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DLN: 93493318093193

OMB No 1545-0047

Return of Organization Exempt From Income Tax

Form **990**

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

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

A F-		2012	landar was a subserve having in 01 01 2012 2012 and anding 12 21	2012			<u> </u>
			endar year, or tax year beginning 01-01-2012 , 2012, and ending 12-31 C Name of organization	-2012	D Employ	vor ider	ntification number
		applicable	NEW VENTURE FUND		D Employ	yer ruer	itineacion number
_	dress cl	_	Doing Business As		20-58	06345	5
Na	me cha	ange					
Init	tıal retu	ım	Number and street (or P O box if mail is not delivered to street address) Room/suit	e	E Telepho	ne numl	ber
Tei	rmınate	ed	1201 CONNECTICUT AVE NW NO 300				
— _{Am}	nended	return	City or town, state or country, and ZIP + 4		(202)	595-1	020
— Арі	plicatioi	n pending	WASHINGTON, DC 20036		G Gross re	acainte ¢	52,519,099
			F Name and address of principal officer	11/->			<u> </u>
			ERIC KESSLER		nis a group ates?	return	TYes ▼ No
			1201 CONNECTICUT AVE NW NO 300				,
			WASHINGTON,DC 20036				ded?
r Ta	ıx-exen	npt status	✓ 501(c)(3)	If"N	No," attach	a lıst	(see instructions)
		·		H(c) Gro	up exempti	on nun	nber ►
J W	ebsite	e:► WW	VW NEWVENTUREFUND ORG	()			
K For	m of or	rganızatıon	Corporation Trust Association Other ►	L Year of f	ormation 200	06 M	State of legal domicile DC
Pa	rt I	Sum	ımary	•			
	1	Briefly d	escribe the organization's mission or most significant activities				
			PORT INNOVATIVE AND EFFECTIVE PUBLIC INTEREST PROJECTS				
ဗ							
፸							
<u>.</u>	2	Check th	his box 🛏 if the organization discontinued its operations or disposed of	more than	25% of its	net as:	sets
Governance	-	O			20 /0 01 110		
	3	Number	of voting members of the governing body (Part VI, line 1a)			з	5
es es	4	Number	of independent voting members of the governing body (Part VI, line 1b)			4	4
Activities &	5	Total nu	mber of individuals employed in calendar year 2012 (Part V, line 2a) .			5	53
ទ្ធ	6	Total nu	mber of volunteers (estimate if necessary)			6	5
٠.	7a	Total un	related business revenue from Part VIII, column (C), line 12			7a	0
	Ь	Net unre	elated business taxable income from Form 990-T, line 34			7b	0
				Pri	or Year		Current Year
	8	Contri	ibutions and grants (Part VIII, line 1h)		35,238,1	.10	51,601,903
를	9	Progra	am service revenue (Part VIII, line 2g)		1,138,6	86	764,640
Revenue	10	Inves	tment income (Part VIII, column (A), lines 3, 4, and 7d)		162,8	36	152,556
Ě	11	Other	revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	2,716			
	12		revenue—add lines 8 through 11 (must equal Part VIII, column (A), line				
					36,542,3		52,519,099
	13		s and similar amounts paid (Part IX, column (A), lines 1-3)		9,217,8		17,076,406
	14		its paid to or for members (Part IX, column (A), line 4)			0	0
88	15	Saları 5–10	es, other compensation, employee benefits (Part IX, column (A), lines			0	3,922,550
Expenses	16a		, ssional fundraising fees (Part IX, column (A), line 11e)		128,9	83	418,668
⊕	Ь		undraising expenses (Part IX, column (D), line 25) ▶942,145				
Ð	17		expenses (Part IX, column (A), lines 11a–11d, 11f–24e)		15,375,5	1 3	18,157,162
	18		expenses Add lines 13–17 (must equal Part IX, column (A), line 25)		24,722,3	_	39,574,786
	19		nue less expenses Subtract line 18 from line 12		11,819,9		12,944,313
÷ 9	+	IVE A CII	and the second of the second o		ng of Currer	-	
Net Assets or Fund Balances					Year		End of Year
38.5	20	Total	assets (Part X, line 16)		32,883,4	197	44,254,337
것말	21	Total	liabilities (Part X, line 26)		2,913,7	'85	1,340,312
žĒ	22	Netas	ssets or fund balances Subtract line 21 from line 20		29,969,7	12	42,914,025
Pai	rt II	Sign	nature Block			•	
my k	nowle	dge and	perjury, I declare that I have examined this return, including accompany belief, it is true, correct, and complete Declaration of preparer (other the nowledge				
		L		1.	2042-44-11		
c:	_	**** Signa	*** ature of officer		2013-11-14 Date		
Sigr Her				•			
	-		C KESSLER PRESIDENT e or print name and title				
			Print/Type preparer's name Preparer's signature Da	te Ch	eck 🗀 ıf	PTIN	
	Ч	<u> </u>	KAREN GRIES	se	lf-employed	P00078	
P₂i₄			Firm's name F CLIFTONLARSONALLEN LLP	l _{Fir}	m's EIN 🕨 41	-074674	19
				1	111 2 LIN F 41	. 077077	7
	pare On	er	Firm's address ► 4250 N FAIRFAX DRIVE SUITE 1020		one no (571)		

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

✓ Yes 厂No

Forr	1990 (2012) Page
Pa	Statement of Program Service Accomplishments Check if Schedule O contains a response to any question in this Part III
TO PRC SUP DEV	Briefly describe the organization's mission NDED IN OCTOBER 2006, THE NEW VENTURE FUND ("NVF") IS A 501(C)(3) PUBLIC CHARITABLE ORGANIZATION DEDICATED SUPPORTING INNOVATIVE AND EFFECTIVE PUBLIC INTEREST PROJECTS THE ORGANIZATION CURRENTLY MANAGES GRAMS, PROVIDES FISCAL SPONSORSHIPS TO NONPROFIT ORGANIZATIONS, AND COORDINATES GRANTS PROGRAMS NVI PORTS A RANGE OF PUBLIC INTEREST PROJECTS, THE MAJORITY OF WHICH FOCUS ON CONSERVATION, GLOBAL ELOPMENT AND HEALTH, AND EDUCATION NVF HAS ALSO MANAGED PROGRAMS FOCUSED ON CIVIC ENGAGEMENT, NOMIC POLICY, DISASTER RECOVERY, AND MUSIC AND THE ARTS
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?
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses Section $501(c)(3)$ and $501(c)(4)$ organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported
4a	(Code) (Expenses \$ 10,739,342 including grants of \$ 5,638,740) (Revenue \$ 135,217) ENVIRONMENTAL (CLIMATE, CONSERVATION & ENERGY) PROGRAMS NVF'S ENVIRONMENTAL PROGRAMS FOCUS ON A RANGE OF CONSERVATION, CLIMATE, AND ENERGY ISSUES IN THE U S AND ABROAD THESE ISSUES INCLUDE OCEAN AND RIVER CONSERVATION, ALTERNATIVE ENERGY SOURCES AND REDUCTION OF FOSSIL FUELS, PROTECTION OF OCEAN LIFE, WILDLANDS CONSERVATION, ECOLOGICAL AGRICULTURE, AND HABITAT RESTORATION ACTIVITIES AMONG THESE PROJECTS INCLUDE GRANTMAKING, COMMUNICATIONS, COORDINATION AMONG STAKEHOLDERS, CIVIC AND MEDIA ENGAGEMENT, AND PUBLIC AWARENESS CAMPAIGNS
4b	(Code) (Expenses \$ 13,140,037 including grants of \$ 4,960,648) (Revenue \$ 153,595)
	GLOBAL DEVELOPMENT AND HEALTH PROGRAMS NVF'S PORTFOLIO OF GLOBAL DEVELOPMENT AND HEALTH PROJECTS RANGE ACROSS THE FULL SPECTRUM OF INTERNATIONAL FOCUS AREAS INCLUDING HUMAN RIGHTS, DEVELOPMENT AID, FAMILY PLANNING, TOBACCO CONTROL, CROSS-CULTURAL EXCHANGES, SANITATION, INFECTIOUS AND EASILY PREVENTABLE DISEASES, COORDINATION OF PHARMACEUTICAL RESEARCH, AND CONFLICT RESOLUTION STRATEGIES TO SUPPORT THESE EFFORTS INCLUDE GRANTMAKING, MEDIA AND COMMUNICATIONS, YOUTH ENGAGEMENT, COMMUNITY BUILDING, AND PUBLIC-PRIVATE PARTNERSHIPS
	(C. L
4c	(Code) (Expenses \$ 2,347,969 including grants of \$ 781,750) (Revenue \$) EDUCATION PROGRAMS NVF OPERATES A VARIETY OF EDUCATION-FOCUSED PROJECTS THESE PROJECTS WORK IN A RANGE OF AREAS TO SUPPORT THE IMPROVEMENT AND DEVELOPMENT OF EDUCATION IN THE U S , SUCH AS CONNECTED LEARNING, SUPPORT TO TEACHERS AND OTHER EDUCATIONAL PROFESSIONALS, ADVOCACY FOR EFFECTIVE TEACHING PRACTICES, EARLY LEARNING IN VULNERABLE POPULATIONS, LITERACY, AND SUPPORT FOR THE COMMON CORE INITIATIVE OUR WORK PRIMARILY INCLUDES GRANTMAKING, CONVENINGS AND STRATEGIC COMMUNICATIONS SUPPORT
	(Code) (Expenses \$ 10,158,382 including grants of \$ 5,695,268) (Revenue \$ 475,828)
	OTHER IN ADDITION TO OUR PRIMARY FOCUS AREAS, NVF OPERATES A NUMBER OF OTHER PROJECTS WITH A FOCUS ON CIVIC PARTICIPATION, ACCESS TO HEALTHY FOOD, REDUCTION OF GUN VIOLENCE, THE ARTS, REPRODUCTIVE RIGHTS, DISASTER RECOVERY, AND ENCOURAGING A CULTURE OF GIVING IN THE LGBTQ COMMUNITY STRATEGIES HERE INCLUDE GRANTMAKING, POLICY RESEARCH, COMMUNICATIONS AND MEDIA ENGAGEMENT, AND PUBLIC AWARENESS CAMPAIGNS
4d	Other program services (Describe in Schedule O) (Expenses \$ 10,158,382 including grants of \$ 5,695,268) (Revenue \$ 475,828)
4e	Total program service expenses ► 36,385,730

Part TV	Checklist o	f Required	Schedules
	CHECKHISLO	Reduired	Sciledules

	<u> </u>		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 🕏	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	Yes	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part 1	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV.	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V.	10		No
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		No
C	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	Yes	
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		No
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f		No
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	Yes	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15	Yes	
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? <i>If</i> "Yes," complete Schedule F, Parts III and IV	16		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17	Yes	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
ь	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20h		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
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		No
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) 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		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	Yes	
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	Yes	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section $512(b)(13)$? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
	Note. All Form 990 filers are required to complete Schedule O	38	Yes	(2012)

Раг	Statements Regarding Other IRS Filings and Tax Compliance			_
	Check if Schedule O contains a response to any question in this Part V	•	 Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 102		163	140
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable	1		
	gaming (gambling) winnings to prize winners?	1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За		Νo
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
		20		
C	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		No
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year			140
u	Ti res, indicate the number of forms 5252 med during the year.	1		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?			
_		8		
	Sponsoring organizations maintaining donor advised funds.			
	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		
.0	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12 10a	-		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	-		
.2a	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			
.3	Section 501(c)(29) qualified nonprofit health insurance issuers.	1		
а	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
c	Enter the amount of reserves on hand			
i4a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Νo
	If "Yes " has it filed a Form 720 to report these payments? If "No " provide an explanation in Schedule O	14h		

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

			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? .	3	Yes	
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? $$.	5		No
6	Did the organization have members or stockholders?	6		No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	evenu		
			<i>ye Cod</i>	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		
10a b	Did the organization have local chapters, branches, or affiliates?			No
10a b 11a	Did the organization have local chapters, branches, or affiliates?	10a		No
10a b 11a b	Did the organization have local chapters, branches, or affiliates?	10a 10b	Yes	No
10a b 11a b 12a	Did the organization have local chapters, branches, or affiliates?	10a 10b	Yes	No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b	Yes	No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a	Yes	No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b	Yes Yes Yes	No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c	Yes Yes Yes Yes	No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes	No No
10a b 11a b 12a b c	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes	No No
10a b 11a b 12a b c 13 14 15 a b	Did the organization have local chapters, branches, or affiliates? If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written whistleblower policy? 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 Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes	No No
10a b 11a b 12a b c 13 14 15 a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes	No No No No

- 17 List the States with which a copy of this Form 990 is required to be filed▶AL , AK , AR , CA , CT , GA , HI , IL , KY , MD , MA , MI , MN, MS, NJ, NM, OK, OR, PA, RI, TN, VA, WV, NY
- Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply Own website Another's website Upon request Other (explain in Schedule O)
- Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year
- State the name, physical address, and telephone number of the person who possesses the books and records of the organization ►ARABELLA ADVÍSORS 1201 CONNECTICUT AVE NW STE 300 WASHINGTON, DC (202) 595-1020

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

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

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

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

(A) Name and Title				one bot	not box h ar or/tr	check, unle office rustee	ess er	(D) Reportable compensation from the organization (W- 2/1099- MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related
	dotted line)	Individual trustee or director	Institutional Trustee	-	Key employee	Highest compensated employee	er			organizations
(1) ERIC KESSLER	2 00	×		х				o	0	0
PRESIDENT/DIRECTOR (2) KATHERINE MILLER	1 00					-				
SECRETARY/DIRECTOR		х		х				0	0	0
(3) ADAM EICHBERG	1 00									
TREASURER/DIRECTOR		X		Х				0	0	0
(4) HARRY DRUCKER	1 00	, , , , , , , , , , , , , , , , , , ,								
DIRECTOR		Х						0	0	0
(5) JOSEPH PJ SIMMONS	1 00	х						0	0	0
DIRECTOR								, and the second		
(6) GERALD SHIPPS	40 00					×		157,000	0	8,863
PROGRAM MANAGER	1									
-										
					_					
-										
	I						l			Form 990 (2012)
										FUIIII 990 (2012)

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

	(A) Name and Title	(B) A verage hours per week (list any hours	more t	(C) Ition (do not check than one box, unless on is both an officer a director/trustee)					(D) Reportable compensation from the organization (V		(E) Reportable compensation from related organizations (V	v-	(F) Estimated amount of other compensation from the			
		for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099	-MISC)	2/1099-MISC) 0	organization and related organizations			
				ļ												
				ļ												
1b	Sub-Total			•				 -								
c d	Total from continuation shee Total (add lines 1b and 1c)				٠	•	•	•		157,000		0		8,863		
2	Total number of individuals (i						d abov	re) w	l ho receive					-,		
	\$100,000 of reportable comp	ensation from th	ne orgar	ızatı	on ► :	1										
													Yes	No		
3	Did the organization list any to on line 1a? If "Yes," complete								, or highes	t compen	sated employee	_		,		
4	For any individual listed on lii								d other co	mpensatio	on from the	3		No		
	organization and related orga												V			
5	Did any person listed on line	· · · · · 1 1a receive or ac	· · crue co	 mpen	• satı	• on fr	om an	v unr	elated ord	· · · nanızatıon	or individual for	4	Yes			
	services rendered to the orga											5		No		
	ection B. Independent C	ontractors														
1	Complete this table for your f	ive highest comp														
	compensation from the organ	ızatıon Report c (A)	ompens	atıon	for	the d	calend	arye	ar ending	with or wi	thin the organizat	ion's	tax year			
		Name and business									cription of services NT/OPERATION SVCS		Compe	nsation		
	ELLA ADVISORS 1201 CONNECTICUT				C 200	136				CONSULTIN				1,246,022		
	AL FLIGHT RELIEF 804 RIVERSIDE DR									SERVICES	VICES/PROJECT		-	1,516,838		
	ELECTIONS LEGAL NETWORK 1825 K			ON DO	200	06				MANAGEME	NT/CONSUL CONSULTING/PROJE	CT		620,450		
WILLI	AMSWORKS 3417 FREMONT AVE N SU	JITE 221 SEATTLE W	A 98103							MANAGEME	NT		614,790			
	US JETS 1001 PROVIDENCE BLVD NEV									SERVICES	TATION/LOGISTIC			586,248		
	Total number of independent co \$100,000 of compensation fro	•	_	t not	lımıt	ed t	o thos	e list	ed above) who rece	ived more than					

Form 99							Page 9
Part \	7++1	Statement of Revenue Check if Schedule O contains a	response to any question	ın thıs Part VIII .			
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512,513,or 514
2 2	1a	Federated campaigns	1a				
ant	ь	Membership dues	1b				
يَ ق	c	Fundraising events	. 1c				
fs, FA	d	Related organizations	. 1d				
:કુ	e	Government grants (contributions)					
ns,							
ig e	f	All other contributions, gifts, grants, a similar amounts not included above	nd 1f 51,601,903				
년 된	g	Noncash contributions included in lines 1a-1f \$	S	İ			į į
Contributions, Giffs, Grants and Other Similar Amounts	h	Total. Add lines 1a-1f		51,601,903			
<u> </u>	<u> </u>	1014117144111100 14 17 1	Business Code				
E E	2a	CONSULTING REVENUE	Business Code 900099	764,640	764,640		
ever	b	CONSOCITING REVENUE	900099	764,640	764,640		
<u>7</u> 2≛	°		_				
Š	d		_				
¥	e		_				
Ē	f	All other program service reve	nue				
Program Service Revenue	١.						
	g	Total. Add lines 2a-2f		764,640			
	3	Investment income (including and other similar amounts).		152,556			152,556
	4	Income from investment of tax-exem	-				
	5	Royalties	🕨 [
		(ı) Real	(II) Personal				
	6a	Gross rents					
	Ь	Less rental expenses					
	C	Rental income or (loss)					
	d	Net rental income or (loss) .					
		(ı) Securitie	s (II) Other				
	7a	Gross amount from sales of					
		assets other than inventory					
	ь	Less cost or other basis and					
		sales expenses Gain or (loss)					
	d d	Net gain or (loss)					
		Gross income from fundraising					
e		events (not including					
듄		\$ of contributions reported on lin	e 1c)				
ě		See Part IV, line 18					
<u>.</u>	١.		a				
Other Revenue	l b	Less direct expenses Net income or (loss) from fund					
•		Gross income from gaming act					
		See Part IV, line 19					
			a				
	Ь	Less direct expenses					
	10a	Net income or (loss) from game Gross sales of inventory, less	ing activities				
	104	returns and allowances .					
			a				
	l	Less cost of goods sold .					
	С	Net income or (loss) from sales	· · · · · · · · · · · · · · · · · · ·				
	11a	Miscellaneous Revenue	Business Code				
	b IIIa		_				
			-				
	d	All other revenue	_				
	a e	Total. Add lines 11a-11d .	· . · · · •				
	12	Total revenue. See Instruction	s	52,519,099	764,640	0	152,556

Part IX Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) マ Check if Schedule O contains a response to any question in this Part IX (D) (B) (C) Do not include amounts reported on lines 6b, (A) Program service Management and Fundraising 7b. 8b. 9b. and 10b of Part VIII. Total expenses expenses general expenses expenses Grants and other assistance to governments and organizations in the United States See Part IV, line 21 14,357,070 14,357,070 Grants and other assistance to individuals in the United States See Part IV, line 22 Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16 2,719,336 2,719,336 Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . . Other salaries and wages 3,272,165 2,392,095 623,726 256,344 Pension plan accruals and contributions (include section 401(k) 79,375 57,552 15,758 6,065 and 403(b) employer contributions) 305,270 225,199 56,863 Other employee benefits 23,208 10 265,740 195,805 49,796 20,139 11 Fees for services (non-employees) 1,674,711 628,002 1,046,709 Management 605,923 551,459 54,464 Legal Accounting 26,234 26,234 418,668 Professional fundraising services See Part IV, line 17 418,668 Investment management fees Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on 11,101,416 10,714,679 172,316 Schedule O) 214.421 Advertising and promotion . . 263,941 257,197 3,444 12 3,300 13 Office expenses 274,164 257,326 16,838 229,129 213,452 15,677 14 Information technology . . 15 Royalties . 199,467 113,560 85,907 16 Occupancy **17** 3,315,175 3,311,486 3,689 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings . 248,583 246,571 2,012 20 Payments to affiliates 21 5,303 22 Depreciation, depletion, and amortization . 5,303 23 42,693 42,693 24 Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O) a DUES AND SUBSCRIPTIONS 87,186 75,594 11,592 MISCELLANEOUS 33,252 21,797 11,455 LICENSES AND FEES 29,008 21,270 7,738 d EVALUATION 20,977 20,977 e All other expenses Total functional expenses. Add lines 1 through 24e 36,385,730 25 39,574,786 2.246.911 942,145 Joint costs. Complete this line only if the organization 26 reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ► [if following SOP 98-2 (ASC 958-720)

Part X Balance Sheet

Par	ťΧ	Check if Schedule O contains a response to any question in this	Part X				
					(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing			8,930,090	1	12,290,960
	2	Savings and temporary cash investments		•	16,627,556	2	21,788,004
	3	Pledges and grants receivable, net			3,125,000	3	6,458,050
	4	Accounts receivable, net			205,256	4	167,994
	5	Loans and other receivables from current and former officers, dikey employees, and highest compensated employees. Complete Schedule L	e Part I	I of		5	
Assets	6	Loans and other receivables from other disqualified persons (as section $4958(f)(1)$), persons described in section $4958(c)(3)(E)$ employers and sponsoring organizations of section $501(c)(9)$ volume beneficiary organizations (see instructions) Complete Part II of	3), and o	contributing y employees'		6	
	7	Notes and loans receivable, net				7	
₹	8	Inventories for sale or use				8	
	9	Prepaid expenses and deferred charges			1,221,706	9	1,320,758
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	 10a	17,344	,,,,,		1,1020,100
	ь	Less accumulated depreciation	10b	15,671	6,977	10c	1,673
	11	Investments—publicly traded securities			,	11	<u>'</u>
	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			2,766,912	15	2,226,898
	16	Total assets. Add lines 1 through 15 (must equal line 34)			32,883,497	16	44,254,337
	17	Accounts payable and accrued expenses			1,593,259	17	588,480
	18	Grants payable			1,320,526	18	751,832
	19	Deferred revenue	•		1,020,020	19	101,002
	20	Tax-exempt bond liabilities	•			20	
	21	Escrow or custodial account liability Complete Part IV of Scher				21	
es		Loans and other payables to current and former officers, directo				21	
Liabilitie	22	key employees, highest compensated employees, and disqualifi persons Complete Part II of Schedule L	eď	•		22	
<u>.e</u>	22					22	
	23	Secured mortgages and notes payable to unrelated third parties				23	
	24 25	Unsecured notes and loans payable to unrelated third parties Other liabilities (including federal income tax, payables to relate and other liabilities not included on lines 17-24) Complete Par	ed third	l parties,		24	
		D		•		25	
	26	Total liabilities. Add lines 17 through 25			2,913,785	26	1,340,312
s e s		Organizations that follow SFAS 117 (ASC 958), check here ► ↓ lines 27 through 29, and lines 33 and 34.	and c	omplete			
an an	27	Unrestricted net assets			340,436	27	311,476
Ba	28	Temporarily restricted net assets		•	29,629,276	28	42,602,549
귤	29	Permanently restricted net assets				29	
or Fund Balance		Organizations that do not follow SFAS 117 (ASC 958), check he complete lines 30 through 34.	re ► 「	and			
	30	Capital stock or trust principal, or current funds				30	
Assets	31	Paid-in or capital surplus, or land, building or equipment fund				31	
ASS	32	Retained earnings, endowment, accumulated income, or other fu				32	
Net .	33	Total net assets or fund balances			29,969,712	33	42,914,025
Z	34	Total liabilities and net assets/fund balances			32,883,497	34	44,254,337
			•	-	==,000, .07		Form 000 (2012)

Par	Reconcilliation of Net Assets Check if Schedule O contains a response to any question in this Part XI				୮
1	Total revenue (must equal Part VIII, column (A), line 12)	1		52,!	519,099
2	Total expenses (must equal Part IX, column (A), line 25)	2		39.!	574,786
3	Revenue less expenses Subtract line 2 from line 1	3			944,313
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			969,712
5	Net unrealized gains (losses) on investments	5		20,.	,,,,,,
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		42,9	914,025
Par	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII				. Г
				Yes	No
1	Accounting method used to prepare the Form 990 Cash Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or revie a separate basis, consolidated basis, or both	wed on			
	Separate basis Consolidated basis Both consolidated and separate basis				
ь	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a sepa basis, consolidated basis, or both	rate			
	Separate basis Consolidated basis Both consolidated and separate basis				
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversigh audit, review, or compilation of its financial statements and selection of an independent accountant?	t of the	2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	n			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in th Single Audit Act and OMB Circular A-133?	e	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the r	equired	3b		

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As Filed Data -

DLN: 93493318093193

Employer identification number

OMB No 1545-0047

SCHEDULE A

Name of the organization

(Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

NEW VENTURE FUND

Public Charity Status and Public Support

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

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

2012

Open to Public Inspection

									20-5806				
Par				blic Charity Sta						instruction	S		
	rganı		•	te foundation becaus	•			•	•				
1	<u> </u>			on of churches, or a				section 170(b)(1)(A)(i).				
2	<u> </u>			in section 170(b)(1									
3	<u>_</u>			perative hospital se									
4	Γ			h organization operat ity, and state	ted in conjur	nction with a	hospital des	scribed in se	ection 170(b)	(1)(A)(iii).	Enter the		
5	Г	Anorg	anization op	erated for the benefi	t of a college	e or univers	ity owned or	operated by	a governmer	ntal unit des	cribed in		
				A)(iv). (Complete P					_				
6	Γ		deral, state, or local government or governmental unit described in section $170(b)(1)(A)(v)$.										
7	<u> </u>	An org	anization th	at normally receives on 170(b)(1)(A)(vi).	a substanti	al part of its				from the gei	neral public		
8	\sqcap			described in section		•	mplete Part I	Ι)					
9	Γ	An org	anızatıon th	at normally receives	(1) more th	nan 331/3%	of its support	from contri	butions, men	nbership fee	s, and gross		
		receipt	s from activ	ities related to its ex	xempt functi	ons—subjec	t to certain e	exceptions,	and (2) no m	ore than 33	1/3% of		
		ıts sup	port from gr	oss investment inco	me and unre	lated busin	ess taxable ı	ncome (less	section 511	tax) from b	usinesses		
		acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III)											
10	Γ	An org	anızatıon or	ganized and operated	dexclusively	to test for	public safety	See sect io	n 509(a)(4).				
11	Γ	one or the box	more public	ganized and operated ly supported organiz bes the type of supp b Type II c	ations desci orting organ	ribed in sect lization and	tion 509(a)(1 complete lin	.) or section es 11e throi	1509(a)(2) \$ ugh 11h	See section	509(a)(3). Check		
e	Γ	othert	_	ox, I certify that the on managers and ot	_			•		•	•		
f			organization this box	received a written de	etermination	from the IF	RS that it is a	Type I, Typ	oe II, or Type	e III suppor	ting organization,		
g				2006, has the organi	zation acce	pted any gıf	t or contribut	ion from any	of the		,		
			ng persons?							,			
				rectly or indirectly o				i persons de	escribea in (ii		Yes No		
				governing body of th		_	n /				g(i)		
			•	er of a person descri	• •						g(ii)		
_		• •		lled entity of a perso		., .,				110	g(iii)		
h		Provid	e the followi	ng information about	the support	ed organiza	tion(s)						
(i) Name supporte organizati		ted	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see	(iv) Is organizat col (i) lis your gove docume	ion in ted in erning	(v) Did yo the organ in col (i) suppo	ızatıon of your	(vi) Is organiza col (i) or in the U	tion in ganized	(vii) A mount of monetary support		
				instructions))	Yes	No	Yes	No	Yes	No			
Total													

instructions

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support Calendar year (or fiscal year beginning (a) 2008 **(b)** 2009 (c) 2010 (d) 2011 (e) 2012 (f) Total in) 🟲 1 Gifts, grants, contributions, and membership fees received (Do 5,998,667 23,888,800 16,340,995 35,238,110 51,601,913 133,068,485 not include any "unusual grants ") Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 3 The value of services or facilities furnished by a governmental unit to the organization without charge 5,998,667 23,888,800 16,340,995 35,238,110 51,601,913 133,068,485 Total. Add lines 1 through 3 The portion of total contributions by each person (other than a governmental unit or publicly 73,678,298 supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) Public support. Subtract line 5 59,390,187 from line 4 Section B. Total Support Calendar year (or fiscal year (a) 2008 **(b)** 2009 (c) 2010 (d) 2011 **(e)** 2012 (f) Total beginning in) 🟲 5,998,667 23,888,800 16,340,995 Amounts from line 4 35,238,110 51,601,913 133,068,485 Gross income from interest, dividends, payments received on 71,129 securities loans, rents, royalties 13,115 16,741 162,836 152,556 416,377 and income from similar sources Net income from unrelated business activities, whether or not the business is regularly carried on 10 Other income Do not include gain or loss from the sale of 2.716 2.716 capital assets (Explain in Part IV) 11 Total support (Add lines 7 133,487,578 through 10) 12 Gross receipts from related activities, etc (see instructions) 12 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check 13 Section C. Computation of Public Support Percentage 14 Public support percentage for 2012 (line 6, column (f) divided by line 11, column (f)) 14 44 490 % Public support percentage for 2011 Schedule A, Part II, line 14 15 16a 33 1/3% support test—2012. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box ►V and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test—2011. 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 - 2012. 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 - 2011. 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

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

Schedule A (Form 990 or 990-EZ) 2012 Page 3 Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.) Section A. Public Support Calendar year (or fiscal year beginning (a) 2008 **(b)** 2009 (c) 2010 (d) 2011 (e) 2012 (f) Total in) 🟲 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt

	purpose								
3	Gross receipts from activities that								
	are not an unrelated trade or								
	business under section 513			-					
4	Tax revenues levied for the								
	organization's benefit and either								
	paid to or expended on its behalf								
5	The value of services or facilities								
3	furnished by a governmental unit to								
	the organization without charge								
6	Total. Add lines 1 through 5								
	Amounts included on lines 1, 2,								
/a	and 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								
С	Add lines 7a and 7b								
8	Public support (Subtract line 7c								
	from line 6)								
_Se	ction B. Total Support								
Cale	ndar year (or fiscal year beginning	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total		
	in) ►	(u) 2000	(6) 2003	(6) 2010	(4) 2011	(6) 2012	(1) 10tai		
9	A mounts from line 6								
10a	Gross income from interest,								
	dividends, payments received on								
	securities loans, rents, royalties								
	and income from similar								
	sources								
Ь	Unrelated business taxable income (less section 511 taxes)								
	from businesses acquired after								
	June 30, 1975								
c	Add lines 10a and 10b								
11	Net income from unrelated								
11	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)			Librari Corretto con	6.01	E04(-)(2)			
14	First five years. If the Form 990 is for	or the organization	on's first, second	i, thira, fourth, or	ππη tax year as a	1 501(c)(3) org	anization, ►		
	check this box and stop here	a Cunnaut Da							
	ction C. Computation of Public			12		T I			
15	Public support percentage for 2012	15							
16	Public support percentage from 2011	16							
Se	ction D. Computation of Inve	stment Inco	me Percenta	ge					
17	Investment income percentage for 20				nn (f))	17			
					. , ,				
18	Investment income percentage from					18			
19a	33 1/3% support tests—2012. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization.								

33 1/3% support tests—2011. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18

is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Schedule A (Form 990 or 990-EZ) 2012

DLN: 93493318093193

OMB No 1545-0047

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ▶ Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ. ► See separate instructions.

Inspection

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

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

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

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

• Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A If the organization answered "Yes" to Form 990, Part IV, Line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35c (Proxy Tax), then ◆ Section 501(c)(4), (5), or (6) organizations Complete Part III Name of the organization **Employer identification number** NEW VENTURE FUND 20-5806345 Complete if the organization is exempt under section 501(c) or is a section 527 organization. Provide a description of the organization's direct and indirect political campaign activities in Part IV 2 Political expenditures 3 Volunteer hours Part I-B Complete if the organization is exempt under section 501(c)(3). Enter the amount of any excise tax incurred by the organization under section 4955 2 Enter the amount of any excise tax incurred by organization managers under section 4955 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ☐ Yes 3 Was a correction made? ☐ Yes ┌ No If "Yes," describe in Part IV Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3). Enter the amount directly expended by the filing organization for section 527 exempt function activities Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities 3 Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b Did the filing organization file Form 1120-POL for this year? 4 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV **(c)** EIN (e) A mount of political (a) Name (b) Address (d) A mount paid from contributions received filing organization's and promptly and funds If none, enter -0directly delivered to a separate political organization If none, enter-0-

section 4911 tax for this year?

┌ Yes ┌ No

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

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

	Limits on Lobbying E (The term "expenditures" means ar	(a) Filing organization's totals	(b) Affiliated group totals	
1a	Total lobbying expenditures to influence public o	pinion (grass roots lobbying)	99,479	
b	Total lobbying expenditures to influence a legisla	ative body (direct lobbying)	400,658	
c	Total lobbying expenditures (add lines 1a and 1b	o)	500,137	
d	Other exempt purpose expenditures		38,399,919	
e	Total exempt purpose expenditures (add lines 1	38,900,056		
f	Lobbying nontaxable amount Enter the amount f	1,000,000		
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:		
	Not over \$500,000	20% of the amount on line 1e		
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000		
	Over \$17,000,000	\$1,000,000		
g	Grassroots nontaxable amount (enter 25% of lin	e 1f)	250,000	
h	Subtract line 1g from line 1a If zero or less, ento	er - O -	0	_
i	Subtract line 1f from line 1c If zero or less, ente	r-0-	0	
j	If there is an amount other than zero on either lir	ne 1h or line 1i, did the organization file Form 472	0 reporting	□ Ves □ No

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

	Lobbying Expenditures During 4-Year Averaging Period										
	Calendar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) Total					
2a	Lobbying nontaxable amount	833,756	874,352	1,000,000	1,000,000	3,708,108					
b	Lobbying ceiling amount (150% of line 2a, column(e))					5,562,162					
c	Total lobbying expenditures	104,146	144,599	287,418	500,137	1,036,300					
_d	Grassroots nontaxable amount	208,439	218,588	250,000	250,000	927,027					
_e	Grassroots ceiling amount (150% of line 2d, column (e))					1,390,541					
f	Grassroots lobbying expenditures	40,407	3,475	94,246	99,479	237,607					

Pa	rt II-B Complete if the organization is exempt under section 501(c)(3) and has Notice filed Form 5768 (election under section 501(h)).	ОТ			7 0	ge S
	Week Week was a second to be a second to be a second to be a second to be a second to the second to	(6	a)		(b)	
activ	each "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying vity.	Yes	No	1	Amoun	t
1	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					
а	Volunteers?					
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?					
C	Media advertisements?					
d	Mailings to members, legislators, or the public?					
е	Publications, or published or broadcast statements?					
f	Grants to other organizations for lobbying purposes?					
g	Direct contact with legislators, their staffs, government officials, or a legislative body?					
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
i	O ther activities?					
j	Total Add lines 1c through 1:					
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?					
b	If "Yes," enter the amount of any tax incurred under section 4912					
C	If "Yes," enter the amount of any tax incurred by organization managers under section 4912					
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section 505(c)(6).	01(c)(5), (or s		
_			_		Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?			1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			3		
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?					
Pa	t III-B Complete if the organization is exempt under section 501(c)(4), section 505(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "N line 3, is answered "Yes."					
1	Dues, assessments and similar amounts from members	1				
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).					
	Current year	2a				
b	Carryover from last year	2b				
C	Total	2c				
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3				
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4				
5	Taxable amount of lobbying and political expenditures (see instructions)	5				

Part IV Supplemental Information

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, line 2, and Part II-B, line 1 Also, complete this part for any additional information

Identifier Return Reference Explanation

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DLN: 93493318093193

OMB No 1545-0047

SCHEDULE D (Form 990)

Department of the Treasury

Supplemental Financial Statements ► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b

► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

terria	F Attacil to For	ili 330. F See separate ilistructions.		Zilopoddioli
	me of the organization V VENTURE FUND		Emp	oloyer identification number
			20-	5806345
Pa	organizations Maintaining Donor Advorganization answered "Yes" to Form 990		unds	or Accounts. Complete if th
	-	(a) Donor advised funds		(b) Funds and other accounts
	Total number at end of year			
2	Aggregate contributions to (during year)			
3	Aggregate grants from (during year)			
ŀ	Aggregate value at end of year			
5	Did the organization inform all donors and donor advisor funds are the organization's property, subject to the or		nor adv	ısed Yes No
5	Did the organization inform all grantees, donors, and dused only for charitable purposes and not for the benef			er purpose
	conferring impermissible private benefit?			☐ Yes ☐ No
₽a	rt II Conservation Easements. Complete if		o Forn	n 990, Part IV, line 7.
L	Purpose(s) of conservation easements held by the org Preservation of land for public use (e g , recreation Protection of natural habitat Preservation of open space	or education) Preservation of ar		rically important land area d historic structure
2	Complete lines 2a through 2d if the organization held a easement on the last day of the tax year	a qualified conservation contribution in	the forr	n of a conservation
				Held at the End of the Year
а	Total number of conservation easements		2a	
b	Total acreage restricted by conservation easements		2b	
C	Number of conservation easements on a certified histo	oric structure included in (a)	2c	
d	Number of conservation easements included in (c) accomistoric structure listed in the National Register	quired after 8/17/06, and not on a	2d	
3	Number of conservation easements modified, transfer	red, released, extinguished, or terminate	ed by th	ne organization during
	the tax year -			
ŀ	Number of states where property subject to conservat	ion easement is located ▶		
5	Does the organization have a written policy regarding tenforcement of the conservation easements it holds?	the periodic monitoring, inspection, han	dling of	f violations, and Yes No
;	Staff and volunteer hours devoted to monitoring, inspe	cting, and enforcing conservation ease	ments o	during the year
	A mount of expenses incurred in monitoring, inspecting	a and enforcing concernation eacoment	c durin	a the year
•	► \$	g, and emorcing conservation easement	s duilli	g the year
3	Does each conservation easement reported on line 2(and section 170(h)(4)(B)(ii)?	d) above satisfy the requirements of sec	ction 1	70(h)(4)(B)(ı) Yes No
•	In Part XIII, describe how the organization reports colbalance sheet, and include, if applicable, the text of the organization's accounting for conservation easeme	e footnote to the organization's financia		
ar	Complete if the organization answered "Y	s of Art, Historical Treasures, 'es" to Form 990, Part IV, line 8.	or Ot	her Similar Assets.
la	If the organization elected, as permitted under SFAS 1 works of art, historical treasures, or other similar asseservice, provide, in Part XIII, the text of the footnote to	ts held for public exhibition, education,	or rese	earch in furtherance of public
b	If the organization elected, as permitted under SFAS 1 works of art, historical treasures, or other similar asseservice, provide the following amounts relating to thes	ts held for public exhibition, education,		
	(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, histor following amounts required to be reported under SFAS			
а	Revenues included in Form 990, Part VIII, line 1	· · · · ·		▶ \$

b Assets included in Form 990, Part X

Par	Organizations Maintaining Co	Hections of Ar	t, HIS	tori	<u>cai i</u>	<u>reasur</u>	es, or O	<u>tner</u>	Similar As	sets	(continued)
3	Using the organization's acquisition, accessi collection items (check all that apply)	on, and other reco	rds, cl	neck	any of	the follo	wing that a	re a	sıgnıfıcant use	of its	
а	Public exhibition		d	Γ	Loan	or excha	ange progr	ams			
b	Scholarly research		e	Γ	Othe	r					
c	Preservation for future generations										
4	Provide a description of the organization's co Part XIII	ollections and expl	aın ho	w the	y furth	er the or	ganızatıon	's ex	empt purpose	n	
5	During the year, did the organization solicit o									_	_
D	assets to be sold to raise funds rather than t									Yes	No No
Pal	t IV Escrow and Custodial Arrange Part IV, line 9, or reported an am						answere	u Ye	es to Form s	990,	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?	ıan or other ınterm	ediary	ford	ontribi	utions or	other ass	ets n	ot	┌ Yes	□ No
b	If "Yes," explain the arrangement in Part XII	I and complete the	e follo	wing	able		_				
									An	nount	
С	Beginning balance							1c			
d	Additions during the year							1d			
е	Distributions during the year							1e			
f	Ending balance							1 f			
2a	Did the organization include an amount on Fo	orm 990, Part X, Iır	ne 21?	•						┌ Yes	☐ No
b	If "Yes," explain the arrangement in Part XII	I Check here if the	e expla	anatı	n has	been pro	vided in P	art X	III		<u> </u>
Pa	rt V Endowment Funds. Complete										
4.	Dagunung of ware balance	(a)Current year	(b) Prior	year	b (c) Two	o years back	. (d) ⊺	hree years back	(e)Fou	r years back
1a b	Beginning of year balance										
C	Net investment earnings, gains, and losses							+			
	Net investment earnings, gams, and losses										
d	Grants or scholarships										
е	Other expenditures for facilities and programs										
f	Administrative expenses										
g	End of year balance										
2	Provide the estimated percentage of the curr	ent vear end balan	ice (lir	ne 1 a	. colum	nn (a)) he	eld as	1			
a	Board designated or quasi-endowment	,		3	,	(-,,,					
Ь	Permanent endowment ►										
c	Temporarily restricted endowment										
	The percentages in lines 2a, 2b, and 2c shou										
3a	Are there endowment funds not in the posses organization by	ssion of the organiz	zation	tnat	are nel	a and ad	ministered	ı tor t	ne	Ye	es No
	(i) unrelated organizations								3a		
	(ii) related organizations								3a(ii)	
	If "Yes" to 3a(II), are the related organization								3)	
4	Describe in Part XIII the intended uses of th					10					
Par	t VI Land, Buildings, and Equipme Description of property	e nt. See Form 99	90, Pa			IU. or other	(b)Cost or	other	(c) Accumulate	ed (d) Book value
	Description of property					estment)	basis (oth		depreciation		
1a	Land		•								
	Buildings		•				ļ				
	Leasehold improvements		•								
	Equipment		•	\vdash			1	7,344	15,	671	1,673
		aual Form 000 Part			D) !:==	10(a))			<u> </u>	+	4.670
iota	I. Add lines 1a through 1e (Column (d) must e	quai rorm 990, Part	x, colu	ımn (ש), IIne	10(C).)			<u> ► </u>		1,673

Part VII Investments—Other Securities. See	Form 990, Part X, line 1	.2.	
(a) Description of security or category	(b)Book value	(c) Metho	od of valuation
(including name of security)		Cost or end-o	f-year market value
(1)Financial derivatives			
(2)Closely-held equity interests Other			
Other			
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	•		
Part VIII Investments—Program Related. Se	e Form 990, Part X, line	13.	
(a) Description of investment type	(b) Book value	(c) Metho	od of valuation
		Cost or end-o	f-year market value
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)			
Part IX Other Assets. See Form 990, Part X, II			
(a) Descri	ption		(b) Book value
(1) GRANTS RECEIVABLE, LESS CURRENT PORTION			2,226,898
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15		<u> </u>	2,226,898
Part X Other Liabilities. See Form 990, Part X		1	
1 (a) Description of liability	(b) Book value		
Federal income taxes			
See Additional Data Table			
		1	
		1	
]	
		1	
		1	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25) ▶]	
2 Fin 48 (ΔSC 740) Footnote In Part XIII provide the tex	, t of the footnote to the over	-	

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Identifier

	C1 120	its with Kevenue p	Reconciliation of Revenue per Audited Financial Statement
52,786,513	1		Total revenue, gains, and other support per audited financial statements
			Amounts included on line 1 but not on Form 990, Part VIII, line 12
			Net unrealized gains on investments 2a
		267,414	Donated services and use of facilities
			Recoveries of prior year grants
			Other (Describe in Part XIII)............2d
267,414	2e		Add lines 2a through 2d
52,519,099	3	[Subtract line 2e from line 1
			Amounts included on Form 990, Part VIII, line 12, but not on line 1
			Investment expenses not included on Form 990, Part VIII, line 7b . 4a
			Other (Describe in Part XIII)............4b
0	4c		Add lines 4a and 4b
52,519,099	5		Total revenue Add lines $f 3$ and $f 4c.$ (This must equal Form 990, Part I, line 12)
:urn	per	nts With Expenses	Reconciliation of Expenses per Audited Financial Statem
39,842,200	1		Total expenses and losses per audited financial statements
			Amounts included on line 1 but not on Form 990, Part IX, line 25
		267,414	Donated services and use of facilities
			Prior year adjustments
			Other losses
			Other (Describe in Part XIII)...........20
267,414	2e		Add lines 2a through 2d
39,574,786	3	[Subtract line 2e from line 1
			Amounts included on Form 990, Part IX, line 25, but not on line 1:
			nvestment expenses not included on Form 990, Part VIII, line 7b 4
			Other (Describe in Part XIII)...........4
0	4c		Add lines 4a and 4b
39,574,786	5	[Fotal expenses Add lines $f 3$ and $f 4c.$ (This must equal Form 990, Part I, line 18
			Supplemental Information

Return Reference

Schedule D (Form 990) 2012

Explanation

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DLN: 93493318093193

Employer identification number

OMB No 1545-0047

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.

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization NEW VENTURE FUND

					20-5806345	
Pa	"Yes" to Form 990, Par			the United States. C	omplete if the organiza	ation answered
1	For grantmakers. Does the dassistance, the grantees' eligible the grants or assistance?	organization m gibility for the	naıntaın recor grants or assı	istance, and the select	ion criteria used to awa	
2	For grantmakers. Describe in the United States.	n Part V the or	ganızatıon's ı	procedures for monitor	ing the use of grant fur	nds outside
3	Activites per Region (The follow	ing Part I, line	3 table can be o	duplicated if additional sp	ace is needed)	
	(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
	CENTRAL AMERICA AND THE CARIBBEAN			GRANTS TO RECIPIENTS LOCATED IN THE REGION	GRANT MAKING	200,000
	EAST ASIA AND THE PACIFIC			GRANTS TO RECIPIENTS LOCATED IN THE REGION	GRANT MAKING	49,800
	EUROPE (INCLUDING ICELAND & GREENLAND) -			GRANTS TO RECIPIENTS LOCATED IN THE REGION	GRANT MAKING	559,836
	NORTH AMERICA			GRANTS TO RECIPIENTS LOCATED IN THE REGION	GRANT MAKING	1 ,4 35 ,9 99
	SUB-SAHARA AFRICA				GRANT MAKING	473,701
	SUB-SAHARA AFRICA			PROGRAM SERVICES	PROGRAM ACTIVITY EXPENDITURES IN THE REGION	8,493
	EUROPE (INCLUDING ICELAND & GREENLAND) -			PROGRAM SERVICES	PROGRAM ACTIVITY EXPENDITURES IN THE REGION	39,857
	NORTH AMERICA			PROGRAM SERVICES	PROGRAM ACTIVITY EXPENDITURES IN THE REGION	517,800

0

3a Sub-total

3,285,486

es" to Form 990	U,
_	

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
	See Add'l Data								

2	Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognize	ed as
	tax-exempt by the IRS, or for which the grantee or counsel has provided a section $501(c)(3)$ equivalency letter	

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Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) A mount of cash grant	(e) Manner of cash disbursement	(f) A mount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
		+	1		,		1
		+ +		'	+		+
		+		'	+		+
		+	<u> </u>		 		+
	 		 		 	 	+
					<u> </u>		
					<u> </u>	<u> </u>	
							<u> </u>
			1				
		+ + +			,		1
		+ + +			+		
	 	+			+		+
			1		-		+
	 		 		 	 	
			 		<u> </u>	 	
						1	

Part IV Foreign Forms

1	organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	Γ	Y	'es	<u> </u>	Νo
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organizationmay be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)	Γ	Y	'es	্য	No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations. (see Instructions for Form 5471)	Г	Y	'es	<u> </u>	Νo
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)	Γ	Υ	'es	<u> </u>	Νo
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships. (see Instructions for Form 8865)	Г	Υ	'es	<u> -</u>	Νo
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713).	Γ	Υ	'es	<u> </u>	No

Schedule F (Form 990) 2012

Part V Supplemental Information

Complete this part to provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

as applicable. Also co	mplete this part to provide any	additional information (see instructions).
Identifier	ReturnReference	Explanation
PROCEDURE FOR MONITORING GRANTS OUTSIDE THE U S		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
	<u> </u>	Schedule F (Form 990) 2012

Software ID: Software Version:

EIN: 20-5806345

Name: NEW VENTURE FUND

a) Name of	(b) IRS code section		es Outside The Unit	(e) A mount of	(f) Manner of	(g) A mount of non-	(h) Description of	(ı) Method of valuatıon
rganization	and EIN(if applicable)	(c) Region	(d) Purpose of grant	cash grant	cash disbursement	cash assistance	non-cash assistance	(book, FMV, appraisal, othe
		EUROPE	ENVIRONMENTAL (CLIMATE, CONSERVATION & ENERGY) PROGRAMS	193,536	W1KE			
		NORTH AMERICA	ENVIRONMENTAL (CLIMATE, CONSERVATION & ENERGY)	45,000	WIRE			
		EUROPE	PROGRAMS GLOBAL DEVELOPMENT AND HEALTH PROGRAM	30,000	WIRE			
		SUB-SAHARAN AFRICA	GLOBAL DEVELOPMENT	10,000	WIRE			
		SUB-SAHARAN AFRICA	AND HEALTH PROGRAM GLOBAL DEVELOPMENT AND HEALTH	75,493	WIRE			
		CENTRAL AMERICA AND THE CARIBBEAN	PROGRAM GLOBAL DEVELOPMENT AND HEALTH	150,000	WIRE			
		EUROPE	PROGRAM ENVIRONMENTAL (CLIMATE, CONSERVATION & ENERGY)	22,800	WIRE			
		SUB-SAHARAN AFRICA	PROGRAMS GLOBAL DEVELOPMENT AND HEALTH PROGRAM	9,250	WIRE			
		AND THE	GLOBAL DEVELOPMENT	50,000	WIRE			
		NORTH AMERICA	AND HEALTH PROGRAM ENVIRONMENTAL (CLIMATE, CONSERVATION &	75,000	СНЕСК			
		110.75	ENERGY) PROGRAMS		11.05 =			
		NORTH AMERICA	ENVIRONMENTAL (CLIMATE, CONSERVATION & ENERGY) PROGRAMS	98,999	WIRE			
		SUB-SAHARAN AFRICA	GLOBAL DEVELOPMENT AND HEALTH PROGRAM	20,000				
		NORTH AMERICA	ENVIRONMENTAL (CLIMATE, CONSERVATION & ENERGY) PROGRAMS	75,000	WIRE			
		NORTH AMERICA	ENVIRONMENTAL (CLIMATE, CONSERVATION & ENERGY) PROGRAMS	50,000	WIRE			
		EUROPE	GLOBAL DEVELOPMENT AND HEALTH PROGRAM	21,200	WIRE			
		EUROPE	ENVIRONMENTAL (CLIMATE, CONSERVATION & ENERGY) PROGRAMS	75,000	WIRE			
		EUROPE	GLOBAL DEVELOPMENT AND HEALTH PROGRAM	59,800	WIRE			
		NORTH AMERICA	ENVIRONMENTAL (CLIMATE, CONSERVATION & ENERGY) PROGRAMS	72,500	WIRE			
		SUB-SAHARAN AFRICA	GLOBAL DEVELOPMENT AND HEALTH PROGRAM	37,334				
		NORTH AMERICA	ENVIRONMENTAL (CLIMATE, CONSERVATION & ENERGY) PROGRAMS	100,000	СНЕСК			
		NORTH AMERICA	ENVIRONMENTAL (CLIMATE, CONSERVATION & ENERGY)	35,000	WIRE			
		NORTH AMERICA	PROGRAMS ENVIRONMENTAL (CLIMATE, CONSERVATION & ENERGY)	35,000	WIRE			
		SUB-SAHARAN AFRICA	PROGRAMS GLOBAL DEVELOPMENT AND HEALTH PROGRAM	75,000	WIRE			
		SUB-SAHARAN AFRICA	GLOBAL DEVELOPMENT AND HEALTH PROGRAM	42,764	WIRE			
		EAST ASIA AND THE PACIFIC	GLOBAL DEVELOPMENT AND HEALTH PROGRAM	10,000				
		EAST ASIA AND THE PACIFIC	GLOBAL DEVELOPMENT AND HEALTH PROGRAM	9,800				
		NORTH AMERICA	ENVIRONMENTAL (CLIMATE, CONSERVATION & ENERGY) PROGRAMS	35,000	WIRE			
		SUB-SAHARAN AFRICA	GLOBAL DEVELOPMENT AND HEALTH PROGRAM	35,000	WIRE			
		EAST ASIA AND THE PACIFIC	GLOBAL DEVELOPMENT AND HEALTH PROGRAM	25,000				
		NORTH AMERICA	ENVIRONMENTAL (CLIMATE, CONSERVATION & ENERGY) PROGRAMS	35,000	WIRE			

Form 990 Schedul		I - Grants or Entities Outside The United States							
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)	
		AFRICA	GLOBAL DEVELOPMENT AND HEALTH PROGRAM	10,000					
			GLOBAL DEVELOPMENT AND HEALTH PROGRAM	50,000	WIRE				
			GLOBAL DEVELOPMENT AND HEALTH PROGRAM	150,000	CHECK				
		EUROPE	GLOBAL DEVELOPMENT AND HEALTH PROGRAM	37,500	WIRE				
		EAST ASIA AND THE PACIFIC	GLOBAL DEVELOPMENT AND HEALTH PROGRAM	5,000	WIRE				
			ENVIRONMENTAL (CLIMATE, CONSERVATION & ENERGY) PROGRAMS	180,000	WIRE				
		AFRICA	GLOBAL DEVELOPMENT AND HEALTH PROGRAM	11,300	WIRE				
		AFRICA	GLOBAL DEVELOPMENT AND HEALTH PROGRAM	35,320	WIRE				
			ENVIRONMENTAL (CLIMATE, CONSERVATION & ENERGY) PROGRAMS	25,000	WIRE				
			ENVIRONMENTAL (CLIMATE, CONSERVATION & ENERGY) PROGRAMS	30,000	WIRE				
		NORTH AMERICA	ENVIRONMENTAL (CLIMATE, CONSERVATION & ENERGY) PROGRAMS	80,000	WIRE				
		NORTH AMERICA	ENVIRONMENTAL (CLIMATE, CONSERVATION & ENERGY) PROGRAMS	205,000	WIRE				
		SUB-SAHARAN AFRICA	GLOBAL DEVELOPMENT AND HEALTH PROGRAM	800	WIRE				
			ENVIRONMENTAL (CLIMATE, CONSERVATION & ENERGY) PROGRAMS	17,500	WIRE				
		SUB-SAHARAN AFRICA	GLOBAL DEVELOPMENT AND HEALTH PROGRAM	66,440	WIRE				
		AFRICA	GLOBAL DEVELOPMENT AND HEALTH PROGRAM	45,000	WIRE				
			ENVIRONMENTAL (CLIMATE, CONSERVATION & ENERGY) PROGRAMS	25,000	WIRE				
			ENVIRONMENTAL (CLIMATE, CONSERVATION & ENERGY) PROGRAMS	42,000	WIRE				
		NORTH AMERICA	ENVIRONMENTAL (CLIMATE, CONSERVATION & ENERGY) PROGRAMS	25,000	WIRE				
		EUROPE	GLOBAL DEVELOPMENT AND HEALTH PROGRAM	70,000	WIRE				

DLN: 93493318093193

OMB No 1545-0047

SCHEDULE G (Form 990 or 990-EZ) **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. Form 990-EZ filers are not required to complete this part.

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

Inspection

Department of the Treasury Internal Revenue Service Name of the organization **Employer identification number** NEW VENTURE FUND

Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Indicate whether the organization raised funds through any of the following activities. Check all that apply e 🔽 Solicitation of non-government grants Mail solicitations Internet and email solicitations Phone solicitations Special fundraising events In-person solicitations Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990. Part VII) or entity in connection with professional fundraising services? If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization (v) A mount paid to (i) Name and address of (ii) Activity (iii) Dıd (iv) Gross receipts (vi) Amount paid to individual fundraiser have from activity (or retained by) (or retained by) custody or fundraiser listed in or entity (fundraiser) organization control of col (i) contributions? Yes FUNDRAISING ARABELLA ADVISORS MANAGEMENT SUPPORT LLC 1201 CONNECTICUT 0 418,668 Yes -418,668 AVE NW SUITE 300 WASHINGTON, DC 20036 418,668 -418,668 List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or licensing AL, AK, AR, CA, CO, CT, DE, FL, GA, HI, ID, IL, IN, IA, KS, KY, MA, MD, ME, MI, MN, MS, MO, MT, NE, NV, NC, ND, NH, NJ, NM, NY, OH,

OK, OR, PA, RI, SC, SD, TN, TX, UT, VT, VA, WA, WI, WV, WY

Pa	rt II	Fundraising Events. Com more than \$15,000 of fundra events with gross receipts g	aising event contribu	cion answered "Yes" to tions and gross income	Form 990, Part IV, li e on Form 990-EZ, lin	ne 18, or reported es 1 and 6b. List			
		<u> </u>	(a) Event #1	(b) Event #2	(c) O ther events	(d) Total events (add col (a) through col (c))			
_			(event type)	(event type)	(total number)	(3)			
Revenue	1	Gross receipts							
9. 9.	2	Less Contributions							
<u>~</u>	3	Gross income (line 1 minus line 2)							
	4	Cash prizes							
en.	5	Noncash prizes							
Expenses	6	Rent/facility costs							
	7	Food and beverages .							
Direct	8	Entertainment							
ā	9	Other direct expenses .							
	10	Direct expense summary Add lin	es 4 through 9 ın colum	n (d)		()			
	11	Net income summary Combine Ii	ne 3, column (d), and Iır	e 10					
Par	t III	Gaming. Complete if the or \$15,000 on Form 990-EZ, lir		"Yes" to Form 990, Pa	rt IV, line 19, or repo	orted more than			
<u>—</u>		\$13,000 OH TOTHI 330 EZ, III	(a) Bingo	(b) Pull tabs/Instant	(c) Other gaming	(d) Total gaming (add			
Revenue				bingo/progressive bingo		col (a) through col (c))			
<u>R</u>	1	Gross revenue							
ses	2	Cash prizes							
Expenses	3	Non-cash prizes							
	4	Rent/facility costs							
Direct	5	Other direct expenses							
			☐ Yes	┌ Yes	┌ Yes				
	6	Volunteer labor	□ No	│ No	┌ No				
	7	Direct expense summary Add lines	s 2 through 5 ın column	(d)					
	8	Net gaming income summary Com	bine lines 1 and 7 in co	lumn (d)	🛌				
9	Ent	er the state(s) in which the organiza	ation operates gaming a	ctivities					
а		the organization licensed to operate				. Fyes Fno			
b	If"	If "No," explain							
10a b		re any of the organization's gaming Yes," explain	icenses revoked, suspe	ended or terminated during	the tax year?				

70ES	the organization operate gaming	activities with nonlinelinders		· · I Yes I No
.2		neficiary or trustee of a trust or a men		
	formed to administer charitable of	gaming?		· · · · Fyes F No
.3	Indicate the percentage of gamir	ng activity operated in		
а	The organization's facility			13a
b	An outside facility			13b
.4	Enter the name and address of th	ne person who prepares the organizati	on's gaming/special events books	and records
	Name ►			
	Address 🟲			
	revenue?	ntract with a third party from whom the		
	amount of gaming revenue retain	ed by the third party 🟲 \$		
C	If "Yes," enter name and address	s of the third party		
	Name 🟲			
	Address ►			
.6	Gaming manager information			
	Name 🟲			
	Gaming manager compensation I	\$ \$		
	Description of services provided	>		
	☐ Director/officer	Employee	Independent contractor	
.7	Mandatory distributions			
а	Is the organization required unde	er state law to make charitable distrib	utions from the gaming proceeds to	
	retain the state gaming license?			Г _{Yes} Г _{No}
b	Enter the amount of distributions	required under state law distributed t	to other exempt organizations or sp	ent
		activities during the tax year 🟲 💲		
Par	columns (III) and (v), a	mation. Complete this part to pr and Part III, lines 9, 9b, 10b, 15b ditional information (see instructi	, 15c, 16, and 17b, as applical	
	Identifier	Return Reference	Explana	tion

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Schedule I

(Form 990)

DLN: 93493318093193 OMB No 1545-0047

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

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

Open to Public

Department of the Treasury Inspection Internal Revenue Service Name of the organization Employer identification number NEW VENTURE FUND 20-5806345 **General Information on Grants and Assistance** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and √ Yes Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. (f) Method of (a) Name and address of **(b)** EIN (d) A mount of cash (c) IRC Code (e) A mount of non-(g) Description of (h) Purpose of grant valuation non-cash assistance or assistance organization section grant cash or government if applicable assistance (book, FMV, appraisal, other) See Additional Data Table Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 159 Enter total number of other organizations listed in the line 1 table

rt III	Grants and Other Assistance to Individuals in the United States	. Complete if the organization answered	"Yes" to Form 990, Part IV, line	<u>22.</u>
	Part III can be duplicated if additional space is needed.			

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

Part IV	Supplemental	Information
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Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information

Identifier	Return Reference	Explanation
PROCEDURE FOR MONITORING GRANTS IN THE U S	l	SCHEDULE I, PART I, LINE 2 FOR MOST GRANTS CONTRIBUTED, THE ORGANIZATION REQUIRES THAT ORGANIZATIONS RECEIVING FUNDS SUBMIT A PROPOSAL AND PROVIDE POST-GRANT REPORTS

Schedule I (Form 990) 2012

Software ID: Software Version:

EIN: 20-5806345

Name: NEW VENTURE FUND

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

Form 990,Schedule I, Pai	-			-			
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AFRICA CONSERVATION FUND3400 E SPEEDWAY BLVD STE 118-138 TUCSON,AZ 85716	73-1665337	501C3	152,798				GLOBAL DEVELOPMENT AND HEALTH PROGRAM
AFRICA CONSERVATION FUND3400 E SPEEDWAY BLVD STE 118-138 TUCSON,AZ 85716	73-1665337	501C3	40,000				GLOBAL DEVELOPMENT AND HEALTH PROGRAM
ALASKA COMMUNITY ACTION ON TOXICS505 W NORTHERN LIGHTS STE 205 ANCHORAGE, AK 99503	92-1077082	501C3	100,000				ENVIRONMENTAL (CLIMATE, CONSERVATION & ENERGY) PROGRAM
ALLIANCE FOR A JUST SOCIETY3518 S EDMUNDS ST SEATTLE, WA 98118	91-1635554	501C3	45,000				OTHER - TAX REFORM
AMERICAN CANCER SOCIETY250 WILLIAMS STREET ATLANTA,GA 30303	13-1788491	501C3	332,183				GLOBAL DEVELOPMENT AND HEALTH PROGRAM
AMERICAN LUNG ASSOCIATION1301 PENNSYLVANIA AVE NW STE 800 WASHINGTON,DC 20004	13-1632524	501C3	217,705				ENVIRONMENTAL (CLIMATE, CONSERVATION & ENERGY) PROGRAM
ARIZONA COMMUNITY FOUNDATIONPO BOX U PHEONIX, AZ 86004	86-0348306	501C3	10,087				ENVIRONMENTAL (CLIMATE, CONSERVATION & ENERGY) PROGRAM
ASIAN HEALTH SERVICES 818 WEBSTER STREET OAKLAND,CA 946074220	94-2235908	501C3	34,000				OTHER - DOMESTIC HEALTH
BACKCOUNTRY HUNTER AND ANGLERSPO BOX 53 JOSEPH,OR 97846	20-1037177	501C3	10,000				ENVIRONMENTAL (CLIMATE, CONSERVATION & ENERGY) PROGRAM
BACKCOUNTRY HUNTER AND ANGLERSPO BOX 53 JOSEPH,OR 97846	20-1037177	501C3	14,000				ENVIRONMENTAL (CLIMATE, CONSERVATION & ENERGY) PROGRAM
BAXTER COMMUNITY CENTER935 BAXTER AVE SE	23-7076806	501C3	14,400				EDUCATION PRO GRAM
GRAND RAPIDS,MI 49506 BEHAVIORAL IDEAS LAB INC214 CAMBRIDGE ST STE 500 BOSTON,MA 02114	27-1678009	501C3	371,792				OTHER - POVERTY RESEARCH
BEHAVIORAL IDEAS LAB INC214 CAMBRIDGE ST STE 500 BOSTON,MA 02114	27-1678009	501C3	327,051				OTHER - POVERTY RESEARCH
BEHAVIORAL IDEAS LAB INC214 CAMBRIDGE ST STE 500 BOSTON,MA 02114	27-1678009	501C3	227,208				OTHER - POVERTY RESEARCH
BEHAVIORAL IDEAS LAB INC214 CAMBRIDGE ST STE 500 BOSTON, MA 02114	27-1678009	501C3	328,323				OTHER - POVERTY RESEARCH
BEHAVIORAL IDEAS LAB INC214 CAMBRIDGE ST STE 500 BOSTON, MA 02114	27-1678009	501C3	172,111				OTHER - POVERTY RESEARCH
BIODIVERSITY CONSERVATION ALLIANCE PO BOX 1512 LARAMIE,WY 82073	83-0308354	501C3	8,920				ENVIRONMENTAL (CLIMATE, CONSERVATION & ENERGY) PROGRAM
BLACK WOMEN FOR WELLNESSPO BOX 292516 LOS ANGELES,CA 90029	95-4624707	501C3	25,000				OTHER - NONPARTISAN CIVIC PARTICIPATION
BLESSINGS IN A BACKPACK37 JACKSON AVE LOUISVILLE,FL 32082	26-1964620	501C3	12,500				OTHER - HUNGER
BREAD FOR THE WORLD INSTITUTE425 THIRD STREET SW SUITE 1200 WASHINGTON, DC 20024	51-0175510	501C3	50,000				GLOBAL DEVELOPMENT AND HEALTH PROGRAM

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States (e) A mount of non-(a) Name and address of **(b)** EIN (c) IRC Code section (d) Amount of cash (f) Method of (g) Description of (h) Purpose of grant organization ıf applıcable grant cash valuation non-cash assistance or assistance or government (book, FMV, appraisal, assistance other) 501C3 OTHER - VIOLENCE 27-2408409 BULL MOOSE 180.000 SPORTSMEN'S ALLIANCE REDUCTION PO BOX 3394 IDAHO SPRINGS, CO 80452 501C3 CALIFORNIA LATINAS FOR 26-2213868 25,000 OTHER -REPRODUCTIVE JUSTICE REPRODUCTIVE PO BOX 861766 JUSTICE LOS ANGELES, CA 90086 CALIFORNIA LATINAS FOR 26-2213868 501C3 390,000 OTHER -REPRODUCTIVE JUSTICE REPRODUCTIVE PO BOX 861766 JUSTICE LOS ANGELES, CA 90086 CENTER FOR AMERICAN 30-0126510 501C3 35,000 ENVIRONMENTAL PROGRESS1333 H ST NW (CLIMATE, WASHINGTON, DC 20005 CONSERVATION & ENERGY) PROGRAM CENTER FOR 94-3213100 501C3 50,000 GLOBAL **ENVIRONMENT AND** DEVELOPMENT AND HEALTH PROGRAM POPULATION161 CHERRY STREET 1ST FLOOR NEW CANAAN, CT 06840 CENTER FOR FOOD SAFETY 52-2165893 501C3 25,000 ENVIRONMENTAL 660 PENNSYLVANIA AVE (CLIMATE, CONSERVATION & SE 302 WASHINGTON, DC 20003 ENERGY) PROGRAM CENTER FOR PUBLIC 51-0153566 501C3 50,000 EDUCATION JUSTICE1115 PROGRAM MASSACHUSETTS AVE NW WASHINGTON, DC 20005 CENTER OLAME -53-0196603 501C3 36,000 OTHER -GEORGETOWN UNIVERSITY REPRODUCTIVE 3307 M STREET SUITE 200 JUSTICE WASHINGTON, DC 20007 CERES INC99 CHAUNCY ST 501C3 ENVIRONMENTAL 22-3053747 10,000 6TH FLOOR (CLIMATE. BOSTON, MA 02111 CONSERVATION & ENERGY) PROGRAM CHICAGO FOUNDATION 36-3348160 501C3 150,000 OTHER -FOR WOMENONE EAST REPRODUCTIVE WACKER DR STE 1620 JUSTICE CHICAGO,IL 60601 CHICAGO WILDERNESS 36-4476942 501C3 ENVIRONMENTAL 5.000 TRUST8 S MICHIGAN AVE (CLIMATE. STF 900 CONSERVATION & CHICAGO,IL 60603 ENERGY) PROGRAM CHOICE USA1317 F 501C3 OTHER -52-1772575 165,000 REPRODUCTIVE STREET NW 501 WASHINGTON, DC 20004 JUSTICE EDUCATION CHRISTIAN COMMUNITY 501C3 41-2227656 65,000 **DEVELOPMENT ASSOC** PROGRAM 1100 W CERMAK B414 CHICAGO, IL 60608 CHURCH WORLD SERVICE 13-4080201 501C3 GLOBAL 25.000 DEVELOPMENT AND 475 RIVERSIDE DRIVE STE 700 HEALTH PROGRAM NEW YORK, NY 10115 CITIZENS FOR A HEALTHY 501C3 ENVIRONMENTAL 27-2139467 5,000 COMMUNITYPO BOX 291 (CLIMATE. HOTCHKISS,CO 81419 CONSERVATION & ENERGY) PROGRAM CIVICUS1420 K STREET 52-1847010 501C3 GLOBAL 30,000 DEVELOPMENT AND **NW SUITE 900** WASHINGTON, DC 20005 HEALTH PROGRAM CLEAN WATER FUND1010 501C3 52-1043444 7 700 ENVIRONMENTAL **VERMONT AVE NW STE 400** (CLIMATE. WASHINGTON, DC 20005 CONSERVATION & ENERGY) PROGRAM CLEAN WATER FUND1010 52-1043444 501C3 ENVIRONMENTAL 39,325 **VERMONT AVE NW STE 400** (CLIMATE. CONSERVATION & WASHINGTON, DC 20005 ENERGY) PROGRAM CLEAN WATER FUND1010 52-1043444 501C3 10,000 ENVIRONMENTAL **VERMONT AVE NW STE 400** (CLIMATE. CONSERVATION & WASHINGTON, DC 20005 <u>ENERGY) PROGRAM</u> COLORPO BOX 40991 84-1569021 501C3 30,000 OTHER -REPRODUCTIVE DENVER, CO 80204 JUSTICE

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States (e) A mount of non-(a) Name and address of **(b)** EIN (c) IRC Code section (d) Amount of cash (f) Method of (g) Description of (h) Purpose of grant organization if applicable grant cash valuation non-cash assistance or assistance or government assistance (book, FMV, appraisal, other) COLORADO CATTLEMEN'S 84-1317592 501C3 ENVIRONMENTAL 194,000 AGRICULTURAL LAND CLIMATE. TRUST8833 RALSTON RD CONSERVATION & ARVADA, CO 80002 ENERGY) PROGRAM COLORADO CIVIC 02-0758897 501C3 30,000 OTHER - TAX **ENGAGEMENT** REFORM ROUNDTABLEPO BOX 1620 DENVER, CO 80201 COLORADO 73-1651499 501C3 15,500 ENVIRONMENTAL CONSERVATION VOTERS CLIMATE. CONSERVATION & EDUCATION FUND1536 WYNKOOP ST 4-C ENERGY) PROGRAM DENVER, CO 80202 COLORADO 73-1651499 501C3 8,651 ENVIRONMENTAL CONSERVATION VOTERS CLIMATE. **EDUCATION FUND1536** CONSERVATION & ENERGY) PROGRAM WYNKOOP ST 4-C DENVER, CO 80202 COLORADO MOUNTAIN 84-0410760 501C3 25,000 ENVIRONMENTAL CLUB710 10TH ST SUITE CLIMATE. CONSERVATION & 200 GOLDEN, CO 80401 ENERGY) PROGRAM COLORADO WILDLIFE 84-0576376 501C3 11,800 ENVIRONMENTAL FEDERATION1410 GRANT CLIMATE. STREET C-313 CONSERVATION & ENERGY) PROGRAM DENVER, CO 80203 COMMON SENSE 59-3479821 501C3 25,000 OTHER -REPRODUCTIVE CHILDBIRTH INC213 S DILLARD ST SUITE 340 JUSTICE WINTER GARDEN FL 34787 CONSULTIVE GROUP ON 13-3431076 501C3 7,500 ENVIRONMENTAL **BIOLOGICAL DIVERSITY** CLIMATE. PO BOX 29361 CONSERVATION & ENERGY) PROGRAM SAN FRANCISCO.CA 94129 COREEL CENTRO130 W 39-2042797 501C3 4,000 OTHER -BRUCE ST 300 REPRODUCTIVE MILWAUKEE, WI 53204 DUSTICE COREEL CENTRO130 W 501C3 OTHER -39-2042797 15,000 BRUCE ST 300 REPRODUCTIVE MILWAUKEE, WI 53204 JUSTICE CRISIS ACTION866 26-4509207 501C3 26,200 GLOBAL UNITED NATIONS PLAZA DEVELOPMENT AND HEALTH PROGRAM STE 4018 NEW YORK, NY 10017 CRITERION INSTITUTE 27-3458737 501C3 10,000 ENVIRONMENTAL INC41 MADISON AVE STE (CLIMATE, CONSERVATION & 4000 NEW YORK, NY 10010 ENERGY) PROGRAM DEMOCRACY CORPS10 G 52-2146456 501C4 21,120 OTHER -STREET NE SUITE 500 NONPARTISAN CIVIC PARTICIPATION WASHINGTON, DC 20002 DEMOCRACY CORPS10 G 52-2146456 501C4 105,600 OTHER -STREET NE SUITE 500 NONPARTISAN CIVIC WASHINGTON, DC 20002 PARTICIPATION DEMOCRACY CORPS10 G 52-2146456 501C4 192,000 OTHER -STREET NE SUITE 500 NONPARTISAN WASHINGTON, DC 20002 CIVIC PARTICIPATION DISCOVER THE JOURNEY 20-5061130 501C3 15,000 GLOBAL 1718 MONROVIA AVE DEVELOPMENT AND HEALTH PROGRAM COSTA MESA, CA 92627 **FARTH ISLAND INSTITUTE** 501C3 ENVIRONMENTAL 94-2889684 50,000 1850 M STREET NW 1150 (CLIMATE, WASHINGTON, DC 20036 CONSERVATION & ENERGY) PROGRAM EARTH MAMA HEALING 27-3875959 C-CORP 10,000 OTHER -2251 FLORIN RD STE 20 REPRODUCTIVE SACRAMENTO, CA 95822 DUSTICE EARTHWORKS1612 K ST ENVIRONMENTAL 52-1557765 501C3 10,000 NW SUITE 808 KCLIMATE. WASHINGTON, DC 20006 CONSERVATION & ENERGY) PROGRAM EASTERN CONGO 45-4103655 501C3 250,490 IGLO BA L DEVELOPMENT AND INITIATIVE3417 FREMONT AVE N STE 221 HEALTH PROGRAM

SEATTLE, WA 98103

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States (e) A mount of non-(a) Name and address of **(b)** EIN (c) IRC Code section (d) Amount of cash (f) Method of (q) Description of (h) Purpose of grant organization if applicable arant cash valuation non-cash assistance or assistance or government assistance (book, FMV, appraisal, other) 45-4103655 501C3 100,000 EASTERN CONGO GLOBAL INITIATIVE3417 FREMONT DEVELOPMENT AND HEALTH PROGRAM AVE N STE 221 SEATTLE.WA 98103 EASTERN CONGO 45-4103655 501C3 20,000 GLOBAL INITIATIVE3417 FREMONT DEVELOPMENT AND AVE N STE 221 HEALTH PROGRAM SEATTLE, WA 98103 ELK RIVER LAND TRUSTPO 93-1289894 501C3 34,000 ENVIRONMENTAL BOX 1158 (CLIMATE, PORT ORFORD, OR 97465 CONSERVATION & ENERGY) PROGRAM **EVERY MOTHER COUNTS** 45-4102644 501C3 213,971 GLOBAL DEVELOPMENT AND 805 15TH ST NW STF 700 WASHINGTON, DC 20005 HEALTH PROGRAM **EXPERIMENTAL STATION** 32-0017985 501C3 10,000 OTHER - ACCESS TO 6100 S BLACKSTONE AVE NUTRITIOUS FOODS CHICAGO,IL 60637 FAITH ALOUDPO BOX 43-1258031 501C3 40,000 OTHER -NONPARTISAN 430070 ST LOUIS, MO 63143 CIVIC PARTICIPATION 30,000 OTHER -FAITH ALOUDPO BOX 43-1258031 501C3 430070 NONPARTISAN ST LOUIS, MO 63143 lcivic PARTICIPATION FAITH IN PUBLIC LIFE1101 20-3796596 501C3 100,000 EDUCATION **VERMONT AVE NW STE 200** PROGRAM WASHINGTON, DC 20005 FAY PENN ECONOMIC 25-1649514 501C3 25,000 ENVIRONMENTAL DEVELOPMENT COUNCIL CLIMATE. 1040 EBERLY WAY SUITE CONSERVATION & ENERGY) PROGRAM 200 LEMONT FRNC, PA 15456 OTHER - VIOLENCE FIREBACK AT GUN 45-4848020 C-CORP 169,029 VIOLENCE 1133 19TH REDUCTION STREET NW 4TH FLOOR WASHINGTON, DC 20036 FOREIGN POLICY 26-4392915 501C3 30,000 GLOBAL INITIATIVE11 DUPONT DEVELOPMENT AND HEALTH PROGRAM CIRCLE SUITE 325 WASHINGTON, DC 20036 FORESTETHICSONE ENVIRONMENTAL 501C3 94-3331587 40.000 HAIGHT STREET (CLIMATE, SAN FRANCISCO, CA CONSERVATION & ENERGY) PROGRAM 94102 FORESTETHICSONE 94-3331587 501C3 100,000 ENVIRONMENTAL HAIGHT STREET CLIMATE SAN FRANCISCO, CA CONSERVATION & ENERGY) PROGRAM 94102 FORESTETHICSONE 94-3331587 501C3 50,000 ENVIRONMENTAL HAIGHT STREET (CLIMATE, SAN FRANCISCO, CA CONSERVATION & 94102 ENERGY) PROGRAM FORESTETHICSONE 94-3331587 501C3 135,500 ENVIRONMENTAL HAIGHT STREET (CLIMATE, SAN FRANCISCO, CA CONSERVATION & 94102 ENERGY) PROGRAM FORWARD COMMUNITY 39-1815578 501C3 20,000 OTHER - ACCESS TO NUTRITIOUS FOODS INVESTMENTS211 S PATERSON STREET 160 MADISON, WI 53703 FORWARD TOGETHER1440 94-3311784 501C3 590,000 OTHER -REPRODUCTIVE **BROADWAY SUITE 301** OAKLAND.CA 94612 bustice FORWARD TOGETHER1440 94-3311784 501C3 12,500 OTHER -REPRODUCTIVE BROADWAY SUITE 301 OAKLAND, CA 94612 JUSTICE FRIENDS OF THE EARTH 23-7420660 501C3 35.000 ENVIRONMENTAL (CLIMATE, 1100 15TH ST NW 11TH FLOOR CONSERVATION & WASHINGTON, DC 20005 ENERGY) PROGRAM **FUNDERS NETWORK1215** 52-2098292 501C3 50,000

VEIRS MILL ROAD ROCKVILLE, MD 20851 IGLO BA L

DEVELOPMENT AND

HEALTH PROGRAM

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States (e) A mount of non-(a) Name and address of **(b)** EIN (c) IRC Code section (d) Amount of cash (f) Method of (a) Description of (h) Purpose of grant if applicable organization arant cash valuation non-cash assistance or assistance or government assistance (book, FMV, appraisal, other) GAIN FOUNDATIONPO BOX 95-4578963 501C3 32,692 GLOBAL DEVELOPMENT AND 139020 DALLAS, TX 75313 HEALTH PROGRAM 501C3 GLOBAL GLOBAL AGRICULTURE 36-2181969 118,000 DEVELOPMENT AND AND FOOD POLICY332 S MICHIGAN AVE SUITE HEALTH PROGRAM 1100 CHICAGO, IL 60604 GLOBAL IMPACT 26-2384030 501C3 GLOBAL 113.338 DEVELOPMENT AND INSTITUTE 208 E 58TH STREET FLOOR 3 HEALTH PROGRAM NEW YORK, NY 10022 GRASSROOTS 04-2791159 501C3 150,000 GLO BA L INTERNATIONAL179 DEVELOPMENT AND BOYLSTON ST 4TH FLOOR HEALTH PROGRAM BOSTON MA 02130 GROUNDSWELL 27-1493841 501C3 100,000 OTHER -INTERNATIONAL1215 REPRODUCTIVE KEARNEY ST NE JUSTICE. WASHINGTON, DC 20017 **HEAL AFRICAPO BOX 147** 501C3 20-4104936 5,000 IGLO BA L VASHON, WA 98272 DEVELOPMENT AND HEALTH PROGRAM HISPANIC ACCESS 27-2589206 501C3 51,000 ENVIRONMENTAL FOUNDATION1718 M (CLIMATE, CONSERVATION & STREET NW STE 150 WASHINGTON.DC 20036 ENERGY) PROGRAM HISPANIC CENTER OF 38-2265825 501C3 5,000 EDUCATION WESTERN MICHIGAN1204 PRO GRAM GRANDVILLE AVE SW TROY, MI 49504 501C3 HOPE AND GLORY 86-0970632 77,763 EDUCATION FOUNDATIONPO BOX PROGRAM 91692 TUSCON.AZ 85752 501C3 ILLINOIS CAUCUS FOR 36-3223988 35,000 OTHER -REPRODUCTIVE ADOLESCENT HEALTH2226 S WABASH AVE STE 900 bustice CHICAGO, IL 60604 IMPACT ARTS AND FILM C-CORP OTHER - ARTS 26-2384030 33,250 FUND1218 29TH ST NW WASHINGTON, DC 20007 INITIATIVE FOR GLOBAL 20-8003146 501C3 34,600 GLOBAL DEVELOPMENT1325 DEVELOPMENT AND FOURTH AVE STE 1005 HEALTH PROGRAM SEATTLE, WA 98101 INITIATIVE FOR GLOBAL 20-8003146 501C3 10,000 IGLO BA L DEVELOPMENT AND DEVELOPMENT1325 FOURTH AVE STE 1005 HEALTH PROGRAM SEATTLE, WA 98101 INSTITUTE FOR POLICY 52-0788947 501C3 50,000 ENVIRONMENTAL STUDIES733 15TH ST NW (CLIMATE, **SUITE 1020** CONSERVATION & WASHINGTON, DC 20005 ENERGY) PROGRAM INSTITUTE ON TAXATION 04-2688165 501C3 25,000 OTHER - TAX AND ECONOMIC POLICY REFORM 1616 P STEET NW 200 WASHINGTON, DC 20036 GLOBAL INTERNATIONAL CENTER 91-1837139 501C3 15,000 FOR TRADITIONAL DEVELOPMENT AND CHILDBEARINGPO BOX HEALTH PROGRAM 11923 PORTLAND, OR 97211 IPPF WORLDWIDE1129 501C3 GLOBAL 20-4365831 75,000 20TH ST NW 4TH FLOOR DEVELOPMENT AND WASHINGTON, DC 20036 HEALTH PROGRAM IPPF WORLDWIDE1129 20-4365831 501C3 200,000 **I**GLO BA L 20TH ST NW 4TH FLOOR DEVELOPMENT AND WASHINGTON, DC 20036 HEALTH PROGRAM KCTS TELEVISION401 501C3 GLOBAL 91-1221895 145,000 DEVELOPMENT AND MERCER STREET HEALTH PROGRAM SEATTLE, WA 98109 LEADERSHIP CENTER FOR 27-2163366 501C3 25,000 OTHER - TAX THE COMMON GOOD11 REFORM **DUPONT CIRCLE STE 240** WASHINGTON, DC 20036

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States (c) IRC Code section (d) Amount of cash (f) Method of (a) Name and address of **(b)** EIN (e) A mount of non-**(g)** Description of (h) Purpose of grant ıf applıcable valuation or assistance organization grant cash non-cash assistance (book, FMV, appraisal, or government assistance other) LEGAL COMMUNITY 94-3324402 501C3 100,000 OTHER - VIOLENCE AGAINST VIOLENCE 268 REDUCTION **BUSH STREET 555** SAN FRANCISCO.CA 94104 94-3080408 LEGAL SVCS FOR 501C3 23,438 OTHER -PRISONERS WITH REPRODUCTIVE CHILDREN1540 MARKET ST JUSTICE SUITE 490 SAN FRANCISCO, CA 94102 LEGAL SVCS FOR 94-3080408 501C3 30,000 OTHER -PRISONERS WITH REPRODUCTIVE CHILDREN1540 MARKET ST DUSTICE **SUITE 490** SAN FRANCISCO, CA 94102 501C3 LEGAL SVCS FOR 94-3080408 20,000 OTHER -PRISONERS WITH REPRODUCTIVE CHILDREN1540 MARKET ST JUSTICE SUITE 490 SAN FRANCISCO, CA 94102 LIVING STONES ACADEMY 501C3 27-1110309 11,850 EDUCATION 1250 SIGSBEE ST SE PROGRAM GRAND RAPIDS, MI 49506 501C3 OTHER - TAX MAINE PEOPLE'S 22-2586108 37,500 **RESOURCE CENTER565 I**REFORM CONGRESS STREET STE 200 PORTLAND, ME 04101 MAYOR'S FUND TO 13-3783906 501C3 75,000 OTHER - DISASTER RELIEF ADVANCE NEW YORK CITY 298 UNION STREET NEW YORK, NY 11231 MEDIA LITERACY PROJECT 85-0129165 501C3 25,000 OTHER -REPRODUCTIVE 6400 WYOMING BLVD NE ALBURQUERQUE, NM JUSTICE 87109 91-1148123 26,100 MERCY CORPSPO BOX 501C3 GLOBAL DEVELOPMENT AND 2669 PORTLAND, OR 97209 HEALTH PROGRAM 501C3 MESA LAND TRUST1006 74-2155358 ENVIRONMENTAL 60,000 (CLIMATE, MAIN STREET CONSERVATION & GRANT JUNCTION, CO 81601 ENERGY) PROGRAM MONTEZUMA LAND 31-1632961 501C3 255,000 ENVIRONMENTAL CONSERVANCYPO BOX (CLIMATE, CONSERVATION & 1522 CORTEZ,CO 81321 ENERGY) PROGRAM MONTEZUMA LAND 31-1632961 501C3 97,725 ENVIRONMENTAL CONSERVANCYPO BOX (CLIMATE, CONSERVATION & 1522 CORTEZ,CO 81321 ENERGY) PROGRAM MOVEMENT STRATEGY 20-1037643 501C3 10,000 REPRODUCTIVE CENTER436 14TH STREET SUITE 500 JUSTICE OAKLAND, CA 94612 MS FOUNDATION FOR 23-7252609 501C3 150,000 OTHER -WOMEN12 METROTECH REPRODUCTIVE CENTER 26TH FLOOR JUSTICE BROOKLYN, NY 11201 NATIONAL LATINA 52-1891734 501C3 25,000 OTHER -INSTITUTE FOR REPRODUCTIVE REPRODUCTIVE HEALTH50 JUSTICE **BROAD ST STE 1937** NEW YORK, NY 10004 NATIONAL LATINA 52-1891734 501C3 65,000 OTHER -REPRODUCTIVE INSTITUTE FOR REPRODUCTIVE HEALTH50 JUSTICE BROAD ST STE 1937 NEW YORK, NY 10004 NATIONAL ADVOCATES 52-2282183 501C3 50,000 OTHER -FOR PREGNANT WOMEN15 REPRODUCTIVE 36TH ST STE 901 USTICE NEW YORK, NY 10018 25,000 13-5562417 ENVIRONMENTAL NATIONAL COUNCIL OF 501C3 CHURCHES110 MARYLAND (CLIMATE, **AVE NE SUITE 108** CONSERVATION & ENERGY) PROGRAM WASHINGTON, DC 20002 NATIONAL HISPANIC 76-0745631 501C3 25,000 EDUCATION CHRISTIAN LEADERSHIP PROGRAM 12933 ALDERLEAF DRIVE SACRAMENTO, MD 20874 36-2755109 lother - tax NATIONAL PEOPLE'S 501C3 25,000 ACTION810 N MILWAUKEE REFORM AVE CHICAGO, IL 60642

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Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States (a) Name and address of **(b)** EIN (c) IRC Code section (d) Amount of cash (e) A mount of non-(f) Method of (g) Description of (h) Purpose of grant organization ıf applıcable grant cash valuation non-cash assistance or assistance or government assistance (book, FMV, appraisal, other) REGENTS OF THE 41-6042488 501C3 15,000 ENVIRONMENTAL UNIVERSITY OF CLIMATE. CONSERVATION & MINNESOTA 200 SE OAK ST ENERGY) PROGRAM 600 MINNEAPOLIS, MN 55455 ROCKY MOUNTAIN WILD 84-1512852 501C3 28,800 ENVIRONMENTAL 1536 WYNKOOP ST SUITE KCLIMATE. CONSERVATION & 303 ENERGY) PROGRAM DENVER, CO 80202 ROCKY MOUNTAIN WILD 84-1512852 501C3 25,000 ENVIRONMENTAL 1536 WYNKOOP ST SUITE (CLIMATE, CONSERVATION & 303 DENVER, CO 80202 ENERGY) PROGRAM SACRED BIRTH ANGELS 45-4613988 501C3 15,000 OTHER -FOUNDATION2800 PARK REPRODUCTIVE DUSTICE BLVD OAKLAND.CA 94610 SAVE THE CHILDREN2000 L 06-0726487 501C3 25.000 STREET NW SUITE 500 DEVELOPMENT AND WASHINGTON, DC 20036 HEALTH PROGRAM SERVING 25-1345815 501C3 50,000 EDUCATION LEADERSPITTSBURGH PROGRAM LEADERSHIP FOUNDATION 100 W STATION SQUARE DRIVE STE 625 PITTSBURGH.PA 15219 SIERRA CLUB FOUNDATION 501C3 10,000 ENVIRONMENTAL 94-6069890 50 F STREET NW SUITE 800 CLIMATE. WASHINGON, DC 20005 CONSERVATION & ENERGY) PROGRAM SIERRA CLUB PRAIRIE 501C3 ENVIRONMENTAL 94-6069890 25,000 CHAPTERPO BOX 131 (CLIMATE, URBANA,IL 61803 CONSERVATION & ENERGY) PROGRAM SILVIA RIVERA LAW 81-0640342 501C3 15,000 OTHER -PROJECT147 W 24TH REPRODUCTIVE STREET 5TH FLOOR DUSTICE NEW YORK, NY 10011 SISTER SONG INC1237 51-0544927 501C3 6.400 OTHER -RALPH DAVID ABERNATHY REPRODUCTIVE JUSTICE **BLVD SW** ATLANTA, GA 30310 SISTER SONG INC1237 51-0544927 501C3 25,000 OTHER -REPRODUCTIVE RALPH DAVID ABERNATHY **BLVD SW** JUSTICE ATLANTA, GA 30310 SOUTH COAST 501C3 ENVIRONMENTAL 33-1118832 12,000 WATERSHEDSPO BOX 1614 (CLIMATE, CONSERVATION & GOLD BEACH, OR 97444 EN<u>ERGY) PROGRAM</u> SOUTH END COMMUNITY FDUCATION 38-3038706 501C3 19,400 **OUTREACH MINISTRY 1545** PROGRAM BUCHANAN AVENUE SW GRAND RAPIDS, MI 49507 SPARK REPRODUCTIVE OTHER -58-1872316 501C3 44.000 JUSTICE NOW2048 HOSEA REPRODUCTIVE L WILLIAMS DR STE B DUSTICE ATLANTA, GA 30317 SPARK CAMP INC101 SAINT 45-2914993 501C3 OTHER -75,000 DOURNALISM DUNSTANS ROAD BALTIMORE, MD 21212 STEEPLETOWN 38-3246215 501C3 5.000 EDUCATION NEIGHBORHOOD SERVICES PROGRAM 671 DAVIS AVE NW GRAND RAPIDS, MI 49504 STRONG FAMILIES NEW 94-3311784 501C3 12,500 OTHER -MEXICO1440 BROADWAY REPRODUCTIVE DUSTICE STE 301 OAKLAND, CA 94612 TATIA ODEN FRENCH 16-1681646 501C3 5,000 ENVIRONMENTAL MEMORIAL FOUNDATION87 (CLIMATE,

20,000

26,000

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CONSERVATION & ENERGY) PROGRAM

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JUSTICE

HAMILTON PLACE

FAIRVIEW LANE

AVE SE

OAKLAND, CA 94612
TAXPAYERS FOR COMMON

SENSE651 PENNSYLVANIA

WASHINGTON, DC 20003 TEWA WOMEN UNITED 912

SANTA CRUZ, NM 87532

52-1941122

85-0480836

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States (f) Method of (a) Name and address of (c) IRC Code section (d) Amount of cash (e) A mount of non-**(b)** EIN (g) Description of (h) Purpose of grant organization if applicable grant cash valuation non-cash assistance or assistance (book, FMV, appraisal, or government assistance other) TEWA WOMEN UNITED912 85-0480836 501C3 15,000 OTHER -REPRODUCTIVE FAIRVIEW LANE SANTA CRUZ, NM 87532 JUSTICE THE ASPEN INSTITUTE 501C3 84-0399006 149,035 GLOBAL DEVELOPMENT AND ONE DUPONT CIRCLE NW HEALTH PROGRAM STE 700 WASHINGTON.DC 20036 THE CENTER FOR YOUNG 94-3227681 501C3 41,000 OTHER -WOMEN'S DEVELOPMENT REPRODUCTIVE 832 FOLSOM STREET 700 DUSTICE SAN FRANCISCO, CA 94107 THE FRESHWATER TRUST 93-0843521 501C3 40,000 ENVIRONMENTAL 65 SW YAMHILL 200 (CLIMATE, PORTLAND, OR 97204 CONSERVATION & ENERGY) PROGRAM THE GLOBAL FUND TO 98-0380092 501C3 60,000 GLOBAL FIGHT AIDSPO BOX 96618 DEVELOPMENT AND WASHINGTON, DC 20090 HEALTH PROGRAM THE GLOBAL FUND TO 98-0380092 501C3 100,000 GLOBAL DEVELOPMENT AND FIGHT AIDSPO BOX 96618 WASHINGTON, DC 20090 HEALTH PROGRAM ENVIRONMENTAL THE NATURE 501C3 53-0242652 35,000 CONSERVANCY OF (CLIMATE. CONSERVATION & OREGON821 SE 14TH AVENUE ENERGY) PROGRAM PORTLAND, OR 97214 THE OTHER WAY 38-2236821 501C3 5,000 EDUCATION MINISTRIES710 WEST PRO GRAM FULTON GRAND RAPIDS, MI 49504 THE PARTNERSHIP 52-2192070 501C3 500,000 ENVIRONMENTAL PROJECT1615 M ST NW (CLIMATE, WASHINGTON, DC 20036 CONSERVATION & ENERGY) PROGRAM THE PHILANTHROPY 27-1043897 501C3 40,000 GLOBAL WORKSHOP WEST 201 DEVELOPMENT AND CALIFORNIA STREET HEALTH PROGRAM **SUITE 630** SAN FRANCISCO.CA 94111 THE RULES FOUNDATION 46-1167555 C-CORP 242,500 GLOBAL 224 CENTRE STREET 6TH DEVELOPMENT AND FLOOR HEALTH PROGRAM NEW YORK, NY 10013 THE SIERRA CLUB 94-6069890 501C3 200,000 ENVIRONMENTAL FOUNDATION85 SECOND (CLIMATE, STREET STE 750 CONSERVATION & SAN FRANCISCO, CA ENERGY) PROGRAM THE UNIVERSITY OF OTHER - VIOLENCE 36-2177139 501C3 50.000 CHICAGO CRIME LAB55 REDUCTION EAST MONROE ST CHICAGO,IL 60603 THIRD WAVE FOUNDATION 501C3 50,000 OTHER -13-3670260 REPRODUCTIVE 220 EAST 23RD ST STE 509 bustice NEW YORK, NY 10010 TIDES FOUNDATIONPO 51-0198509 501C3 77,000 OTHER -HEALTHCARE BOX 29907 SAN FRANCISCO, CA 94129 TROUT UNLIMITED1300 38-1612715 501C3 ENVIRONMENTAL 30,000 NORTH 17TH ST STE 500 (CLIMATE, ARLINGTON, VA 22209 CONSERVATION & ENERGY) PROGRAM UNITED METHODIST 38-1360555 501C3 134,140 EDUCATION COMMUNITY HOUSE904 PROGRAM SHELDON AVE SE GRAND RAPIDS, MI 495071165 UNIVERSITY OF NOTRE 35-0868188 501C3 50,000 EDUCATION DAME107 CAROLE PROGRAM SANDNER HALL NOTRE DAME, IN 46566 UNIVERSITY OF 501C3 23-1352685 73,000 GLOBAL DEVELOPMENT AND PENNSYLVANIA3451 WALNUT STREET STE 305 HEALTH PROGRAM PHILADELPHIA, PA 191046305 US HEALTHFUL FOOD 501C3 OTHER - ACCESS TO 20-5806345 40,077 NUTRITIOUS FOODS COUNCIL 1201 CONNECTICUT AVE NW STE 300 WASHINGTON, DC 20036

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States (e) A mount of non-(a) Name and address of **(b)** EIN (c) IRC Code section (d) Amount of cash (f) Method of (g) Description of (h) Purpose of grant organization if applicable grant cash valuation non-cash assistance or assistance (book, FMV, appraisal, or government assistance other) USACTION EDUCATION 52-2214307 501C3 25,000 OTHER - TAX FUND1825 K ST NW STE REFORM 210 WASHINGTON, DC 20006 VITAL VOICES GLOBAL 52-2151557 501C3 50,000 GLOBAL DEVELOPMENT AND PARTNERSHIP1625 MASSACHUSETTS AVENUE HEALTH PROGRAM NW STE 300 WASHINGTON, DC 20036 WATER OF LIFE 37-1663170 501C3 EDUCATION 5.000 MINISTRIES811 WEALTHY PROGRAM ST SF GRAND RAPIDS, MI 49506 WEST VIRGINIA FREEPO 55-0715930 501C3 50,000 OTHER -REPRODUCTIVE BOX 11042 **JUSTICE** CHARLESTON, WV 25339 WESTERN COLORADO ENVIRONMENTAL 84-0837218 501C3 15,000 CONGRESSPO BOX 1931 (CLIMATE, GRAND JUNCTION, CO CONSERVATION & ENERGY) PROGRAM 81502 WESTERN CONSERVATION 33-1107506 501C3 ENVIRONMENTAL 580,000 FOUNDATION1536 CLIMATE. WYNKOOP ST SUITE 510 CONSERVATION & DENVER, CO 80202 ENERGY) PROGRAM WESTERN CONSERVATION 33-1107506 501C3 127,000 ENVIRONMENTAL FOUNDATION1536 (CLIMATE, WYNKOOP ST SUITE 510 CONSERVATION & DENVER, CO 80202 ENERGY) PROGRAM WESTERN RESOURCE 84-1113831 501C3 100,000 ENVIRONMENTAL ADVOCATES2260 (CLIMATE, BASELINE RD SUITE 200 CONSERVATION & BOULDER, CO 80302 ENERGY) PROGRAM WESTERN RESOURCE ENVIRONMENTAL 84-1113831 501C3 10,000 ADVOCATES2260 (CLIMATE, BASELINE RD SUITE 200 CONSERVATION & BOULDER, CO 80302 ENERGY) PROGRAM WESTERN STATES CENTER 93-0952137 501C3 35,000 OTHER - GENDER PO BOX 40305 DUSTICE PORTLAND, OR 97240 WINTER WILDLANDS ENVIRONMENTAL 82-0523471 501C3 7.500 ALLIANCE INC910 MAIN CLIMATE. STREET SUITE 235 CONSERVATION & BOISE, ID 83702 ENERGY) PROGRAM WOMEN'S FOUNDATION OF 501C3 OTHER -94-2752421 150,000 CALIFORNIA340 PINE ST REPRODUCTIVE STF 302 JUSTICE SAN FRANCISCO, CA 94104 WOMEN'S HEALTH OTHER -85-0227223 501C3 15.000 SERVICES901 WALAMEDA REPRODUCTIVE DUSTICE STF 25 SANTA FE, NM 87501 WOMEN DELIVER588 26-4462256 501C3 GLOBAL 125,000 BROADWAY STE 905 DEVELOPMENT AND HEALTH PROGRAM NEW YORK, NY 10012 WYOMING OUTDOOR ENVIRONMENTAL 83-0259411 501C3 5,000 COUNCIL262 LINCOLN ST (CLIMATE, LANDER, WY 82520 CONSERVATION & ENERGY) PROGRAM WYOMING OUTDOOR 83-0259411 501C3 20,000 ENVIRONMENTAL COUNCIL262 LINCOLN ST (CLIMATE, LANDER, WY 82520 CONSERVATION & ENERGY) PROGRAM WYOMING WILDLIFE ENVIRONMENTAL 501C3 23-7002578 25,000 FEDERATIONPO BOX 1312 (CLIMATE. CONSERVATION & LANDER, WY 82520 ENERGY) PROGRAM WYOMING WILDLIFE ENVIRONMENTAL 23-7002578 501C3 3,000 FEDERATIONPO BOX 1312 (CLIMATE, LANDER, WY 82520 CONSERVATION & FNFRGY) PROGRAM YOUNG WOMEN'S 61-1426655 501C3 34,000 OTHER -**EMPOWERMENT PROJECT** REPRODUCTIVE 2334 W LAWRENCE AVE JUSTICE SUITE 221 CHICAGO, IL 60625 YOUNG WOMEN UNITED 85-0481224 501C3 15,000 OTHER -120 MORNINGSIDE DR NE REPRODUCTIVE

ALBUQUERQUE, NM 87108

JUSTICE

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
YOUNG WOMEN UNITED 120 MORNINGSIDE DR NE ALBUQUERQUE,NM 87108	85-0481224	501C3	39,000				OTHER - REPRODUCTIVE JUSTICE
YOUNG WOMEN UNITED 120 MORNINGSIDE DR NE ALBUQUERQUE,NM 87108	85-0481224	501C3	25,000				OTHER - NONPARTISAN CIVIC PARTICIPATION
YOUNG WOMEN UNITED 120 MORNINGSIDE DR NE ALBUQUERQUE,NM 87108	85-0481224	501C3	25,000				OTHER - REPRODUCTIVE JUSTICE

DLN: 93493318093193

OMB No 1545-0047

Schedule J (Form 990)

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

Compensation Information

Open to Public Inspection

Department of the Treasury Internal Revenue Service

► Attach to Form 990. ► See separate instructions.

Name of the organization NEW VENTURE FUND

Employer identification number

20-5806345

Pa	Questions Regarding Compensation					
					Yes	No
1a	Check the appropriate box(es) if the organization provi					
	990, Part VII, Section A, line 1a Complete Part III to	o prov				
	First-class or charter travel Travel for companions	<u> </u>	Housing allowance or residence for personal use Payments for business use of personal residence			
	Tax idemnification and gross-up payments	<u>'</u>	Health or social club dues or initiation fees			
	Discretionary spending account	, -	Personal services (e.g., maid, chauffeur, chef)			
	, commenter, spending account	•				
b	If any of the boxes in line 1a are checked, did the orga	anızat	ion follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses des	cribed	l above? If "No," complete Part III to explain	1b		
2						
	directors, trustees, and the CEO/Executive Director,	regard	ding the items checked in line 1a?	2		
3	Indicate which, if any, of the following the filing organization's CEO (Executive Director, Chack all the					
	organization's CEO/Executive Director Check all that used by a related organization to establish compensat					
	Compensation committee	Г	Written employment contract			
	Independent compensation consultant	Ē	Compensation survey or study			
	Form 990 of other organizations	Γ	Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Pa or a related organization	rt VII	, Section A, line 1a with respect to the filing organization			
				_		
а	Receive a severance payment or change-of-control pa	•		4a		No
Ь	Participate in, or receive payment from, a supplement			4b		No
С	Participate in, or receive payment from, an equity-bas			4c		No
	If "Yes" to any of lines 4a-c, list the persons and prov	ride tri	le applicable amounts for each frem in Part III			
	Only 501(c)(3) and 501(c)(4) organizations only must	t comp	plete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, li					
	compensation contingent on the revenues of					
а	The organization?			5a		Νo
b	Any related organization?			5b		Νo
	If "Yes," to line 5a or 5b, describe in Part III					
6	For persons listed in Form 990, Part VII, Section A, li compensation contingent on the net earnings of	ine 1a	, did the organization pay or accrue any			
a	The organization?			6a		No
Ь	Any related organization?			6b		No
_	If "Yes," to line 6a or 6b, describe in Part III					
7	For persons listed in Form 990, Part VII, Section A, li payments not described in lines 5 and 6? If "Yes," de			7		Νo
8	Were any amounts reported in Form 990, Part VII, pa			–		
-	subject to the initial contract exception described in F					
	ın Part III			8		Νo
9	If "Yes" to line 8, did the organization also follow the r	ebutt	able presumption procedure described in Regulations			
	section 53 4958-6(c)?			9		

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

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

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

(A) Name and Title		(B) Breakdown of	W-2 and/or 1099-MIS	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation reported as deferred in prior Form 990	
		(i) Base compensation	(ii) Bonus & ıncentıve compensatıon	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)		
	(i) (ii)	157,000 0	0 0	0 0	4,770 0	4,093 0	165,863 0	0	

Schedule J (Form 990) 2012

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part for any additional information

Identifier Return Reference Explanation

Schedule J (Form 990) 2012

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493318093193

DLN: 93493318093193

OMB No 1545-0047

Schedule L

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Transactions with Interested Persons

► Complete if the organization answered
"Yes" on Form 990, Part IV, lines 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.

2012

Open to Public Inspection

Complete if the organization answered "Yes" on Form 990, Part IV, line 27. Complete if the organization answered "Yes" on Form 990, Part IV, line 27. Complete if the organization answered "Yes" on Form 990, Part IV, line 27. Complete if the organization answered "Yes" on Form 990, Part IV, line 27. Complete if the organization answered "Yes" on Form 990, Part IV, line 27. Complete if the organization answered "Yes" on Form 990, Part IV, line 27. Complete if the organization answered "Yes" on Form 990, Part IV, line 27. Complete if the organization answered "Yes" on Form 990, Part IV, line 27. Complete if the organization answered "Yes" on Form 990, Part IV, line 27. Complete if the organization answered "Yes" on Form 990, Part IV, line 27. Complete if the organization answered "Yes" on Form 990, Part IV, line 27. Complete if the organization answered "Yes" on Form 990, Part IV, line 27. Complete if the organization answered "Yes" on Form 990, Part IV, line 27. Complete if the organization answered "Yes" on Form 990, Part IV, line 27. Complete if the organization answered "Yes" on Form 990, Part IV, line 27. Complete if the organization answered "Yes" on Form 990, Part IV, line 27. Complete if the organization answered "Yes" on Form 990, Part IV, line 27. Complete if the organization answered "Yes" on Form 990, Part IV, line 27. Complete if the organization answered "Yes" on Form 990, Part IV, line 27. Complete if the organization answered "Yes" on Form 990, Part IV, line 27. Complete if the organization answered "Yes" on Form 990, Part IV, line 27. Complete if the organization answered "Yes" on Form 990, Part IV, line 27. Complete if the organization answered "Yes" on Form 990, Part IV, line 27. Complete if the organization answered "Yes" on Form 990, Part IV, line 27. Complete if the organization answered "Yes" on Form 990, Part IV, line 27. Complete if the organization answered "Yes" on Form 990, Part IV, line 27. Complete if the or	Name of the orga NEW VENTURE FUND							Em	ploye	r ident if	fication	number	
Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b 1 (a) Name of disqualified person (b) Relationship between disqualified person and organization 2 Enter the amount of tax incurred by organization managers or disqualified persons during the year under section 4958				_		<u>_</u>							
(a) Name of disqualified person (b) Relationship between disqualified person and organization (c) Description of transaction (d) Corrected? Yes No Ves No Yes Yes No Yes No Yes No Yes Yes No Yes Ye												0.5	
2 Enter the amount of tax incurred by organization managers or disqualified persons during the year under section 4958													ected?
2 Enter the amount of tax incurred by organization managers or disqualified persons during the year under section 4958. 3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization. Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a, or Form 990, Part IV, line 26, or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22 (a) Name of (b) Relationship (c) Purpose of assistance person To From Grants or Assistance Benefitting Interested Persons. Complete if the organization answered "Yes" on Form 990, Part IV, line 27. (a) Name of interested person and the service of the organization of loan or form the organization of loan organization organization of loan organization of loan organization organiz	1 (a) itame (or aroquamica pers					(6) 5 6 5 6 1 1	p (1011 0	i ciano	action			
## Senter the amount of tax, if any, on line 2, above, reimbursed by the organization													
## Senter the amount of tax, if any, on line 2, above, reimbursed by the organization													
## Senter the amount of tax, if any, on line 2, above, reimbursed by the organization													
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A Enter the amount of tax, if any, on line 2, above, reimbursed by the organization													
3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization													
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A Enter the amount of tax, if any, on line 2, above, reimbursed by the organization													
A Enter the amount of tax, if any, on line 2, above, reimbursed by the organization													
## Senter the amount of tax, if any, on line 2, above, reimbursed by the organization						I							
Part II Loans to and/or From Interested Persons. Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a, or Form 990, Part IV, line 26, or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22 (a) Name of interested person (b) Relationship (c) Purpose of loan or from the organization? To From (e) Original principal amount or form yes no		ount of tax incurre	ed by organiza	ation mana	igers or disc	qualified perso	ns during the	yearı	ınder s	ection			
Part III									•	- \$			
Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a, or Form 990, Part IV, line 26, or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22 (a) Name of interested person Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a, or Form 990, Part IV, line 26, or if the organization reported an amount on Form 990, Part IV, line 26, or if the organization reported an amount on Form 990, Part IV, line 26, or if the organization reported an amount on Form 990, Part IV, line 26, or if the organization reported an amount on Form 990, Part IV, line 26, or if the organization answered "Yes" on Form 990, Part IV, line 27. (a) Name of interested person and the organization answered "Yes" on Form 990, Part IV, line 27. (b) Relationship between interested person and the organization or form 990, Part IV, line 27. (c) A mount of assistance organization (d) Type of assistance organization (e) Purpose of assistance organization and the organization organization and the organization and	3 Enter the am	ount of tax, if any,	, on line ∠, ab	ove, reimb	ursea by th	e organization			•	- \$			
(a) Name of Interested person (b) Relationship kith organization (c) Purpose of assistance (d) Loan to or from the organization (e) Original principal amount (f) Balance due (g) In default? (h) Approved by board or committee? (i) Written agreement? (ii) Written agreement? (iii) Written agreement (iii) Written agreem	Part II Loai	ns to and/or F	rom Inter	ested Po	ersons.								
(a) Name of interested person with organization of loan person with organization of loan person with organization? (b) Relationship of loan of loan or from the organization? To From Promitive organization? To From Promitive organization? To From Prom Promitive organization or from the organization? To From Prom Promitive? To From Prom Promitive? Total Part III Grants or Assistance Benefitting Interested Persons. Complete if the organization answered "Yes" on Form 990, Part IV, line 27. (a) Name of interested person and the principal amount of assistance person of a sistance person and the principal amount of the p							ne 38a, or Fo	rm 99	0, Par	t IV, lın	e 26, o	r ıf the	
Interested person with organization of loan or from the organization? To From Promitive? To From Promitive? Yes No Yes No Yes No Total Part III Grants or Assistance Benefitting Interested Persons. Complete if the organization answered "Yes" on Form 990, Part IV, line 27. (a) Name of interested person and the organization and the organiz							(6) 5					1 (23)4/	
person organization? amount by board or committee? To From Yes No Yes No Yes No Total Part III Grants or Assistance Benefitting Interested Persons. Complete if the organization answered "Yes" on Form 990, Part IV, line 27. (a) Name of interested person and the interested person and the person interested person and the inter		1	1 2 2										
To From Yes No Yes No Yes No To No Yes No Ye								""					
Total Cants or Assistance Benefitting Interested Persons. Complete if the organization answered "Yes" on Form 990, Part IV, line 27. Cants of Interested Persons on Form 990, Part IV, line 27. Cants of Interested Person on Form 990, Part IV, line 990, Par						_			1		1	 	
Complete if the organization answered "Yes" on Form 990, Part IV, line 27. (a) Name of interested person (b) Relationship between interested person and the person (c) Amount of assistance (d) Type of assistance (e) Purpose of assistance				То	From			Yes	No	Yes	No	Yes	No
Complete if the organization answered "Yes" on Form 990, Part IV, line 27. (a) Name of interested person (b) Relationship between interested person and the person (c) Amount of assistance (d) Type of assistance (e) Purpose of assistance											<u> </u>	_	
Complete if the organization answered "Yes" on Form 990, Part IV, line 27. (a) Name of interested person (b) Relationship between interested person and the person (c) Amount of assistance (d) Type of assistance (e) Purpose of assistance											<u> </u>	_	
Part III Grants or Assistance Benefitting Interested Persons. Complete if the organization answered "Yes" on Form 990, Part IV, line 27. (a) Name of interested person (b) Relationship between interested person and the (c) Amount of assistance (d) Type of assistance (e) Purpose of assistance (e) Purpose of assistance (e) Purpose of assistance (f) Type of												_	
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Part III Grants or Assistance Benefitting Interested Persons. Complete if the organization answered "Yes" on Form 990, Part IV, line 27. (a) Name of interested person (b) Relationship between interested person and the (c) Amount of assistance (d) Type of assistance (e) Purpose of assistance (e) Purpose of assistance (e) Purpose of assistance (f) Type of												_	
Part III Grants or Assistance Benefitting Interested Persons. Complete if the organization answered "Yes" on Form 990, Part IV, line 27. (a) Name of interested person (b) Relationship between interested person and the (c) Amount of assistance (d) Type of assistance (e) Purpose of assistance (e) Pu	 Гotal		I	<u> </u>		1			l		<u> </u>	7	
Complete if the organization answered "Yes" on Form 990, Part IV, line 27. (a) Name of interested person interested person and the person (b) Relationship between interested person and the person and the person (c) Amount of assistance (d) Type of assistance (e) Purpose of assistance (e) Purpose of assistance (figure 1) (h) Type of assistance (h) Type of assistanc		ts or Assistan	ce Benefit		erested F	Persons.		_		ı			
(a) Name of interested person and the (b) Relationship between interested person and the (c) A mount of assistance (d) Type of assistance (e) Purpose of assistance							IV, line 27.						
		rested (b) Re	lationship bet	tween (c					tance	(e)	Purpos	e of assi	stance
	person			nd the									
organization			organization										

Part W Business Transactions I					
Complete if the organizatio	n answered "Yes" on I	Form 990, Part IV, lın	e 28a, 28b, or 28c.		
(a) Name of interested person	(b) Relationship between interested person and the organization	(c) A mount of transaction	(d) Description of transaction	(e) Sharing of organization revenues?	
				Yes	No
(1) ARABELLA ADVISORS LLC	ENTITY MORE THAN 35% OWNED BY ERIC KESSLER-PRESIDENT		SPECIFICALLY, ARABELLA ADVISORS PROVIDED 1) STAFF FOR NVF PROJECTS, 2) OPERATIONAL SUPPORT IN MANAGING THE ORGANIZATION AND 3) SUPPLEMENTAL CONSULTING SUPPORT FOR SOME NVF PROJECTS		Νο

Part V Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule L (see instructions)

Identifier Return Reference Explanation

Schedule L (Form 990 or 990-EZ) 2012

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DLN: 93493318093193

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

SCHEDULE M

(Form 990)

▶Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. ► Attach to Form 990.

Noncash Contributions

Name of the organization NEW VENTURE FUND

Employer identification number

Pa	rt I Types of Property			.	20-3806343			
		(a) Check If applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line	(d Method of d noncash contrib	etermı		ts
1	Art—Works of art			19				
	Art—Historical treasures							
	Art—Fractional interests							
	Books and publications							
	Clothing and household goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities—Publicly traded .	Х	4	102,642	IMMEDIATE SALE	PROC	EEDS	
10	Securities—Closely held stock .							
11	Securities—Partnership, LLC, or trust interests							
12	Securities—Miscellaneous							
13	Qualified conservation contribution—Historic structures							
14	Qualified conservation contribution—Other							
15	Real estate—Residential .							
16	Real estate—Commercial							
17	Real estate—Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies .							
	Taxidermy							
22	Historical artifacts							
	Scientific specimens							
	Archeological artifacts							
	O ther ► ()							
	O ther ►()							
	O ther ▶()							
	Other ► ()			•				
29	Number of Forms 8283 received for which the organization comple				29		V	
302	During the year, did the organiza	ition receiv	e hy contribution any prope	erty reported in Part I lines	1-28 that it		Yes	No
Jou	must hold for at least three year							
	for exempt purposes for the enti				d to be used	20-		No
L						30a		
о 31	If "Yes," describe the arrangement of the organization have a gif			review of any non-standard	contributions?	31	Yes	
32=	Does the organization hire or us							
	contributions?		· · · · · · · ·			32a		No
b	If "Yes," describe in Part II							
33	If the organization did not report describe in Part II	an amount	ın column (c) for a type of	property for which column (a) is checked,			

Page 2

Schedule M	(Form 990) (201:
Part II	Supplem

Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

Identifier Return Reference Explanation

Schedule M (Form 990) (2012)

2042

2012

OMB No 1545-0047

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

Open to Public Inspection

Name of the organization NEW VENTURE FUND **Employer identification number**

20-5806345

ldentifier	Return Reference	Explanation
NEW PROGRAM SERVICES	FORM 990, PART III, LINE 2	IN 2012 NVF ADDED FORTY-TWO NEW PROJECTS A FEW OF THE MAJOR PROJECTS INCLUDE SUSTAINABLE AGRICULTURE AND FOOD SYSTEMS FUNDERS, WHICH AIMS TO BRING TOGETHER FOUNDATIONS AND PARTNERS CONCERNED ABOUT SUSTAINABILITY AND FOOD SYSTEMS, INTERNATIONAL FUND TO AMPLIFY AGRO-ECOLOGICAL SOLUTIONS, WHICH IS AN INNOVATIVE MULTI-DONOR FUND THAT SUPPORTS LOCAL FARMERS AND INDIGENOUS COMMUNITIES AROUND THE WORLD TO SUSTAIN VIABLE FOOD SYSTEMS, PROMOTE ECONOMIC WELL-BEING, AND PROTECT THE ENVIRONMENT, WASH ADVOCATES, WHICH FOCUSES ON ADVOCATING FOR HEALTHY AND SUSTAINABLE WATER, SANITATION AND HY GIENE STANDARDS IN DEVELOPING COUNTRIES IN AFRICA, ASIA AND LATIN AMERICA, AMERICANS FOR TAX FAIRNESS, WHICH ADVOCATES ON FEDERAL BUDGET ISSUES, AND COMMON CORE COMMUNICATIONS COLLABORATIVE, WHICH IS A MULTI-DONOR FUND SEEKING TO INVEST IN NATIONAL, REGIONAL, AND STATE COMMUNICATIONS THAT BUILD SUPPORT FOR IMPLEMENTING COMMON CORE STATE EDUCATION STANDARDS
CHANGES IN PROGRAM SERVICES	FORM 990, PART III, LINE 3	THE ORGANIZATION HAS DISCONTINUED OR PUT ON HOLD CERTAIN PROJECTS
	FORM 990, PART VI, SECTION A, LINE 3	NEW VENTURE FUND HAS AN ADMINISTRATIVE SERVICES AGREEMENT WITH ARABELLA ADVISORS DURING THE YEAR, NEW VENTURE FUND PAID TO ARABELLA ADVISORS \$4,952,612 FOR MANAGEMENT, ADMINISTRATIVE PERSONNEL, CONSULTING SERVICES, AND REIMBURSABLE EXPENSES
	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 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
OTHER FEES	FORM 990, PART IX, LINE 11G	PROJECT MANAGEMENT PROGRAM SERVICE EXPENSES 3,412,288 MANAGEMENT AND GENERAL EXPENSES 54,877 FUNDRAISING EXPENSES 68,286 TOTAL EXPENSES 3,535,451 RESEARCH ASSISTANCE PROGRAM SERVICE EXPENSES 2,631,973 MANAGEMENT AND GENERAL EXPENSES 42,328 FUNDRAISING EXPENSES 52,671 TOTAL EXPENSES 2,726,972 COMMUNICATIONS CONSULTANTS PROGRAM SERVICE EXPENSES 2,424,698 MANAGEMENT AND GENERAL EXPENSES 38,995 FUNDRAISING EXPENSES 48,523 TOTAL EXPENSES 2,512,216 TECHNICAL ASSISTANCE PROGRAM SERVICE EXPENSES 1,441,699 MANAGEMENT AND GENERAL EXPENSES 23,186 FUNDRAISING EXPENSES 28,851 TOTAL EXPENSES 1,493,736 OTHER PROFESSIONAL FEES PROGRAM SERVICE EXPENSES 804,021 MANAGEMENT AND GENERAL EXPENSES 12,930 FUNDRAISING EXPENSES 16,090 TOTAL EXPENSES 833,041