Affiliated grounds and year. (b) Affiliated grounds and year. (a) Filing organization's totals (b) Affiliated grounds and year. (c) A 0.7. 104, 407. 104, 407. 105, 739. 104, 146. 105, 739. 105, 739. 106, 739. 107, 146. 108, 739. 109, 109, 146. 109, 146. 109,	election under section 501(h)).	·		··-··				
Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.) 1a Total lobbying expenditures to influence public opinion (grass roots lobbying) b Total lobbying expenditures to influence a legislative body (direct lobbying) c Total lobbying expenditures (add lines 1a and 1b) d Other exempt purpose expenditures e Total exempt purpose expenditures (add lines 1c and 1d) f Lobbying nontaxable amount. Enter the amount from the following table in both columns. If the amount on line 1e, column (a) or (b) is: Not over \$500,000 C (a) Filing organization's totals 40,407. 40,407. 134,146. 135,709. 136,751.		= :						
Total lobbying expenditures to influence public opinion (grass roots lobbying) 1 a Total lobbying expenditures to influence public opinion (grass roots lobbying) b Total lobbying expenditures to influence a legislative body (direct lobbying) c Total lobbying expenditures (add lines 1a and 1b) d Other exempt purpose expenditures e Total exempt purpose expenditures (add lines 1c and 1d) f Lobbying nontaxable amount. Enter the amount from the following table in both columns. If the amount on line 1e, column (a) or (b) is: Not over \$500,000 Total lobbying expenditures (add lines 1a and 1b) 104,146. 13570981. 13675127. 833,756.	If the filing organization checked box	and "limited control" pro	ovisions apply					
b Total lobbying expenditures to influence a legislative body (direct lobbying) c Total lobbying expenditures (add lines 1a and 1b) d Other exempt purpose expenditures e Total exempt purpose expenditures (add lines 1c and 1d) f Lobbying nontaxable amount. Enter the amount from the following table in both columns. If the amount on line 1e, column (a) or (b) is: Not over \$500,000 The lobbying nontaxable amount is: 20% of the amount on line 1e.)	organization's	(b) Affiliated group totals			
c Total lobbying expenditures (add lines 1a and 1b) d Other exempt purpose expenditures e Total exempt purpose expenditures (add lines 1c and 1d) f Lobbying nontaxable amount. Enter the amount from the following table in both columns. If the amount on line 1e, column (a) or (b) is: Not over \$500,000 The lobbying nontaxable amount is: 20% of the amount on line 1e.	ring expenditures to influence public opini	n (grass roots lobbying)		40,407.				
d Other exempt purpose expenditures e Total exempt purpose expenditures (add lines 1c and 1d) f Lobbying nontaxable amount. Enter the amount from the following table in both columns. If the amount on line 1e, column (a) or (b) is: Not over \$500,000 The lobbying nontaxable amount is: 20% of the amount on line 1e.	ing expenditures to influence a legislative	ody (direct lobbying)		63,739.				
e Total exempt purpose expenditures (add lines 1c and 1d) f Lobbying nontaxable amount. Enter the amount from the following table in both columns. If the amount on line 1e, column (a) or (b) is: Not over \$500,000 The lobbying nontaxable amount is: 20% of the amount on line 1e.	ring expenditures (add lines 1a and 1b)							
f Lobbying nontaxable amount. Enter the amount from the following table in both columns. If the amount on line 1e, column (a) or (b) is: Not over \$500,000 The lobbying nontaxable amount is: 20% of the amount on line 1e.	npt purpose expenditures							
If the amount on line 1e, column (a) or (b) is: Not over \$500,000 The lobbying nontaxable amount is: 20% of the amount on line 1e.	pt purpose expenditures (add lines 1c an	1d)		13675127.				
Not over \$500,000 20% of the amount on line 1e.	iontaxable amount. Enter the amount from	the following table in bot	h columns.	833,756.				
	it on line 1e, column (a) or (b) is: The	obbying nontaxable am	ount is:					
Over \$500,000 but not over \$1,000,000 \$100,000 plus 15% of the excess over \$500,000.	500,000 20%	of the amount on line 1e.						
	,000 but not over \$1,000,000 \$10	000 plus 15% of the exc	ess over \$500,000.					
Over \$1,000,000 but not over \$1,500,000 \$175,000 plus 10% of the excess over \$1,000,000.	0,000 but not over \$1,500,000 \$17	000 plus 10% of the exc	ess over \$1,000,000					
Over \$1,500,000 but not over \$17,000,000 \$225,000 plus 5% of the excess over \$1,500,000.			ss over \$1,500,000.					
Over \$17,000,000 \$1,000,000.	00,000 \$1,0	0,000.						
					· · · · · · · · · · · · · · · · · · ·			
g Grassroots nontaxable amount (enter 25% of line 1f)					·			
h Subtract line 1g from line 1a If zero or less, enter -0-	,							
	·		L	0.				
j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720		or line 1i, did the organiza	ation file Form 4720					
					Yes No			
4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.)	(Some organizations that made	section 501(h) election	n do not have to comp					
Lobbying Expenditures During 4-Year Averaging Period	Lobbying E	enditures During 4-Yea	ar Averaging Period					
Calendar year (or fiscal year beginning in) (a) 2006 (b) 2007 (c) 2008 (d) 2009 (e) Total	* (a) 2000	(b) 2007	(c) 2008	(d) 2009	(e) Total			
2a Lobbying nontaxable amount 349,962. 833,756. 1,183,71			349,962.	833,756.	1,183,718.			
b Lobbying ceiling amount	- 1			•	1 775 577			
(150% of line 2a, column(e)) 1,775,57	ne 2a, column(e))				1,775,577.			
c Total lobbying expenditures 226,943. 104,146. 331,08	ring expenditures		226,943.	104,146.	331,089.			
d Grassroots nontaxable amount 87,491. 208,439. 295,93	nontaxable amount		87,491.	208,439.	295,930.			
e Grassroots ceiling amount		-	,	* 1	<u></u>			
		1	• •		443,895.			
	lobbying expenditures		5,436.	40,407.	45,843.			

Schedule C (Form 990 or 990-EZ) 2009

Schedule C (Form 990 or 990-EZ) 2009 NEW VENTURE FUND 20-580634

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

		a)	(b)	
	Yes	No	Amo	ount
During the year, did the filing organization attempt to influence foreign, national, state or				
local legislation, including any attempt to influence public opinion on a legislative matter				
or referendum, through the use of:				
a Volunteers?			j ,	
Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
: Media advertisements?		<u> </u>		
Mailings to members, legislators, or the public?				
Publications, or published or broadcast statements?		ļ	<u> </u>	
Grants to other organizations for lobbying purposes?		<u> </u>		_
Direct contact with legislators, their staffs, government officials, or a legislative body?				
Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
Other activities? If "Yes," describe in Part IV				
Total. Add lines 1c through 1i				
Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
If "Yes," enter the amount of any tax incurred under section 4912				
: If "Yes," enter the amount of any tax incurred by organization managers under section 4912			<u></u>	
If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	<u> </u>	<u> </u>	<u> </u>	
rt III-A Complete if the organization is exempt under section 501(c)(4), sect 501(c)(6).	ion 501(c))(5), or se	ection	
			Yes	N
NA THE RESIDENCE OF THE PROPERTY OF THE PROPER		1		
were substantially all (90% or more) dues received nondeductible by members?				
Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2		
Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year? Int III-B Complete if the organization is exempt under section 501(c)(4), sect 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, lines 1		3)(5), or se		
Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year? rt III-B Complete if the organization is exempt under section 501(c)(4), sect 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part "Yes."		3)(5), or se		
Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year? III-B Complete if the organization is exempt under section 501(c)(4), sect 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Pa"Yes." Dues, assessments and similar amounts from members	art III-A, li	3)(5), or se ne 3 is a		
Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year? rt III-B Complete if the organization is exempt under section 501(c)(4), sect 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part "Yes."	art III-A, li	3)(5), or se ne 3 is a		
Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year? III-B Complete if the organization is exempt under section 501(c)(4), sect 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Pa"Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).	art III-A, li	3)(5), or se ne 3 is a		
Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year? III-B Complete if the organization is exempt under section 501(c)(4), sect 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Party es." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year	art III-A, li	3)(5), or seine 3 is a		
Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year? III-B Complete if the organization is exempt under section 501(c)(4), sect 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Party es." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year Carryover from last year	art III-A, li	3)(5), or se ine 3 is a 1 2a 2b		
Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year? III-B Complete if the organization is exempt under section 501(c)(4), sect 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Party es." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politication expenses for which the section 527(f) tax was paid). Current year Carryover from last year	art III-A, Ii	3)(5), or se ine 3 is a 1 2a 2b 2c		
Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year? It III-B Complete if the organization is exempt under section 501(c)(4), sect 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Party es." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	art III-A, Ii	3)(5), or se ine 3 is a 1 2a 2b		
Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year? III-B Complete if the organization is exempt under section 501(c)(4), sect 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Pa"Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the expenses for which the amount on line 2c exceeds the amount on line 3, what portion of the expenses for which the amount on line 2c exceeds the amount on line 3, what portion of the expenses for which the section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the expenses for which the section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the expenses for which the prior year?	art III-A, Ii	3)(5), or se ine 3 is a 1 2a 2b 2c		
Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year? III-B Complete if the organization is exempt under section 501(c)(4), sect 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Pa"Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the expense of nondeductible lobbying and does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and	art III-A, Ii	3)(5), or se ine 3 is a 1 2a 2b 2c 3		
Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year? III-B Complete if the organization is exempt under section 501(c)(4), sect 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Pa"Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the expenses for which the amount on line 2c exceeds the amount on line 3, what portion of the expenses for which the amount on line 2c exceeds the amount on line 3, what portion of the expenses for which the section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the expenses for which the section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the expenses for which the prior year.	art III-A, Ii	3)(5), or se ine 3 is a 1 2a 2b 2c		

Schedule D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements ▶ Complete if the organization answered "Yes," to Form 990,

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

2009
Open to Public Inspection

Name of the organization

Employer identification number

	NEW VENTURE FUND	·	20-5806345
Pai	rt I Organizations Maintaining Donor Advise	ed Funds or Other Similar Funds	s or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, lin	e 6	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
_			
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in		
	are the organization's property, subject to the organization's	- · · · · · · · · · · · · · · · · · · ·	. Yes No
6	Did the organization inform all grantees, donors, and donor a	- _ -	•
	for charitable purposes and not for the benefit of the donor of	or donor advisor, or for any other purpose	
	impermissible private benefit?		Yes No
Pai	t II Conservation Easements. Complete if the org	ganization answered "Yes" to Form 990, F	Part IV, line 7.
1	Purpose(s) of conservation easements held by the organizat	on (check all that apply)	
	Preservation of land for public use (e.g., recreation or p	pleasure) Preservation of an his	stoncally important land area
	Protection of natural habitat	Preservation of a cert	tified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a quali	fied conservation contribution in the form	of a conservation easement on the last
	day of the tax year		
	,,		Held at the End of the Tax Year
9	Total number of conservation easements		2a
h	Total acreage restricted by conservation easements		2b
			·· ··
C	Number of conservation easements on a certified historic str		2c
a	Number of conservation easements included in (c) acquired	••	2d
3	Number of conservation easements modified, transferred, re	leased, extinguished, or terminated by the	e organization during the tax
	year -		
4	Number of states where property subject to conservation ea		
5	Does the organization have a written policy regarding the per	<u> </u>	<u> </u>
	violations, and enforcement of the conservation easements i		L_J Yes L_J No
6	Staff and volunteer hours devoted to monitoring, inspecting,	-	
7	Amount of expenses incurred in monitoring, inspecting, and	enforcing conservation easements during	the year > \$
8	Does each conservation easement reported on line 2(d) above	e satisfy the requirements of section 170	(h)(4)(B)(i)
	and section 170(h)(4)(B)(ii)?	••	Yes No
9	In Part XIV, describe how the organization reports conservation	on easements in its revenue and expense	e statement, and balance sheet, and
	include, if applicable, the text of the footnote to the organization	tion's financial statements that describes	the organization's accounting for
	conservation easements.		
Par	t III Organizations Maintaining Collections o	f Art, Historical Treasures, or O	ther Similar Assets.
	Complete if the organization answered "Yes" to Form	990, Part IV, line 8.	
1a	If the organization elected, as permitted under SFAS 116, no	t to report in its revenue statement and ba	alance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, ed	ducation, or research in furtherance of pul	blic service, provide, in Part XIV, the text of
	the footnote to its financial statements that describes these	tems.	,
b	If the organization elected, as permitted under SFAS 116, to		ce sheet works of art, historical treasures
_	or other similar assets held for public exhibition, education, o	-	•
	these items:	recognition and control of public service	, provide the following amounts relating to
	(i) Revenues included in Form 990, Part VIII, line 1		▶ ¢
			\$
_	(ii) Assets included in Form 990, Part X		> -
2	If the organization received or held works of art, historical tre		ıı gaın, provide
	the following amounts required to be reported under SFAS 1	16 relating to these items:	
а	Revenues included in Form 990, Part VIII, line 1		> \$
b	Assets included in Form 990, Part X		> \$

		TURE FUND								Page 2
Par	t III Organizations Maintaining C	Collections of A	rt, Histor	ical Treas	ures, c	or Othe	er Simi	lar Asse	ts (contin	ued)
3	Using the organization's acquisition, accessi	on, and other record	ls, check an	y of the follo	wing tha	it are a s	ignificant	use of its	collection	ıtems
	(check all that apply):									
а	Public exhibition	d	Loa	n or exchang	ge progra	ams				
ь	Scholarly research	е	Oth	er						
С	Preservation for future generations									
4	Provide a description of the organization's co	ollections and explai	n how they	further the o	rganızatı	on's exe	mpt purp	ose in Par	t XIV	
5	During the year, did the organization solicit of	r receive donations	of art, histor	cal treasure	s, or oth	er sımılaı	r assets		_	
	to be sold to raise funds rather than to be m	aintained as part of t	he organiza	tion's collect	ion?	<u></u>		. [Yes	No_
Par	t IV Escrow and Custodial Arran	gements. Comple	ete if organi	zation answe	red "Ye	s" to Fon	m 990, P	art IV, line	9, or	
	reported an amount on Form 990, Pa	rt X, line 21								
1a	Is the organization an agent, trustee, custod	ian or other intermed	liary for con	tributions or	other as	sets not	ıncluded	ł		
	on Form 990, Part X?								Yes	☐ No
b	If "Yes," explain the arrangement in Part XIV	and complete the fo	llowing tabl	e:						
									Amount	
С	Beginning balance						. 1c			
	Additions during the year						. 1d			
	Distributions during the year						. 1e		•	
f	Ending balance				_		1f			
2a	Did the organization include an amount on F		21?						Yes	☐ No
	If "Yes," explain the arrangement in Part XIV		• •	•	•			••		
Par			swered "Ye	s" to Form 9	90, Part	IV, line 1	0.			
		(a) Current year	(b) Prior		Two year			years back	(e) Four y	ears back
1a	Beginning of year balance						1			
b	Contributions									
c	Net investment earnings, gains, and losses									
d	Grants or scholarships									
	Other expenditures for facilities				,					
·	and programs	:			-				ļ -	
f	Administrative expenses									
	End of year balance									,
2	Provide the estimated percentage of the year	r end balance held a	s:							
~	Board designated or quasi-endowment		%							
h	Permanent endowment	%								
c		<u></u> ,~								
	Are there endowment funds not in the posse	, -	ation that ai	e held and a	dministe	ered for t	he organ	ization		
-	by						.		5	es No
	(i) unrelated organizations								3a(i)	35 1.15
	(ii) related organizations		•			•	• •	• ••	3a(ii)	_
h	If "Yes" to 3a(ii), are the related organization:	 s listed as required o	n Schedule	 R?		- •	•	••	3b	
4	Describe in Part XIV the intended uses of the							• •••		
Par					t X line	10				
- 41	Description of investment	(a) Cost or o		(b) Cost or o	 _		ccumulat	he	(d) Book	value
	Description of investment	basis (investr		basis (othe			preciation		(u) BOOK	value
	Lond	545.5 (1146511			·· <i>,</i>			-		
	Land	•				<u></u>	·····			
	Buildings	-								
-	Leasehold improvements			3	051.			54.	2	,497.
a	Equipment			٠, ر	001.			, , , ,		1=71.

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

2,497. Schedule D (Form 990) 2009

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

Sche	dule D (Form 990) 2009 NEW VENTURE FUND					5806345	Page 4
Pa	t XI Reconciliation of Change in Net Assets from Form 990 to	Audit	ed Finan	cial Sta	temer	its	
1	Total revenue (Form 990, Part VIII, column (A), line 12)		•	1		26,812	,567.
2	Total expenses (Form 990, Part IX, column (A), line 25)			2		13,847	
3	Excess or (deficit) for the year. Subtract line 2 from line 1			3		12,965	422.
4	Net unrealized gains (losses) on investments			4		· · · · · · · · · · · · · · · · · · ·	
5	Donated services and use of facilities			5			
6	Investment expenses			6			
7	Prior period adjustments			7		383	<u>,091.</u>
8	Other (Describe in Part XIV.)			8			
9	Total adjustments (net). Add lines 4 through 8			9			<u>,091.</u>
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and	d 9		10		13,348	<u>,513.</u>
Pai	t XII Reconciliation of Revenue per Audited Financial Stateme	nts W	th Reve	nue per	Retur		
1	Total revenue, gains, and other support per audited financial statements				1	26,814	<u>,026.</u>
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	1 1					
а	Net unrealized gains on investments	2a					
b	Donated services and use of facilities	2b					
С	Recovenes of pnor year grants	2c				1	
d	Other (Describe in Part XIV)	2d					_
е	Add lines 2a through 2d				2e		0.
3	Subtract line 2e from line 1				3	26,814	<u>,026.</u>
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:						
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			⊣ -		
b	Other (Describe in Part XIV)	4b		1,459	-		
С	Add lines 4a and 4b				4c	-1	<u>.459.</u>
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)		Cale Proces		5	26,812	,567.
Pai	t XIII Reconciliation of Expenses per Audited Financial Stateme	ents w	ith Expe	nses pe			<u> </u>
1	Total expenses and losses per audited financial statements				1	13,848	,604.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	11					
а	Donated services and use of facilities	2a			-		
b	Prior year adjustments	2b					
C	Other losses	2c		1 450	-		
d	Other (Describe in Part XIV.)	2d		1,459		1	4 E O
e	Add lines 2a through 2d		•	• ••	2e	13,847	145
3	Subtract line 2e from line 1	-			3_	13,041	145.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	1 4-1			,		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			\dashv		
	Other (Describe in Part XIV.)	4b		-	\dashv		0
	Add lines 4a and 4b		•		4c 5	13,847	1/5
5 Par	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) t XIV Supplemental Information		•	•	1, 3	15,047	147.
		L lines 1	a and 4: Da	rt IV Imos	1b and	2h: Part V. lina	4 Dort
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III						4, Part
X, III	e 2; Part XI, line 8, Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also comp	nete tris	part to pro	ovide any a	aailiona	u information.	
			·····				
DAI	RT XII, LINE 4B - OTHER ADJUSTMENTS:						
LM	AT ATT, DINE 4D OTHER ADOUDTMENTS:		······				
LOS	SS ON DISPOSAL OF FIXED ASSETS: -1459.						
<u> </u>	on biblioding of times hability. 1139.						
	·						
		-					
זגק	RT XIII, LINE 2D - OTHER ADJUSTMENTS:						
- 431							
LOS	SS ON DISPOSAL OF FIXED ASSETS: 1459.						
<u></u>					-	<u>-</u>	

Schedule F (Form 990)

Statement of Activities Outside the United States

➤ Complete if the organization answered "Yes" to Form 990,
Part IV, line 14b, 15, or 16.

➤ Attach to Form 990. ➤ See separate instructions.

OMB No 1545-0047
2000
2009
Open to Public
Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

Inspection

Employer identification number

NEW VENTURE FUN	TD				20-580634	.5
Part I General Info	rmation on A	ctivities Out	tside the United States. Comp	lete if the organ		
to Form 990, Par						
			ds to substantiate the amount of the g selection criteria used to award the gr			Yes No
-			procedures for monitoring the use of	grant funds out	side the United Sta	tes.
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e., fundraising, program services, grants to recipients located in the region)	ıs a prod describe	vity listed in (d) gram service, e specific type ce(s) in region	(f) Total expenditures for region
CENTRAL AMERICA AND						
HE CARIBBEAN	0	1	PROGRAM SERVICES	CONSULTING	AND EDUCATION	143,402.
MIDDLE EAST AND						
ORTH AFRICA	0	1	PROGRAM SERVICES	CONSULTING	& EDUCATION	114,458.
SUB-SAHARA AFRICA	0	1	PROGRAM SERVICES	CONSULTING	& EDUCATION	639,835.
SOUTH ASIA	0	11	PROGRAM SERVICES	CONSULTING	& EDUCATION	135,097,
		!				
					•	
					<u>.</u>	
Γotals ▶	0	4				1,032,792,

NEW VENTURE FUND

Schedule F (Form 990) 2009

Part II

Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Check this box if no one recipient received more than \$5,000

Page 2

20-5806345

(i) Method of valuation (book, FMV, appraisal, other) (h) Description of non-cash assistance (g) Amount of non-cash assistance 0 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by cash disbursement WIRE TRANSFER WIRE TRANSFER (f) Manner of of cash grant 000 86,092 (e) Amount 34 4 DIALOGUE EVENTS IN AN the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter PROVIDE FUNDING FOR PROVIDE FUNDING FOR MINISTERIAL SPECIAL THIS PROJECT WILL THIS PROJECT WILL (d) Purpose of SERIES OF PUBLIC SESSION AT 16TH grant UROPE (INCLUDING UROPE (INCLUDING Use Schedule F-1 (Form 990) if additional space is needed (c) Region CELAND AND CELAND AND REENLAND) REENLAND) and EIN (if applicable) (b) IRS code section <u>-</u> (a) Name of organization 7. 30. 43. 43. 53. 53.

Enter total number of other organizations or entities

SEE PART IV FOR COLUMN (D) DESCRIPTIONS

Schedule F (Form 990) 2009

6345

Page 3

20-5806345

Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16.

Use Schedule F-1 (Form 990) if additional space is needed

NEW VENTURE FUND

Schedule F (Form 990) 2009

Part III

Schedule F (Form 990) 2009 (h) Method of valuation (book, FMV, appraisal, other) (g) Description of non-cash assistance (f) Amount of non-cash assistance (e) Manner of cash disbursement (c) Number of cal Amount of recipients cash grant (b) Region (a) Type of grant or assistance

Schedule F (Form 990) 2009 NEW VENTURE FUND 20-5806345 Page 4 Part IV Supplemental Information
Complete this part to provide the information required in Part I, line 2, and any additional information
SCHEDULE F, PART I, LINE 2: FOR THE FOREIGN GRANTS DISBURSED, THE
ORGANIZATION REQUIRES THAT ORGANIZATIONS RECEIVING FUNDS SUBMIT A
PROPOSAL AND PROVIDE POST-GRANT REPORTS.
PART II, COLUMN (D):
REGION: EUROPE (INCLUDING ICELAND AND GREENLAND)
(D) PURPOSE OF GRANT: THIS PROJECT WILL PROVIDE FUNDING FOR A SERIES OF
PUBLIC DIALOGUE EVENTS IN AN EFFORT TO INCREASE THE RELATIVE SHARE FOR
FAMILY PLANNING IN DUTCH ODA.
REGION: EUROPE (INCLUDING ICELAND AND GREENLAND)
(D) PURPOSE OF GRANT: THIS PROJECT WILL PROVIDE FUNDING FOR MINISTERIAL
SPECIAL SESSION AT 16TH ANNUAL ROLL BACK MALARIA PARTNERSHIP BOARD
MEETING

932074 02-01-10

Schedule F (Form 990) 2009

SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury

Name of the organization

Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

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

OMB No 1545-0047

2009

Open To Public Inspection

Employer identification number

Schedule G (Form 990 or 990-EZ) 2009

NEW VEN	TURE FUND				20-5806	345
Part I Fundraising Activities required to complete this part	Complete if the organization answert.	ered "\	es" te	o Form 990, Part IV,	line 17 Form 990-E2	filers are not
Indicate whether the organization rais	e X Solicitat f Solicitat g Special or oral agreement with any individual cart VII) or entity in connection with p ividuals or entities (fundraisers) purs	tion of tion of fundra (includerofess	non-g gover using ding o ional f	overnment grants nment grants events fficers, directors, tru fundraising services?	stees or	
(i) Name of individual or entity (fundraiser)	(ii) Activity	(iii) fundr have co or con contribi	ustody trol of	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
ARABELLS PHILANTHROPIC INVESTM	FUNDRAISING MANAGEMENT SUPPORT	Yes X	No	0.	172,018.	-172,018.
Total	on is registered or licensed to solicit t	funds o	or has	been notified it is ex	172,018.	-172,018.

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

			(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col (a) through col. (c))
<u>o</u>			(event type)	(event type)	(total number)	- coi. (c))
Revenue						
Be	1	Gross receipts				
	2	Less: Charitable contributions				
	3	Gross income (line 1 minus line 2)			<u>-</u>	
	4	Cash prizes				
ses	5	Noncash prizes				
Direct Expenses	6	Rent/facility costs				
Direct	7	Food and beverages				
	8	Entertainment				
	9	Other direct expenses Direct expense summary Add lines 4 through	Q in column (d)			1
	10 11	Net income summary Combine line 3, column	n (d), and line 10	·· · · ·		
Pa	ırt	Gaming. Complete if the organization	answered "Yes" to For	m 990, Part IV, line 19, or r	eported more than	-
		\$15,000 on Form 990-EZ, line 6a	1	(b) Pull tabs/instant		(d) Total gaming (add
Revenue			(a) Bingo	bingo/progressive bingo	(c) Other gaming	col (a) through col (c))
Re/	1	Gross revenue				
	İ	Circus in the circumstance				
ses	2	Cash prizes				
Direct Expenses	3	Noncash prizes				
Direct	4	Rent/facility costs				
	5	Other direct expenses				
	6	Volunteer labor	Yes % No	% Yes % No	☐ Yes % ☐ No	
	7	Direct expense summary. Add lines 2 through	n 5 ın column (d)			()
	l			,	•	
	8	Net gaming income summary. Combine line 1	I, column (d), and line /			124 134
	8	Net gaming income summary. Combine line 1	I, column (d), and line /			Yes No
	En	iter the state(s) in which the organization opera	tes gaming activities:			
а	En		tes gaming activities:	e states?		yes No
а	En	nter the state(s) in which the organization opera the organization licensed to operate gaming ac	tes gaming activities:	states?		
b	En is i	nter the state(s) in which the organization opera the organization licensed to operate gaming ac	tes gaming activities: ctivities in each of these			
10a	En Is 1	nter the state(s) in which the organization opera the organization licensed to operate gaming ac "No," explain:	tes gaming activities: ctivities in each of these		/ear?	9a
10a	En Is 1	nter the state(s) in which the organization opera the organization licensed to operate gaming ac "No," explain: ere any of the organization's gaming licenses re	tes gaming activities: ctivities in each of these		/ear?	9a
10a b	En Isi	nter the state(s) in which the organization opera the organization licensed to operate gaming ac "No," explain: ere any of the organization's gaming licenses re	tes gaming activities: etivities in each of these evoked, suspended or the evoked, suspended or the evoked.	terminated during the tax y		9a

Schedule G (Form 990 or 990-EZ) 2009 NEW VENTURE FUND 2	<u> 20-580</u>	63 4	5 P	age 3
			Yes	No
13 Indicate the percentage of gaming activity operated in				
a The organization's facility	%			
b An outside facility	%			
14 Enter the name and address of the person who prepares the organization's gaming/special events books and records) :			
Name ▶		' 		-
Address >				
15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?		15a		
b If "Yes," enter the amount of gaming revenue received by the organization ▶\$ and the amount	nt			
of gaming revenue retained by the third party > \$				
c if "Yes," enter name and address of the third party:				
Name ▶				
Address >				
16 Gaming manager information:				
Name ►				
Gaming manager compensation ▶ \$				
Description of services provided ▶			`	
Director/officer Employee Independent contractor			·	
17 Mandatory distributions.			'	
a is the organization required under state law to make charitable distributions from the gaming proceeds to				
retain the state gaming license?	_	17a		
b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in	the			

Schedule G (Form 990 or 990-EZ) 2009

SCHEDULE I (Form 990)

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

2009 .

OMB No 1545-0047

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

Department of the Treasury Internal Revenue Service	Сотр	Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. ▼ Attach to Form 990.	n answered "Yes" on Fo ► Attach to Form 990.	on Form 990, Par n 990.	t IV, line 21 or 22.		Open to Public. Inspection	oublic.
Name of the organization NRW VRNITIRE FITND	RE FIIND						Employer identification number 2.0 – 5.8.0 6.3.4.5	number 6345
Part I General Information on Grants and Assistance	nd Assistance							
1 Does the organization maintain records to substantiate the amount of the	to substantiate the	amount of the grants	or assistance, the	grantees' eligibility	for the grants or ass	ne grants or assistance, the grantees' eligibility for the grants or assistance, and the selection		
criteria used to award the grants or assistance? One of the properties of a monitoring the use	stance?		of grant funds in the United States	States			X Yes	2
<u>F</u>	Governments and	Organizations in the	United States C	omplete if the oros	nization answered "Y	es" to Form 990. Part	IV line 21 for any	
٦ .	\$5,000. Check this	box if no one recipien	it received more th	an \$5,000. Use Pa	rt IV and Schedule I-1	(Form 990) if addition	al space is needed	
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	ant
							TO FUND THE	
EDUCAT							prganization's coca-cola	A-COLA
CTIC							DISTRIBUTION PROJECT	CT: A
AVENUE, NW - WASHINGTON, DC 20009	13-6110212	501(C)(3)	73,000.	0			LEARNING LABORATORY	Х,
							TO FUND THE	
AMERICANS UNITED FOR CHANGE							ORGANIZATION'S FINANCIAL	ANCIAL
1015 18TH ST., NW, SUITE 204							REGULATORY REFORM SURVEY	SURVEY
WASHINGTON, DC 20036	03-0556312	501(C)(4)	16,500.	0			RESEARCH PROJECT.	
							TO FUND THE	
BIODIVERSITY CONSERVATION ALLIANCE							ORGANIZATION'S RED DESERT	DESERT
PO BOX 1512							ORGANIZING CAMPAIGN	Z.
LARAMIE, WY 82073	83-0308354	501(C)(3)	25,000.	0			PROJECT.	
CENTER OF SOUTHWEST CULTURE 500 COPPER AVENUE NW SUITE 103								
ALBUQUERQUE, NM 87102	85-0402832	501(C)(3)	34,000,	0			GENERAL SUPPORT GRANT	ANT
							TO FUND THE	
COUNCIL FOR CHRISTIAN COLLEGES &							DRGANIZATION'S CAMPUS	IPUS
UNIVERSITY - 321 8TH ST NE -							CREATION CARE INITIATIVES	IATIVES
WASHINGTON, DC 20002	52-1247182	501(C)(3)	30,000.	0.			PROJECT.	
							TO FUND THE	
DRAKE UNIVERSITY							DRGANIZATION'S USDA	Y.
2507 UNIVERSITY AVE							RESEARCH AND OUTREACH	ACH
DES MOINES, IA 50311	42-0680460	501(c)(3)	65,500.	0			PROJECT.	
2 Enter total number of section 501(c)(3) and government organizations	ind government or	ganizations					A	23.
3 Enter total number of other organizations	S			•			^	4.

932101 02-02-10

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

SEE PART IV FOR COLUMN (H) DESCRIPTIONS

Schedule I (Form 990) 2009

Page 2 (f) Description of non-cash assistance 20-5806345 (e) Method of valuation (book, FMV, appraisal, other) Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Use Part IV and Schedule I-1 (Form 990) if additional space is needed. · Part IV | Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information THE ORGANIZATION REQUIRES THAT ORGANIZATIONS RECEIVING FUNDS SUBMIT A PROPOSAL AND PROVIDE (H) PURPOSE OF GRANT OR ASSISTANCE: TO FUND THE ORGANIZATION'S UPPER COALITION'S RESPONSIBLE ENERGY DEVELOPMENT PLAN (d) Amount of non-cash assistance LINE 2: FOR MOST GRANTS CONTRIBUTED, (c) Amount of cash grant (b) Number of recipients NEW VENTURE FUND PART II, LINE 1, COLUMN (H): (a) Type of grant or assistance H POST-GRANT REPORTS GREEN RIVER VALLEY PART Schedule | (Form 990) 2009 SCHEDULE I Part III

Name of the organization Department of the Treasury Internal Revenue Service SCHEDULE 1-1 (Form 990)

► Attach to Form 990 to list additional information for Schedule I (Form 990), Part II or Part III. Continuation Sheet for Schedule I (Form 990)

Open to Public Inspection OMB No. 1545-0047 2009

Employer identification number 20-5806345Part 1 | Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.) NEW VENTURE FUND

Part Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part III.)	Assistance to Go	vernments and Organ	izations in the Ur	ited States (Sche	dule I (Form 990), Par	r II.)	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FOUNDATION FOR COLLABORATIVE LEARNING - 13625-A DULLES TECHNOLOGY DRIVE - HERNDON, VA 20171.	68-0671638		16,713,	0			TO ASSIST THE ORGANIZATION IN MAINTAINING AND OPERATING ITS INZBOOKS PROGRAM,
FRIENDS OF MISSOUR BREAKS MONUMENT 224 W. MAIN ST, SUITE 202 LEWISTON, MT 59457	36-4647947	501(c)(3)	19,654,	,0			GENERAL OPERATING GRANT.
FCS URBAN MINISTRIES, INC. PO BOX 17628 ATLANTA, GA 30316	58-1330830	501(C)(3)	83,000,	0			TO FUND THE ORGANIZATION'S SUSTAINING PROJECTS AND ACTIVATION PROJECTS.
GREATER YELLOWSTONE COALITION PO BOX 1874 BOZEMAN, MT 59771	81-0414042	501(c)(3)	25.000.	0			TO FUND THE DRGANIZATION'S UPPER GREEN RIVER VALLEY COALITION'S RESPONSIBLE
NEW MEXICO WILDERNESS ALLIANCE 142 TRUMAN ST., NW SUITE B-1 ALBUQUERQUE, NM 87108	85-0457916	501(c)(3)	25,000	0			TO FUND THE EDUCATIONAL COMPONENTS OF THE ORGANIZATION'S OTERO MESA PROJECT,
NEW MEXICO WILDLIFE FEDERATION 2610 SAN MATEO BLVD NE, SUITE A ALBUQUERQUE, NM 87110	85-0160947	501(C)(3)	20,000	0			TO FUND THE DRGANIZATION'S OTERO MESA PRESERVATION PROJECT.
OPEN SPACE INSTITUTE 1350 BROADWAY, SUITE 201 NEW YORK, NY 10018	52-1053406	501(C)(3)	12,000,	0			GENERAL, SUPPORT GRANT
PACIFIC INSTITUTE COMMUNITY ORGANIZATION - 110 MARYLAND AVE, NE, SUITE 108 - WASHINGTON, DC 20002	94-2206497	501(C)(3)	20,000	0			TO FUND THE DRGANIZATION'S EFFORTS TO IDENTIFY AND ENGAGE FAITH LEADERS IN THE NATIONAL
LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.	uction Act Notice	e, see the Instructions	for Form 990.				Schedule I-1 (Form 990) 2009

Name of the organization Department of the Treasury Internal Revenue Service SCHEDULE 1-1 (Form 990)

► Attach to Form 990 to list additional information for Schedule I (Form 990), Part II or Part III. Continuation Sheet for Schedule I (Form 990)

OMB No 1545-0047 Open to Public Inspection Employer identification number

Schedule I-1 (Form 990) 2009 ORGANIZATION'S DESOLATION MAINTAINING AND OPERATING GAINST MALARIA PROJECT. COLLABORATION IN SUPPORT CANYON CAMPAIGN PROJECT, ORGANIZATION'S CATHOLIC DRGANIZATION'S PRODUCT ORGANIZATION'S HEALTH ORGANIZATION'S UNITED OF NEGLECTED TROPICAL ENERAL SUPPORT GRANT (h) Purpose of grant or assistance ITS PUBLIC EDUCATION CARE FOR AMERICA NOW SUPPORT FUNDS TO THE TO PROVIDE GENERAL EDUCATION FUND'S ORGANIZATION IN TO SUPPORT THE (RED) CAMPAIGN 20-5806345 NO ASSIST THE RGANIZATION TO FUND THE TO FUND THE TO FUND THE TO FUND THE (g) Description of non-cash assistance Part I | Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II) (f) Method of valuation (book, FMV, appraisal, other) ٥, 0 o 0 Ö Ö (e) Amount of non-cash assistance Ö 189,000, 50 000 195,000 6,510 (d) Amount of cash grant 80,000 10,000 100,000 1,348,532 For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. (c) IRC section if applicable 51-0198509 | 501(C)(3) 501(C)(3) 501(C)(3) 501(C)(3) 501(C)(3) 501(C)(3) 95-4703838 53-0196617 94-2936961 56-0942853 13-4185520 26-0311849 20-2395975 NEW VENTURE FUND (b) EIN HIV/AIDS - 110 WILLIAM ST., SUITE SOUTHERN UTAH WILDERNESS ALLIANCE POPULATION SERVICES INTERNATIONAL THE GLOBAL BUSINESS COALITION ON 12400 WILSHIRE BOULEVARD, #1275 1800 SULLIVAN AVE, SUITE 506 (a) Name and address of organization or government 555 CAPITAL MALL, SUITE 675 1800 - NEW YORK, NY 10038 927 15TH ST NW, SUITE 500 THE GLOBALIST FOUNDATION SALT LAKE CITY, UT 84111 SAN FRANCISCO, CA 94129 LOS ANGELES, CA 90024 WASHINGTON, DC 20005 RESOURCE LEGACY FUND WASHINGTON, DC 20036 SACRAMENTO, CA 95814 DALY CITY, CA 94015 425 EAST 100 SOUTH THE PERSUADERS LLC 1120 19TH ST., NW TIDES FOUNDATION SETON INSTITUTE 1014 TORNEY AVE LHA

Name of the organization Department of the Treasury Internal Revenue Service SCHEDULE 1-1 (Form 990)

► Attach to Form 990 to list additional information for Schedule I (Form 990), Part II or Part III. Continuation Sheet for Schedule I (Form 990)

OMB No 1545-0047 2009 Open to Public

Inspection

MOUNTAIN ENERGY CAMPAIGN DISSOLUTION OF THE ROCKY TO FUND THE EDUCATIONAL ORGANIZATION'S SAN JUAN ORGANIZATION'S EVIDENCE ORGANIZATION'S RENEWAL: ORGANIZATION'S SOUTHERN ROCKIES CONSERVATION (h) Purpose of grant or assistance IL AND GAS LEASING Employer identification number STUDENT CARING FOR FOR GLOBAL HEALTH DVOCACY PROJECT CREATION PROJECT RGANIZATION'S ASPECTS OF THE 20-5806345 TO FUND THE TO FUND THE TO FUND THE TO FUND THE (g) Description of non-cash assistance Part I | Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II) appraisal, other) (f) Method of valuation (book, FMV, 0 (e) Amount of non-cash assistance (d) Amount of cash grant 20,000 492,575 88 000 27,000 (c) IRC section if applicable 38-2508282 501(C)(3) 94-6036493 501(C)(3) 501(C)(3) 501(C)(3) 38-1612715 84-1113831 NEW VENTURE FUND (b) EIN STREET, SUITE 315 - SAN FRANCISCO, UNIVERSITY OF CALIFORNIA, SAN VINEYARD CHURCH OF ANN ARBOR 2260 BASELINE RD., SUITE 200 (a) Name and address of organization or government FRANCISCO - 3333 CALIFORNIA SULTE 20 1660 WYNKOOP ST., SUITE 850 WESTERN RESOURCE ADVOCATES ANN ARBOR, MI 48104 1032 1/2 MAIN AVE, WILDERNESS SOCIETY

DURANGO, CO 81301

TROUT UNLIMITED

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

Schedule I-1 (Form 990) 2009

ALLIANCE'S STATE PARKS

11,000

501(C)(3)

53-0167933

DENVER CO 80202

BOULDER, CO 80302

2275 PLATT ROAD

CA 94143

SCHEDULE L (Form 990 or 990-EZ)

Department of the Treasury

Transactions With Interested Persons

► Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c,

or Form 990-EZ, Part V, line 38a or 40b.

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

OMB No 1545-0047

Open To Public Inspection

Internal Revenue Service Name of the organization Employer identification number 20-5806345 NEW VENTURE FUND Part I Excess Benefit Transactions (section 501(c)(3) and section 501(c)(4) organizations only) Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b. (c) Corrected? 1 (b) Description of transaction (a) Name of disqualified person Yes No 2 Enter the amount of tax imposed on the organization managers or disqualified persons during the year under 3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization Loans to and/or From Interested Persons. Part II Complete if the organization answered "Yes" on Form 990, Part IV, line 26, or Form 990-EZ, Part V, line 38a (f) Approved by board or (g) Written (b) Loan to or from (a) Name of interested (c) Original principal (d) Balance due (e) In person and purpose the organization? amount default? agreement? committee? From Yes Yes No Total Part III Grants or Assistance Benefiting Interested Persons. Complete if the organization answered "Yes" on Form 990, Part IV, line 27 (b) Relationship between interested person and (a) Name of interested person (c) Amount and type of the organization assistance Part IV Business Transactions Involving Interested Persons. Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c. (e) Shanng of (a) Name of interested person (b) Relationship between interested (c) Amount of (d) Description of organization's person and the organization transaction transaction revenues? No Yes ARABELLA PHILANTHROPIC INVENTITY MORE THAN 35 1,750,275.CONSULTING X

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule L (Form 990 or 990-EZ) 2009

SCHEDULE O (Form 990)

Supplemental Information to Form 990

Department of the Treasury Internal Revenue Service

932211 02-03-10

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

OMB No. 1545-0047 Inspection

Schedule O (Form 990) 2009

Employer identification number Name of the organization 20-5806345 NEW VENTURE FUND FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES: ADDITIONAL PROGRAMS FOCUSING ON VOTER REGISTRATION, PUBLIC POLICY, DISASTER RECOVERY, MUSIC AND THE ARTS, AND EDUCATION. INCLUDING GRANTS OF \$ 2190474. EXPENSES \$ 5035961. REVENUE S 0. FORM 990, PART VI, SECTION A, LINE 3: NEW VENTURE FUND HAS AN ADMINISTRATIVE SERVICES AGREEMENT WITH ARABELLA PHILANTHROPIC INVESTMENT ADVISORS, LLC. DURING THE YEAR, NEW VENTURE FUND PAID TO ARABELLA PHILANTHROPIC INVESTMENT ADVISORS, LLC \$1,750,275 FOR MANAGEMENT/ADMINISTRATIVE/PERSONNELL/CONSULTING SERVICES. FORM 990, PART VI, SECTION A, LINE 4: THE ORGANIZATION CHANGED THE NAME FROM ARABELLA LEGACY FUND TO NEW VENTURE FUND IN 2009. FORM 990, PART VI, SECTION A, LINE 8B: NEW VENTURE FUND DOES NOT HAVE ANY COMMITTEES WITH AUTHORITY TO ACT ON BEHALF OF THE GOVERNING BODY; THUS DOES NOT DOCUMENT MEETINGS HELD OR WRITTEN ACTIONS BY SUCH A COMMITTEE. FORM 990, PART VI, SECTION B, LINE 11: THE BOARD OF DIRECTORS AND THE ORGANIZATION'S LEGAL COUNSEL REVIEWED THE RETURN PRIOR TO FILING. IN ADDITION, MANAGEMENT PERFORMED AN INDEPTH REVIEW PRIOR TO THE RETURN BEING PROVIDED TO THE BOARD OF DIRECTORS. FORM 990, PART VI, SECTION B, LINE 12C: ALL PERSONS COVERED BY THE ORGANIZATION'S CONFLICT OF INTEREST POLICY ARE REQUIRED TO DECLARE

CONFLICTS OF INTEREST ANNUALLY. COVERED INDIVIDUALS CANNOT VOTE ON MATTERS

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

SCHEDULE O (Form 990)

Supplemental Information to Form 990

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

Attach to Form 990.

2009
Open to Public Inspection

Name of the organization

NEW VENTURE FUND

Employer identification number 20-5806345

BEFORE THE BOARD WHEN THEY HAVE A CONFLICT IN THE MATTER. DISINTERESTED
MEMBERS MUST DETERMINE WHETHER OR NOT THERE ARE ANY SUITABLE ALTERNATIVES
TO POTENTIAL TRANSACTIONS THAT CAUSE CONFLICT. IF A COVERED PERSON IS FOUND
IN VIOLATION OF THIS POLICY IT MAY BE CAUSE FOR REMOVAL FROM THE BOARD OF
DIRECTORS.
FORM 990, PART VI, SECTION C, LINE 19: THE ORGANIZATION MAKES ITS
GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, OR FINANCIAL STATEMENTS
AVAILABLE TO THE PUBLIC UPON REQUEST.
SCH L, PART IV, BUSINESS TRANSACTIONS INVOLVING INTERESTED PERSONS:
(A) NAME OF INTERESTED PERSON:
ARABELLA PHILANTHROPIC INVESTMENT ADVISORS, LLC
(B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION:
ENTITY MORE THAN 35% OWNED BY ERIC KESSLER-PRESIDENT
(C) AMOUNT OF TRANSACTION \$ 1750275.
(D) DESCRIPTION OF TRANSACTION: CONSULTING/ADMINISTRATIVE SERVICES WERE
PROVIDED TO NEW VENTURE FUND BY ARABELLA PHILANTHROPIC INVESTMENT
ADVISORS, LLC AT RATES APPROVED BY THE ORGANIZATION'S BOARD OF DIRECTORS.
IN ADDITION, SALARIES AND RELATED COSTS WERE ALSO PROVIDED BY ARABELLA
PHILANTHROPIC INVESTMENT ADVISORS, LLC. THE CONTRACT WAS APPROVED BY
INDEPENDENT MEMBERS OF THE ORGANIZATION'S BOARD OF DIRECTORS.
(E) SHARING OF ORGANIZATION REVENUES? = NO

Department of the Treasury Internal Revenue Service SCHEDULE R (Form 990)

Name of the organization

NEW VENTURE FUND

Related Organizations and Unrelated Partnerships

➤ See separate instructions.

2009 . Open to Public Inspection OMB No 1545-0047

Employer identification number - 20-5806345

► Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37. ► Attach to Form 990.

Direct controlling Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.) End-of-year assets <u>e</u> 115,166 Total income ਉ Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33) Legal domicile (state or foreign country) VIRGINIA AMERICANS WHO ENJOY THE ENVIRONMENTALLY MINDED Primary activity RESPONSIBLE TRAILS AMERICA, LLC - 26-1417500 COALITION OF Name, address, and EIN of disregarded entity 22209 1901 N FT MYER DR ARLINGTON, VA Part 1 Part

(a)	(g)	(၁)	<u>(G</u>	(e)	€
Name, address, and EIN	Primary activity	Legal domicile (state or	Exempt Code	Public charity	Direct controlling
of related organization		foreign country)	section	status (if section 501(c)(3))	entity
LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.	se, see the Instructions for Form 99	90.			Schedule R (Form 990) 2009

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NEW VENTURE FUND Schedule R (Form 990) 2009

Part III

Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.)

General or managing partner? Percentage ownership Yes No Schedule R (Form 990) 2009 9 Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.) Ξ Code V-UBI amount in box 20 of Schedule K-1 (Form 1065) Share of end-of-year assets <u>6</u> ate allocations? Dispropartion-Yes No Ξ Share of total income Share of end-of-year assets <u>6</u> Type of entity (C corp, S corp, or trust) e Share of total income Direct controlling entity Predominant income (related, unrelated, excluded from tax under sections 512-514) e Legal domicile (state or foreign country) <u>ပ</u> Direct controlling entity Primary activity ਉ Legal domicile (state or foreign country) છ Primary activity Name, address, and EIN of related organization Name, address, and EIN of related organization <u>a</u> 932162 07-21-10 Part IV

Page 3

FUND	he organization a
FUND	Complet
VENTORE	ions With Related Organizations (Complete if t
NEW	Related (
Schedule R (Form 990) 2009 NEW V	ansact
Schedule R (Part V

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		- c
b Gift, grant, or capital contribution to other organization(s)	٠	1b
c Gift, grant, or capital contribution from other organization(s)		5
		1d
e Loans or loan quarantees by other organization(s)		- -
f Sale of assets to other organization(s)		16
g Purchase of assets from other organization(s)		19
	•	1h
i Lease of facilities, equipment, or other assets to other organization(s)	:	;=
Lease of facilities, equipment, or other assets from other organization(s)		-
k Performance of services or membership or fundraising solicitations for other organization(s)		*
Performance of services of membership of fundraising solicitations by other organization(s)		= ,
		E
n Sharing of paid employees		-
o Reimbursement paid to other organization for expenses		10
p Reimbursement baid by other ordanization for expenses		ţ.
q Other transfer of cash or property to other organization(s)	:	7 pt
r Other transfer of cash or property from other organization(s)		1.
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds	ction thresholds.	
(a) Name of other organization(s)	(b) Transaction Atype (a·r)	(c) Amount involved
(1)		
(2)		
(3)		
(4)		
(9)		
(9)		
932163 02-04-10	Schedule	Schedule R (Form 990) 2009

20-5806345

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Schedule R (Form 990) 2009 NEW VENTURE FUND

Part VI Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to 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.

נומי אמס וכני מוסימות ביית מוסימות היית מוסי							
(a)	(q)		<u>ම</u>	(e)		(B)	£
Name, address, and EIN of entity	Primary activity	Legal domicile (state or foreign	Are all partners section 501(c)(3)	Share of end-of-	Dispropor- tionate	Code V-UBI amount in box 20	General or managing
			Yes No			of Schedule K-1 (Form 1065)	
					-		
					·		
			-				
							·

Schedule R (Form 990) 2009