

Form **990**
Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

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

Do not enter social security numbers on this form as it may be made public.

Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047
2019
Open to Public Inspection

A For the **2019** calendar year, or tax year beginning **01-01-2019**, and ending **12-31-2019**

B Check if applicable:
 Address change
 Name change
 Initial return
 Final return/terminated
 Amended return
 Application pending

C Name of organization
NONPROFIT FINANCE FUND

Doing business as

Number and street (or P.O. box if mail is not delivered to street address) Room/suite
5 HANOVER SQUARE 9TH FL

City or town, state or province, country, and ZIP or foreign postal code
NEW YORK, NY 10004

D Employer identification number
13-3238657

E Telephone number
(212) 868-6710

G Gross receipts \$ 22,599,677

F Name and address of principal officer:
ANTONY BUGG-LEVINE
5 HANOVER SQUARE 9TH FL
NEW YORK, NY 10004

H(a) Is this a group return for subordinates? Yes No
H(b) Are all subordinates included? Yes No
If "No," attach a list. (see instructions)
H(c) Group exemption number ▶

I Tax-exempt status: 501(c)(3) 501(c) () (insert no.) 4947(a)(1) or 527

J Website: ▶ WWW.NONPROFITFINANCEFUND.ORG

K Form of organization: Corporation Trust Association Other ▶

L Year of formation: 1984

M State of legal domicile: NY

Part I Summary

1 Briefly describe the organization's mission or most significant activities:
SUPPORTS MISSION-DRIVEN ORGANIZATIONS WITH FINANCING, ADVICE AND KNOWLEDGE.

2 Check this box if the organization discontinued its operations or disposed of more than 25% of its net assets.

3 Number of voting members of the governing body (Part VI, line 1a)	3	13
4 Number of independent voting members of the governing body (Part VI, line 1b)	4	12
5 Total number of individuals employed in calendar year 2019 (Part V, line 2a)	5	100
6 Total number of volunteers (estimate if necessary)	6	17
7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
b Net unrelated business taxable income from Form 990-T, line 39	7b	0

	Prior Year	Current Year
8 Contributions and grants (Part VIII, line 1h)	9,460,209	9,858,573
9 Program service revenue (Part VIII, line 2g)	13,807,587	12,614,257
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	13,636	26,101
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	2,641	22,826
12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	23,284,073	22,521,757
13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)	3,779,322	981,082
14 Benefits paid to or for members (Part IX, column (A), line 4)	0	0
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	12,173,200	11,729,713
16a Professional fundraising fees (Part IX, column (A), line 11e)	0	0
b Total fundraising expenses (Part IX, column (D), line 25) ▶ 1,577,232		
17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	7,193,137	11,031,970
18 Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	23,145,659	23,742,765
19 Revenue less expenses. Subtract line 18 from line 12	138,414	-1,221,008
	Beginning of Current Year	End of Year
20 Total assets (Part X, line 16)	156,563,693	192,260,531
21 Total liabilities (Part X, line 26)	110,595,656	147,647,674
22 Net assets or fund balances. Subtract line 21 from line 20	45,968,037	44,612,857

Part II Signature Block

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

Sign Here *****
Signature of officer
Date 2020-10-26
ANTONY BUGG-LEVINE PRESIDENT/CEO
Type or print name and title

Paid Preparer Use Only
Print/Type preparer's name Preparer's signature Date 2020-10-26 Check if self-employed PTIN P00543209
Firm's name ▶ PKF O'CONNOR DAVIES LLP Firm's EIN ▶ 27-1728945
Firm's address ▶ 665 FIFTH AVENUE Phone no. (212) 286-2600
NEW YORK, NY 10022

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission:

NONPROFIT FINANCE FUND (NFF) UNLOCKS THE POTENTIAL OF MISSION DRIVEN ORGANIZATIONS THROUGH TAILORED INVESTMENTS, STRATEGIC ADVICE AND ACCESSIBLE INSIGHTS. WE WORK TOWARD A MORE JUST AND VIBRANT SOCIETY BY HELPING NONPROFITS WITH FINANCING TO INVEST IN DELIVERING ON THEIR MISSIONS; CONSULTING THAT HELPS LEADERS BEST PUT MONEY TO WORK FOR SOCIAL GOOD; AND LEARNING THAT HELPS ILLUMINATE PATHS TO SOLVING COMPLEX SOCIAL ISSUES.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes No
If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes No
If "Yes," describe these changes on Schedule O.

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

4a (Code:) (Expenses \$ 18,725,902 including grants of \$ 981,082) (Revenue \$ 12,614,257)
See Additional Data

4b (Code:) (Expenses \$ including grants of \$) (Revenue \$)

4c (Code:) (Expenses \$ including grants of \$) (Revenue \$)

4d Other program services (Describe in Schedule O.)
(Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses ▶ 18,725,902

Part IV Checklist of Required Schedules

		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	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		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	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		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I		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		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III		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	Yes	
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		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.		
11a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	Yes	
11b	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		No
11c	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	Yes	
11d	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		No
11e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X		No
11f	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	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	Yes	
12b	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		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?		No
14b	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		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV		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)		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II		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		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H		No
20b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	Yes	

Part IV Checklist of Required Schedules (continued)

		Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>		No
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>		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? <i>If "Yes," complete Schedule L, Part I</i>		No
26	Did the organization report any amount on Part X, line 5 or 22 for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i>		No
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>		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):		
a	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If "Yes," complete Schedule L, Part IV</i>		No
b	A family member of any individual described in line 28a? <i>If "Yes," complete Schedule L, Part IV</i>		No
c	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? <i>If "Yes," complete Schedule L, Part IV</i>		No
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>		No
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	Yes	
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>		No
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		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? <i>If "Yes," complete Schedule R, Part VI</i>		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.	Yes	

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		

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



Section A. Governing Body and Management

Table with 5 columns: Question, 1a, 1b, Yes, No. Rows include: 1a Enter the number of voting members... 13; 1b Enter the number of voting members included in line 1a... 12; 2 Did any officer, director, trustee, or key employee have a family relationship... No; 3 Did the organization delegate control over management duties... No; 4 Did the organization make any significant changes to its governing documents... No; 5 Did the organization become aware during the year of a significant diversion of the organization's assets? No; 6 Did the organization have members or stockholders? 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? No; 7b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? No; 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 8a The governing body? Yes; 8b Each committee with authority to act on behalf of the governing body? 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? No

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

Table with 5 columns: Question, Yes, No. Rows include: 10a Did the organization have local chapters, branches, or affiliates? No; 10b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?; 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Yes; 11b Describe in Schedule O the process, if any, used by the organization to review this Form 990.; 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 Yes; 12b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Yes; 12c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Yes; 13 Did the organization have a written whistleblower policy? Yes; 14 Did the organization have a written document retention and destruction policy? Yes; 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? 15a The organization's CEO, Executive Director, or top management official Yes; 15b Other officers or key employees of the organization Yes; 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? No; 16b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed CA, IL, NJ, NY, PA, MA, MI
18 Section 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
[] Own website [] Another's website [] Upon request [] Other (explain in Schedule O)
19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
20 State the name, address, and telephone number of the person who possesses the organization's books and records: KRISTINA DIXON CFO 5 HANOVER SQUARE 9TH FLOOR NEW YORK, NY 10004 (213) 623-7001

Part VIII Statement of Revenue

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

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns	1a 200,000			
	b Membership dues	1b			
	c Fundraising events	1c			
	d Related organizations	1d			
	e Government grants (contributions)	1e 3,823,019			
	f All other contributions, gifts, grants, and similar amounts not included above	1f 5,835,554			
	g Noncash contributions included in lines 1a - 1f:\$	1g			
	h Total. Add lines 1a-1f		9,858,573		

Program Service Revenue			Business Code			
	2a INTEREST ON LOANS		900099	8,832,277	8,832,277	
b LOAN AND FINAN. FEES		900099	2,292,409	2,292,409		
c PRGM & CONTRACT FEES		900099	1,489,571	1,489,571		
d						
e						
f All other program service revenue.						
g Total. Add lines 2a-2f.			12,614,257			

Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)			19,967			19,967	
	4 Income from investment of tax-exempt bond proceeds							
	5 Royalties							
	6a Gross rents	6a	(i) Real	2,120				
			(ii) Personal					
		b Less: rental expenses	6b	0				
		c Rental income or (loss)	6c	2,120				
	d Net rental income or (loss)			2,120			2,120	
	7a Gross amount from sales of assets other than inventory	7a	(i) Securities	84,054				
			(ii) Other					
		b Less: cost or other basis and sales expenses	7b	77,920				
		c Gain or (loss)	7c	6,134				
	d Net gain or (loss)			6,134			6,134	
	8a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	8a						
	b Less: direct expenses	8b						
	c Net income or (loss) from fundraising events							
	9a Gross income from gaming activities. See Part IV, line 19	9a						
	b Less: direct expenses	9b						
	c Net income or (loss) from gaming activities							
	10a Gross sales of inventory, less returns and allowances	10a						
b Less: cost of goods sold	10b							
c Net income or (loss) from sales of inventory								
Miscellaneous Revenue	Business Code							
11a TAX ABATEMENT	900099	15,528				15,528		
b PRINCIPAL REPAYMENTS FROM LOANS	900099	5,171				5,171		
c OTHER REVENUE	900099	7				7		
d All other revenue								
e Total. Add lines 11a-11d		20,706						
12 Total revenue. See instructions		22,521,757	12,614,257	0		48,927		

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	981,082	981,082		
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16.				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	1,607,837	724,902	609,909	273,026
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	8,008,435	5,699,232	1,589,451	719,752
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	440,645	296,177	99,705	44,763
9 Other employee benefits	978,771	697,272	197,976	83,523
10 Payroll taxes	694,025	478,403	143,318	72,304
11 Fees for services (non-employees):				
a Management	272,284	200,359	71,925	
b Legal	56,626	15,456	41,170	
c Accounting	72,200	40,071	12,274	19,855
d Lobbying	9,250	9,250		
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	466,481	463,630	2,851	
12 Advertising and promotion	2,751	2,631	120	
13 Office expenses	193,459	145,551	47,329	579
14 Information technology	222,454	136,185	41,464	44,805
15 Royalties				
16 Occupancy	1,140,014	730,321	239,699	169,994
17 Travel	629,580	379,889	164,000	85,691
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	21,663	19,663	1,340	660
20 Interest	3,448,791	3,448,791		
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	370,994	245,512	74,926	50,556
23 Insurance	86,032	56,933	17,375	11,724
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 UNRELATED BUSN INC EXP	17,730		17,730	
b PROVISION FOR LOAN LOSS	3,798,210	3,798,210		
c STAFF RECRUITING/TRAINI	117,438	69,676	47,762	
d MAINTENANCE & REPAIRS	37,601	29,928	7,673	
e All other expenses	68,412	56,778	11,634	
25 Total functional expenses. Add lines 1 through 24e	23,742,765	18,725,902	3,439,631	1,577,232
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720).				

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year
Assets	1 Cash—non-interest-bearing	12,644,489	1	17,553,999
	2 Savings and temporary cash investments	1,144,306	2	4,218,312
	3 Pledges and grants receivable, net	3,238,612	3	4,516,903
	4 Accounts receivable, net	2,790,748	4	4,000,014
	5 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	243,284	9	266,951
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	4,062,540		
	b Less: accumulated depreciation	1,870,045	2,486,362	10c 2,192,495
	11 Investments—publicly traded securities		11	
	12 Investments—other securities. See Part IV, line 11	96,542	12	17,945
	13 Investments—program-related. See Part IV, line 11	133,829,216	13	150,163,778
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11	90,134	15	9,330,134
16 Total assets. Add lines 1 through 15 (must equal line 34)	156,563,693	16	192,260,531	
Liabilities	17 Accounts payable and accrued expenses	2,307,760	17	2,592,367
	18 Grants payable		18	
	19 Deferred revenue	1,778,904	19	11,021,315
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D	86,242	21	86,242
	22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22	
	23 Secured mortgages and notes payable to unrelated third parties	106,422,750	23	133,947,750
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17 - 24). Complete Part X of Schedule D		25	
	26 Total liabilities. Add lines 17 through 25	110,595,656	26	147,647,674
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions	28,028,113	27	25,676,514
	28 Net assets with donor restrictions	17,939,924	28	18,936,343
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.			
	29 Capital stock or trust principal, or current funds		29	
	30 Paid-in or capital surplus, or land, building or equipment fund		30	
	31 Retained earnings, endowment, accumulated income, or other funds		31	
32 Total net assets or fund balances	45,968,037	32	44,612,857	
33 Total liabilities and net assets/fund balances	156,563,693	33	192,260,531	

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	22,521,757
2	Total expenses (must equal Part IX, column (A), line 25)	2	23,742,765
3	Revenue less expenses. Subtract line 2 from line 1	3	-1,221,008
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	45,968,037
5	Net unrealized gains (losses) on investments	5	15,828
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	-150,000
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	44,612,857

Part XII Financial Statements and Reporting

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

		Yes	No
<p>1 Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____</p> <p>If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.</p>			
<p>2a Were the organization's financial statements compiled or reviewed by an independent accountant?</p> <p>If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:</p> <p><input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis</p>	2a		No
<p>b Were the organization's financial statements audited by an independent accountant?</p> <p>If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:</p> <p><input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis</p>	2b	Yes	
<p>c If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?</p> <p>If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.</p>	2c	Yes	
<p>3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?</p>	3a	Yes	
<p>b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.</p>	3b	Yes	

Software ID:**Software Version:****EIN:** 13-3238657**Name:** NONPROFIT FINANCE FUND

Form 990 (2019)

Form 990, Part III, Line 4a:

NONPROFIT FINANCE FUND (NFF) UNLOCKS THE POTENTIAL OF MISSION DRIVEN ORGANIZATIONS THROUGH TAILORED INVESTMENTS, STRATEGIC ADVICE AND ACCESSIBLE INSIGHTS. WE WORK TOWARD A MORE JUST AND VIBRANT SOCIETY BY HELPING NONPROFITS WITH FINANCING TO INVEST IN DELIVERING ON THEIR MISSIONS; CONSULTING THAT HELPS LEADERS BEST PUT MONEY TO WORK FOR SOCIAL GOOD; AND LEARNING THAT HELPS ILLUMINATE PATHS TO SOLVING COMPLEX SOCIAL ISSUES. TAILORED INVESTMENTS: AS A NATIONAL COMMUNITY DEVELOPMENT FINANCIAL INSTITUTION (CDFI) AND LONGTIME IMPACT INVESTOR, NFF PROVIDES FINANCING EXCLUSIVELY TO MISSION-DRIVEN ORGANIZATIONS, INCLUDING NONPROFITS AND SOCIAL ENTERPRISES, WHICH WORK TO IMPROVE LIVES OF LOW-INCOME PEOPLE AND LOW-INCOME COMMUNITIES. WE DO THIS BY AGGREGATING CAPITAL FROM A VARIETY OF SOURCES, INCLUDING BANKS, FOUNDATIONS AND GOVERNMENT, AND USING THAT CAPITAL TO PROVIDE A RANGE OF FINANCIAL PRODUCTS, INCLUDING LOANS, LINES OF CREDIT AND NEW MARKETS TAX CREDITS, AMONG OTHERS. OUR BORROWERS USE OUR FINANCING TO UNDERTAKE FACILITY PROJECTS AND SMOOTH AND MANAGE CASH FLOW, ENABLING THEM TO WORK WITH MORE CLIENTS, EXPAND THE BREADTH OF SERVICES OFFERED, AND DELIVER MORE INTEGRATED SERVICES. IN 2019, NFF CLOSED 29 LOANS TO 25 ORGANIZATIONS TOTALING \$66.1 MILLION AND MANAGED A \$324.3 MILLION PORTFOLIO OF LOANS TO EDUCATIONAL INSTITUTIONS, HEALTH CENTERS, HUMAN SERVICES PROVIDERS, AND OTHER ORGANIZATIONS PROVIDING VITAL AND/OR ENRICHING SERVICES AND CREATING TRANSFORMATIONAL IMPACT IN LOW-INCOME COMMUNITIES. IN 2019 OUR FINANCING SUPPORTED ORGANIZATIONS IN OVER 23 COMMUNITIES ACROSS THE NATION. WE ALSO FACILITATE THE FLOW OF THIRD-PARTY CAPITAL TO THESE MISSION-DRIVEN ORGANIZATIONS BY WORKING WITH OR PROVIDING GUIDANCE TO OTHERS (E.G., FUNDERS, PHILANTHROPIC INSTITUTIONS, GOVERNMENT AGENCIES, CORPORATIONS) WHO ARE USING PROGRAM RELATED INVESTMENTS, LOANS, GRANTS AND OTHER FINANCING MECHANISMS FOR CHARITABLE PURPOSES AND TO CREATE POSITIVE SOCIAL CHANGE. STRATEGIC ADVICE: WE ARE A NATIONAL LEADER IN PROVIDING STRATEGIC ADVICE AND CUSTOMIZED FINANCIAL TRAINING AND CAPACITY-BUILDING TO HUNDREDS OF NONPROFITS IN ALL SECTORS, THROUGH WEBINARS, WORKSHOPS, AND CUSTOMIZED ENGAGEMENTS. IN 2019, WE CONDUCTED EDUCATIONAL ACTIVITIES AND TRAINING, AND PROVIDED CUSTOMIZED TECHNICAL ASSISTANCE THAT HELPED 190 NONPROFIT ORGANIZATIONS AND FOUNDATIONS APPLY GREATER FINANCIAL KNOW-HOW TO THEIR CRITICAL DECISIONS. OUR 51 WORKSHOPS AND OTHER GROUP FINANCIAL CAPACITY TRAININGS REACHED 2,891 INDIVIDUALS. OUR WORK OVERALL HELPED ORGANIZATIONAL LEADERS OPTIMIZE THEIR RESOURCES, INCORPORATE FINANCIAL DATA AND KNOWLEDGE INTO PLANNING AND DECISION-MAKING, AND STRENGTHEN THEIR ABILITY TO ADAPT TO EVER-CHANGING CONDITIONS AND PROVIDE MUCH-NEEDED SERVICES TO THEIR CLIENTS. WE DID THIS BY HELPING THEM TO IMPROVE THEIR UNDERSTANDING OF THEIR FINANCIAL CONDITION AND BUSINESS MODELS, ANALYZE THEIR STRATEGIC OPTIONS, IDENTIFY AND DETERMINE HOW TO FILL CAPITAL GAPS, AND CONDUCT LONG-TERM PLANNING. WE ALSO PROVIDED STRATEGIC ADVICE TO FOUNDATIONS, RAISING AWARENESS OF THE FINANCIAL ISSUES AFFECTING NONPROFITS THEY SUPPORT. LASTLY, WE ADVISED AND EDUCATED ORGANIZATIONS PROVIDING SERVICES TO LOW-INCOME PEOPLE AND OTHER DISADVANTAGED COMMUNITIES, GOVERNMENTS, AND OTHERS EXPLORING PAY FOR SUCCESS, OUTCOMES-BASED FUNDING, AND OTHER IMPACT INVESTING MODELS TO HELP BETTER FUND THEIR CHARITABLE AND PUBLIC ACTIVITIES, INCLUDING PROVIDING SEMINAL RESEARCH AND PUBLICATIONS TO THE FIELD. ACCESSIBLE INSIGHTS: WE BELIEVE THAT FINANCIAL KNOWLEDGE IS POWER. WE SHARE DATA, INSIGHTS, AND RESOURCES TO IMPROVE UNDERSTANDING OF NONPROFIT FINANCE AND FIND SOLUTIONS TO COMPLEX ISSUES IN SUPPORT OF POSITIVE SOCIAL CHANGE. WE USE OUR WEBSITE, PUBLICATIONS, SOCIAL MEDIA, AND OTHER PLATFORMS TO MAKE CONTENT ABOUT WHAT WE ARE LEARNING WIDELY ACCESSIBLE. IN 2019, NFF HOSTED AN EVENT WITH THE FEDERAL RESERVE BANK OF PHILADELPHIA AS A CONTINUATION OF A NATIONAL DIALOGUE THAT WE STARTED IN 2017 WITH THE FEDERAL RESERVE BANK OF SAN FRANCISCO ABOUT REORIENTING THE SOCIAL SECTOR AROUND OUTCOMES AND OUTCOMES-BASED FUNDING. WE LAUNCHED THE ADVANCING RESILIENCE IN COMMUNITY HEALTH PROJECT TO HELP NETWORKS OF COMMUNITY-BASED ORGANIZATIONS PREPARE FOR PARTNERSHIPS WITH HEALTHCARE SYSTEMS WITH THE GOAL OF BETTER ADDRESSING SOCIAL DETERMINANTS OF HEALTH AND IMPROVING HEALTH OUTCOMES FOR MORE PEOPLE. THE PROJECT WAS DESIGNED TO SHARE REAL-TIME INSIGHTS IN PARTNERSHIP WITH PARTICIPATING NETWORKS THROUGH MULTIMEDIA PUBLICATIONS, INCLUDING BLOGS AND VIDEO INTERVIEWS THAT DIRECTLY CAPTURE THE VOICES AND EXPERIENCES OF NETWORK LEADERS. NFF'S FULL COST FRAMEWORK WAS FOUND TO HAVE SIGNIFICANT BENEFITS TO BOTH NONPROFITS AND FUNDERS ACCORDING TO AN EVALUATION BY RESEARCH FIRM HARDER+COMPANY AND WAS FEATURED BY THE CHRONICLE OF PHILANTHROPY AS ONE OF EIGHT NATIONAL, NONPROFIT INNOVATIONS OF NOTE. WE PREPARED A SET OF FREELY AVAILABLE RESOURCES TO HELP NONPROFIT LEADERS NAVIGATE PRACTICAL IMPLICATIONS FROM THE RECENT FASB ACCOUNTING STANDARDS UPDATE. AND AS PART OF NFF'S COMMITMENT TO ADVANCING RACIAL EQUITY, ANTONY BUGG-LEVINE AUTHORED AN ARTICLE ABOUT WHY "COLOR BLIND" ASSESSMENTS OF GRANT PROPOSALS DON'T WORK; THE ARTICLE WAS ACCOMPANIED BY A CHART WITH EXAMPLES OF FINANCIAL ANALYSIS BLIND SPOTS AND HOW THEY CAN BE ADDRESSED.

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
ANTONY BUGG-LEVINE PRESIDENT/CEO	50.00 0.50	X		X				374,059	0	56,788
KRISTIN GIANTRIS MANAGING DIRECTOR	50.00				X			301,631	0	42,572
NORAH MCVEIGH MANAGING DIRECTOR	50.00 0.60				X			284,565	0	55,449
CRAIG REIGEL CFO	50.00 0.50			X				274,192	0	26,898
JENNIFER TALANSKY MANAGING DIRECTOR	50.00				X			231,414	0	54,308
JENNIFER KAWAR VP & CHIEF INVESTMENT OFFICER	50.00					X		184,129	0	40,247
ANAND ATTAVANE VP/CONTROLLER	50.00					X		154,311	0	55,644
SHAWN LUTHER VP, CHIEF CREDIT OFFICER	50.00					X		187,393	0	13,213
KATHYRN OLSEN VP LENDING - FINANCIAL SERVICES	50.00					X		171,558	0	11,933
SANDI CLEMENT MCKINLEY VP/ADVISORY SERVICES	50.00					X		154,830	0	25,700

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
HENRY RAMOS BOARD CHAIR	2.00	X		X				0	0	0
OMMEED SATHE DIRECTOR/BOARD CHAIR THRU 3/14/19	2.00	X		X				0	0	0
STEPHEN DEBERRY TREASURER	2.00	X		X				0	0	0
ANDREW B COHN SECRETARY	0.50	X		X				0	0	0
BETH BAFFORD DIRECTOR	2.00	X						0	0	0
JAMES BILDNER DIRECTOR THRU 6/4/19	2.00	X						0	0	0
PHILLIP CLAY DIRECTOR	2.00	X						0	0	0
DAVID ERICKSON DIRECTOR	2.00	X						0	0	0
TESSIE GUILLERMO DIRECTOR	0.50	X						0	0	0
LISA HALL DIRECTOR THRU 6/4/19	2.00	X						0	0	0

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
CHRIS IGLESIAS DIRECTOR	2.00 0.50	X						0	0	0
NIKE IRVIN DIRECTOR	2.00 0.50	X						0	0	0
KIMBERLY JOHNSON DIRECTOR THRU 6/4/19	2.00	X						0	0	0
JOE MCCANNON DIRECTOR	2.00	X						0	0	0
RUTH SALZMAN DIRECTOR	2.00 0.50	X						0	0	0
SONAL SHAH DIRECTOR THRU 3/14/19	2.00	X						0	0	0
JOHN TAYLOR DIRECTOR	2.00	X						0	0	0

SCHEDULE A
(Form 990 or 990-EZ)

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.
▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047
2019
Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization
NONPROFIT FINANCE FUND

Employer identification number
13-3238657

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

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

- 1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
- 2 A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (Form 990 or 990-EZ).)
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state:
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 8 A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 9 An agricultural research organization described in **170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land grant college of agriculture. See instructions. Enter the name, city, and state of the college or university:
- 10 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)
- 11 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**
- 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2).** See **section 509(a)(3).** Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
 - a **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
 - b **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
 - c **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
 - d **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
 - e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
 - f Enter the number of supported organizations _____
 - g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
Total						

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)
 (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III.
 If the organization failed to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶		(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grant.") . . .	4,825,418	17,080,404	5,592,149	9,460,209	9,858,573	46,816,753
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf . . .						
3	The value of services or facilities furnished by a governmental unit to the organization without charge..						
4	Total. Add lines 1 through 3	4,825,418	17,080,404	5,592,149	9,460,209	9,858,573	46,816,753
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) . . .						15,003,622
6	Public support. Subtract line 5 from line 4.						31,813,131

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶		(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
7	Amounts from line 4. . .	4,825,418	17,080,404	5,592,149	9,460,209	9,858,573	46,816,753
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources. . . .	7,413	4,210	5,305	13,636	22,087	52,651
9	Net income from unrelated business activities, whether or not the business is regularly carried on. . .						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) . . .	8,791	1,996	3,515	2,641	20,706	37,649
11	Total support. Add lines 7 through 10						46,907,053

12 Gross receipts from related activities, etc. (see instructions) **12** 54,991,551

13 **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here**

Section C. Computation of Public Support Percentage

14	Public support percentage for 2019 (line 6, column (f) divided by line 11, column (f))	14	67.820 %
15	Public support percentage for 2018 Schedule A, Part II, line 14	15	62.780 %

16a **33 1/3% support test—2019.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization

b **33 1/3% support test—2018.** 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—2019.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

b **10%-facts-and-circumstances test—2018.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

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

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶		(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf.						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, 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.						
c	Add lines 7a and 7b.						
8	Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶		(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
9	Amounts from line 6.						
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources.						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.						
c	Add lines 10a and 10b.						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on.						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						

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

Section C. Computation of Public Support Percentage

15	Public support percentage for 2019 (line 8, column (f) divided by line 13, column (f))	15	
16	Public support percentage from 2018 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage

17	Investment income percentage for 2019 (line 10c, column (f) divided by line 13, column (f))	17	
18	Investment income percentage from 2018 Schedule A, Part III, line 17	18	

19a 33 1/3% support tests—2019. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization

b 33 1/3% support tests—2018. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization

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

Part IV Supporting Organizations

(Complete only if you checked a box on line 12 of Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

		Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.</i>		
	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer (b) and (c) below.</i>		
	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
	3b		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes" and if you checked 12a or 12b in Part I, answer (b) and (c) below.</i>		
	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.</i>		
	4b		
c	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? <i>If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.</i>		
	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).</i>		
	5a		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
	5b		
c	Substitutions only. Was the substitution the result of an event beyond the organization's control?		
	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>		
	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? <i>If "Yes," provide detail in Part VI.</i>		
	9a		
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>		
	9b		
c	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>		
	9c		
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If "Yes," answer line 10b below.</i>		
	10a		
b	Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings).</i>		
	10b		

Part IV Supporting Organizations (continued)

		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?		
a	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?		
b	A family member of a person described in (a) above?		
c	A 35% controlled entity of a person described in (a) or (b) above? <i>If "Yes" to a, b, or c, provide detail in Part VI.</i>		

Section B. Type I Supporting Organizations

		Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? <i>If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.</i>		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? <i>If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization.</i>		

Section C. Type II Supporting Organizations

		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? <i>If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).</i>		

Section D. All Type III Supporting Organizations

		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization (s) or (ii) serving on the governing body of a supported organization? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>		

Section E. Type III Functionally-Integrated Supporting Organizations

1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions):		
a	<input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
b	<input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
c	<input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions)		
2	Activities Test. Answer (a) and (b) below.		
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? <i>If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.</i>	Yes	No
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? <i>If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.</i>		
3	Parent of Supported Organizations. Answer (a) and (b) below.		
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI.</i>		
b	Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>		

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

- 1** Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). **See instructions.** All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8	
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):	1	
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (explain in detail in Part VI):		
2	Acquisition indebtedness applicable to non-exempt use assets	2	
3	Subtract line 2 from line 1d	3	
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by .035	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	
Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2	Enter 85% of line 1	2	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	
4	Enter greater of line 2 or line 3	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions)		

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

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI). See instructions	
7 Total annual distributions. Add lines 1 through 6.	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions	
9 Distributable amount for 2019 from Section C, line 6	
10 Line 8 amount divided by Line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019
1 Distributable amount for 2019 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2019 (reasonable cause required-- explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2019:			
a From 2014.			
b From 2015.			
c From 2016.			
d From 2017.			
e From 2018.			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2019 distributable amount			
i Carryover from 2014 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2019 from Section D, line 7:			
\$			
a Applied to underdistributions of prior years			
b Applied to 2019 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2019, if any. Subtract lines 3g and 4a from line 2. If the amount is greater than zero, explain in Part VI . See instructions.			
6 Remaining underdistributions for 2019. Subtract lines 3h and 4b from line 1. If the amount is greater than zero, explain in Part VI . See instructions.			
7 Excess distributions carryover to 2020. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2015.			
b Excess from 2016.			
c Excess from 2017.			
d Excess from 2018.			
e Excess from 2019.			

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

Facts And Circumstances Test

990 Schedule A, Supplemental Information

Return Reference	Explanation
SCHEDULE A, PART II, LINE 10, EXPLANATION OF OTHER INCOME:	MISCELLANEOUS INCOME - 2015 AMOUNT: \$ 8,791. 2016 AMOUNT: \$ 1,250. 2017 AMOUNT: \$ 3,515. 2018 AMOUNT: \$ 2,641. 2019 AMOUNT: \$ 7. REFUND - 2016 AMOUNT: \$ 746. TAX ABATEMENT - 2019 AMOUNT: \$ 15,528. PRINCIPAL REPAYMENTS FROM LOANS - 2019 AMOUNT: \$ 5,171.

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.
▶Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2019
Open to Public Inspection

If the organization answered "Yes" on 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" on 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" on Form 990, Part IV, Line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

- Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Name of the organization NONPROFIT FINANCE FUND	Employer identification number 13-3238657
--	--

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

1 Provide a description of the organization's direct and indirect political campaign activities in Part IV (see instructions for definition of "political campaign activities")

2 Political campaign activity expenditures (see instructions) ▶ \$ _____

3 Volunteer hours for political campaign activities (see instructions)

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

1 Enter the amount of any excise tax incurred by the organization under section 4955 ▶ \$ _____

2 Enter the amount of any excise tax incurred by organization managers under section 4955 ▶ \$ _____

3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Yes No

4a Was a correction made? Yes No

b If "Yes," describe in Part IV.

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

1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ▶ \$ _____

2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ▶ \$ _____

3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b..... ▶ \$ _____

4 Did the filing organization file **Form 1120-POL** for this year? Yes No

5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-.	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-.
1				
2				
3				
4				
5				
6				

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

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

Limits on Lobbying Expenditures
(The term "expenditures" means amounts paid or incurred.)

(a) Filing organization's totals	(b) Affiliated group totals
----------------------------------	-----------------------------

- 1a** Total lobbying expenditures to influence public opinion (grass roots lobbying)
- b** Total lobbying expenditures to influence a legislative body (direct lobbying)
- c** Total lobbying expenditures (add lines 1a and 1b)
- d** Other exempt purpose expenditures
- e** Total exempt purpose expenditures (add lines 1c and 1d)
- f** Lobbying nontaxable amount. Enter the amount from the following table in both columns.

9,250	
9,250	
22,156,283	
22,165,533	
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 line 1f)
- h** Subtract line 1g from line 1a. If zero or less, enter -0-
- i** Subtract line 1f from line 1c. If zero or less, enter -0-

250,000	
0	
0	

- j** If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? Yes No

4-Year Averaging Period Under Section 501(h)

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

Lobbying Expenditures During 4-Year Averaging Period

Calendar year (or fiscal year beginning in)	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) Total
2a Lobbying nontaxable amount	1,000,000	1,000,000	1,000,000	1,000,000	4,000,000
b Lobbying ceiling amount (150% of line 2a, column(e))					6,000,000
c Total lobbying expenditures				9,250	9,250
d Grassroots nontaxable amount	250,000	250,000	250,000	250,000	1,000,000
e Grassroots ceiling amount (150% of line 2d, column (e))					1,500,000
f Grassroots lobbying expenditures					

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

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.

	(a)		(b)
	Yes	No	Amount
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:			
a 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?			
e 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 Other activities?			
j Total. Add lines 1c through 1i			
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?			

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

	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?	2	
3 Did the organization agree to carry over lobbying and political expenditures from the prior year?	3	

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, 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).		
a 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

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, lines 1 and 2 (see instructions), and Part II-B, line 1. Also, complete this part for any additional information.

Return Reference	Explanation
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SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No. 1545-0047 2019 Open to Public Inspection

Complete if the organization answered "Yes," on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. Attach to Form 990. Go to www.irs.gov/Form990 for instructions and the latest information.

Department of the Treasury Internal Revenue Service

Name of the organization NONPROFIT FINANCE FUND

Employer identification number 13-3238657

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

Table with 2 columns: (a) Donor advised funds, (b) Funds and other accounts. Rows include total number at end of year, aggregate value of contributions, grants, and end of year, and two yes/no questions about donor information.

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

Form for Part II Conservation Easements. Includes checkboxes for types of easements, a table for conservation details (2a-2d), and questions about monitoring and expenses.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

Form for Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Includes questions about reporting and amounts for art and historical treasures.

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

- 3** Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):
- a** Public exhibition
 - b** Scholarly research
 - c** Preservation for future generations
 - d** Loan or exchange programs
 - e** Other
- 4** Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5** During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? . . . **Yes** **No**

Part IV Escrow and Custodial Arrangements.

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

- 1a** Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? **Yes** **No**
- b** If "Yes," explain the arrangement in Part XIII and complete the following table:
- | | Amount |
|--|--------|
| c Beginning balance | |
| d Additions during the year | |
| e Distributions during the year | |
| f Ending balance | |
- 2a** Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? . . . **Yes** **No**
- b** If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII

Part V Endowment Funds.

Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

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

- 2** Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a** Board designated or quasi-endowment ▶
 - b** Permanent endowment ▶
 - c** Temporarily restricted endowment ▶
- The percentages on lines 2a, 2b, and 2c should equal 100%.
- 3a** Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- | | | |
|--|-----|----|
| | Yes | No |
| (i) unrelated organizations | | |
| (ii) related organizations | | |
| b If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R? | | |
- 4** Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		2,185,283	593,022	1,592,261
d Equipment		1,210,368	979,517	230,851
e Other		666,889	297,506	369,383
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).) . . . ▶				2,192,495

Part VII Investments—Other Securities.

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

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

Part VIII Investments—Program Related.

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

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) LOANS RECEIVABLE	150,163,778	C
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.)	150,163,778	

Part IX Other Assets.

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

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

Part X Other Liabilities.

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

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

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

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

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements		1	19,204,653
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
a	Net unrealized gains (losses) on investments	2a	15,828	
b	Donated services and use of facilities	2b	265,859	
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d		
e	Add lines 2a through 2d			2e 281,687
3	Subtract line 2e from line 1			3 18,922,966
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b	3,598,791	
c	Add lines 4a and 4b			4c 3,598,791
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)			5 22,521,757

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

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements		1	20,559,833
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
a	Donated services and use of facilities	2a	265,859	
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII.)	2d		
e	Add lines 2a through 2d			2e 265,859
3	Subtract line 2e from line 1			3 20,293,974
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b	3,448,791	
c	Add lines 4a and 4b			4c 3,448,791
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)			5 23,742,765

Part XIII Supplemental Information

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

Return Reference	Explanation
See Additional Data Table	

Additional Data

Software ID:

Software Version:

EIN: 13-3238657

Name: NONPROFIT FINANCE FUND

Supplemental Information

Return Reference	Explanation
PART IV, LINE 2B:	NONPROFIT FINANCE FUND HELD A CUSTODIAL BANK ACCOUNT FOR A NEW MARKET TAX CREDIT OF WHICH NONPROFIT FINANCE FUND IS A MINIMAL PARTNER OF .01% AND THE FUNDS ARE USED AS OBLIGATION PAYMENTS AS AUTHORIZED BY THE PARTNERSHIP.

Supplemental Information

Return Reference	Explanation
PART X, LINE 2:	THE FUND'S ACCOUNTING POLICY IS TO DISCLOSE LIABILITIES FOR UNCERTAIN TAX POSITIONS WHEN A LIABILITY IS PROBABLE AND ESTIMABLE. MANAGEMENT IS NOT AWARE OF ANY VIOLATION OF ITS TAX STATUS AS AN ORGANIZATION EXEMPT FROM INCOME TAXES, NOR OF ANY EXPOSURE TO UNRELATED BUSINESS INCOME TAX. THE FUND IS NO LONGER SUBJECT TO EXAMINATIONS BY THE APPLICABLE TAXING JURISDICTIONS FOR THE PERIODS PRIOR TO 2016.

Supplemental Information

Return Reference	Explanation
PART XI, LINE 4B - OTHER ADJUSTMENTS:	INTEREST EXPENSE NETTED AGAINST INTEREST INCOME: 3,448,791. ADJUSTMENT ON PRIOR YEAR'S GRANT REVENUE 150,000.

Supplemental Information

Return Reference	Explanation
PART XII, LINE 4B - OTHER ADJUSTMENTS:	INTEREST EXPENSE NETTED AGAINST INTEREST INCOME: 3,448,791.

Note: To capture the full content of this document as Filed, please select landscape mode (11" x 8.5") when printing.

Schedule I (Form 990)

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

OMB No. 1545-0047

2019

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Attach to Form 990.

Go to www.irs.gov/Form990 for the latest information.

Name of the organization NONPROFIT FINANCE FUND

Employer identification number

13-3238657

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance...
2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000.

Table with 8 columns: (a) Name and address of organization or government, (b) EIN, (c) IRC section (if applicable), (d) Amount of cash grant, (e) Amount of non-cash assistance, (f) Method of valuation (book, FMV, appraisal, other), (g) Description of noncash assistance, (h) Purpose of grant or assistance. Rows 1-12.

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table. 20
3 Enter total number of other organizations listed in the line 1 table. 1

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.

Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					

Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

Return Reference	Explanation
PART I, LINE 2:	NONPROFIT FINANCE FUND (NFF) MAKES GRANTS TO OTHER NONPROFIT ORGANIZATIONS AS PART OF A VARIETY OF INITIATIVES WITH NFF FUNDERS AND IN A MANNER THAT ALIGNS WITH NFF'S MISSION. GRANTS ARE REVIEWED AND APPROVED BASED UPON THE CRITERIA ESTABLISHED BY THE FUNDER AND THE GRANTEE'S CAPACITY TO SERVE THEIR COMMUNITIES AND TO FURTHER THEIR CHARITABLE MISSION. GRANTS ARE ONLY DISBURSED AFTER RECEIVING WRITTEN AND SIGNED ACKNOWLEDGEMENT BY THE GRANTEE OF THE RESTRICTIONS ON THE GRANT. AFTER DISBURSEMENT AND DURING TERM OF GRANT, THE GRANTEE IS REQUIRED TO PROVIDE PERIODIC REPORTS RELATED TO GRANT COMPLIANCE. A GRANT MANAGER AT NFF MONITORS THE GRANTEE ORGANIZATION ACCOMPLISHMENTS AND REPORTS BACK TO THE FUNDER ORGANIZATION FUNDING THE INITIATIVE.

Additional Data

Software ID:
Software Version:
EIN: 13-3238657
Name: NONPROFIT FINANCE FUND

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ALASKA ASSOCIATION FOR INFANT AND EARLY CHILDHOOD MENTAL HEALTH PO BOX 240331 ANCHORAGE, AK 99524	80-0683225	501 (C)(3)	10,000				PARTICIPATION STIPENDS FOR ORGANIZATIONS IN THE ASSOCIATION FOR INFANT MENTAL HEALTH FINANCIAL TA PROJECT
ALLIANCE FOR THE ADVANCEMENT OF INFANT MENTAL HEALTH 13101 ALLEN ROAD SOUTHGATE, MI 48195	47-4240714	501 (C)(3)	10,000				PARTICIPATION STIPENDS FOR ORGANIZATIONS IN THE ASSOCIATION FOR INFANT MENTAL HEALTH FINANCIAL TA PROJECT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ASSOCIATION OF INFANT MENTAL HEALTH IN TENNESSEE 446 METROPLEX DRIVE SUITE A-224 NASHVILLE, TN 37211	81-4085326	501 (C)(3)	10,000				PARTICIPATION STIPENDS FOR ORGANIZATIONS IN THE ASSOCIATION FOR INFANT MENTAL HEALTH FINANCIAL TA PROJECT
BELMONT ALLIANCE CIVIC ASSOCIATION CDC 871 NORTH HOLLY STREET FLOOR 2 PHILADELPHIA, PA 19104	23-3004021	501 (C)(3)	30,000				FINANCIAL LITERACY, FINANCIAL COMMUNICATION, PLANNING AND REPORTING AND FINANCIAL DECISION MAKING.

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BME NETWORKS 2103 CORAL WAY 2ND FL MIAMI, FL 33145	46-3083316	501 (C)(3)	195,000				FELLOWSHIP PROGRAM FUNDING
CAPITAL IMPACT PARTNERS 1400 CRYSTAL DRIVE SUITE 500 ARLINGTON, VA 22202	52-1290127	501 (C)(3)	133,333				TO SUPPORT INTERNAL TRAINING & PRACTICE ENHANCEMENTS

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FIRST3YEARS 15851 DALLAS PARKWAY 106 ADDISON, TX 75001	75-2067421	501 (C)(3)	10,000				PARTICIPATION STIPENDS FOR ORGANIZATIONS IN THE ASSOCIATION FOR INFANT MENTAL HEALTH FINANCIAL TA PROJECT
IDUHA IPA LLC DBA ENGAGEWELL IPA LLC 307 WEST 38TH STREET 3RD FLOOR NEW YORK, NY 10018	32-0525858		83,333				BUILDING CAPACITY, RESILIENCE, & HEALTH PARTNERSHIPS

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ILLINOIS ASSOCIATION FOR INFANT MENTAL HEALTH 451 N LASALLE CHICAGO, IL 60654	36-3149881	501 (C)(3)	10,000				PARTICIPATION STIPENDS FOR ORGANIZATIONS IN THE ASSOCIATION FOR INFANT MENTAL HEALTH FINANCIAL TA PROJECT
INDOCHINESE AMERICAN COUNCIL 4936 OLD YORK ROAD PHILADELPHIA, PA 19141	23-2235948	501 (C)(3)	30,000				FINANCIAL LITERACY, FINANCIAL COMMUNICATION, PLANNING AND REPORTING AND FINANCIAL DECISION MAKING.

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MACC ALLIANCE OF CONNECTED COMMUNITIES 414 8TH STREET SOUTH MINNEAPOLIS, MN 55404	41-1959688	501 (C)(3)	83,333				BUILDING CAPACITY, RESILIENCE, & HEALTH PARTNERSHIPS
MICHIGAN ASSOCIATION FOR INFANT MENTAL HEALTH 13101 ALLEN ROAD SOUTHGATE, MI 48195	38-2256399	501 (C)(3)	10,000				PARTICIPATION STIPENDS FOR ORGANIZATIONS IN THE ASSOCIATION FOR INFANT MENTAL HEALTH FINANCIAL TA PROJECT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MIGHTY WRITERS 1501 CHRISTIAN STREET PHILADELPHIA, PA 19146	01-0920922	501 (C)(3)	30,000				FINANCIAL LITERACY, FINANCIAL COMMUNICATION, PLANNING AND REPORTING AND FINANCIAL DECISION MAKING.
RHODE ISLAND ASSOCIATION FOR INFANT MENTAL HEALTH 350 POINT STREET PROVIDENCE, RI 02903	57-1170681	501 (C)(3)	10,000				PARTICIPATION STIPENDS FOR ORGANIZATIONS IN THE ASSOCIATION FOR INFANT MENTAL HEALTH FINANCIAL TA PROJECT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
RUTGERS THE STATE UNIVERSITY OF NJ 33 KNIGHTSBRIDGE ROAD PISCATAWAY, NJ 08854	22-6001086	THE STATE OF NJ	71,500				NEWARK RESILIENCE INITIATIVE EXTENSION PROGRAM
THOMAS JEFFERSON AREA COALITION FOR THE HOMELESS PO BOX 34 CHARLOTTESVILLE, VA 22902	26-4577927	501 (C)(3)	83,333				BUILDING CAPACITY, RESILIENCE, & HEALTH PARTNERSHIPS

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TREE HOUSE BOOKS 1430 W SUSQUEHANNA AVENUE PHILADELPHIA, PA 19121	59-3802913	501 (C)(3)	30,000				FINANCIAL LITERACY, FINANCIAL COMMUNICATION, PLANNING AND REPORTING AND FINANCIAL DECISION MAKING.
URBAN AFFAIRS COALITION 1207 CHESTNUT STREET PHILADELPHIA, PA 19107	23-7046393	501 (C)(3)	30,000				FINANCIAL LITERACY, FINANCIAL COMMUNICATION, PLANNING AND REPORTING AND FINANCIAL DECISION MAKING.

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WASHINGTON ASSOCIATION FOR INFANT MENTAL HEALTH 1833 N 105TH STREET 203 SEATTLE, WA 98133	46-4567104	501 (C)(3)	10,000				PARTICIPATION STIPENDS FOR ORGANIZATIONS IN THE ASSOCIATION FOR INFANT MENTAL HEALTH FINANCIAL TA PROJECT
WEST PHILADELPHIA ALLIANCE FOR CHILDREN 5070 PARKSIDE AVENUE SUITE 1414 PHILADELPHIA, PA 19131	20-1574860	501 (C)(3)	30,000				FINANCIAL LITERACY, FINANCIAL COMMUNICATION, PLANNING AND REPORTING AND FINANCIAL DECISION MAKING.

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WISCONSIN ALLIANCE FOR INFANT MENTAL HEALTH INC 133 S BUTLER ST SUITE 340 MADISON, WI 53703	27-1258002	501 (C)(3)	10,000				PARTICIPATION STIPENDS FOR ORGANIZATIONS IN THE ASSOCIATION FOR INFANT MENTAL HEALTH FINANCIAL TA PROJECT

Schedule J
(Form 990)

Compensation Information

OMB No. 1545-0047
2019
Open to Public Inspection

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
 ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
 ▶ Attach to Form 990.
 ▶ Go to www.irs.gov/Form990 for instructions and the latest information.

Department of the Treasury
Internal Revenue Service

Name of the organization
NONPROFIT FINANCE FUND

Employer identification number
13-3238657

Part I Questions Regarding Compensation

	Yes	No
<p>1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.</p> <p> <input type="checkbox"/> First-class or charter travel <input type="checkbox"/> Travel for companions <input type="checkbox"/> Tax idemnification and gross-up payments <input type="checkbox"/> Discretionary spending account </p> <p> <input type="checkbox"/> Housing allowance or residence for personal use <input type="checkbox"/> Payments for business use of personal residence <input type="checkbox"/> Health or social club dues or initiation fees <input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef) </p>		
<p>b If any of the boxes on Line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain</p>	1b	
<p>2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked on Line 1a?</p>	2	
<p>3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.</p> <p> <input type="checkbox"/> Compensation committee <input checked="" type="checkbox"/> Independent compensation consultant <input checked="" type="checkbox"/> Form 990 of other organizations </p> <p> <input type="checkbox"/> Written employment contract <input checked="" type="checkbox"/> Compensation survey or study <input checked="" type="checkbox"/> Approval by the board or compensation committee </p>		
<p>4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:</p> <p>a Receive a severance payment or change-of-control payment?</p> <p>b Participate in, or receive payment from, a supplemental nonqualified retirement plan?</p> <p>c Participate in, or receive payment from, an equity-based compensation arrangement?</p> <p>If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.</p>	4a	No
	4b	No
	4c	No
<p>Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.</p> <p>5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:</p> <p>a The organization?</p> <p>b Any related organization?</p> <p>If "Yes," on line 5a or 5b, describe in Part III.</p>	5a	No
	5b	No
<p>6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:</p> <p>a The organization?</p> <p>b Any related organization?</p> <p>If "Yes," on line 6a or 6b, describe in Part III.</p>	6a	No
	6b	No
<p>7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described in lines 5 and 6? If "Yes," describe in Part III.</p>	7	Yes
<p>8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III.</p>	8	No
<p>9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?</p>	9	

Part III Supplemental Information

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

Return Reference	Explanation
PART I, LINE 7	THE BOARD DETERMINED THE CEO'S ANNUAL BONUS BY REVIEWING THE CEO'S PERFORMANCE AGAINST ESTABLISHED GOALS. THE BOARD REVIEWED, APPROVED AND DETERMINED AGGREGATE BONUS FOR THOSE/THE SENIOR STAFF DIRECTLY REPORTING TO THE CEO. FOR OTHER HIGHLY COMPENSATED EMPLOYEES THE INDIVIDUAL BONUSES WERE DETERMINED BY THEIR MANAGERS ACCORDING TO NFF POLICY, AND APPROVED BY THE CEO AND THE CFO.

SCHEDULE O
(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

▶ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2019

Open to Public Inspection

Department of the Treasury

Name of the organization
NONPROFIT FINANCE FUND

Employer identification number

13-3238657

990 Schedule O, Supplemental Information

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

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	NONPROFIT FINANCE FUND'S CONFLICT OF INTEREST AND DISCLOSURE POLICY WAS REVISED IN 2014. THE POLICY IS APPLICABLE TO ALL DIRECTORS, OFFICERS, COMMITTEE MEMBERS AND KEY EMPLOYEES. AT THE BEGINNING OF EACH YEAR, ALL SUCH PERSONS ARE ASKED TO SIGN A STATEMENT AFFIRMING THAT THE INDIVIDUAL HAS RECEIVED A COPY OF THE CONFLICT OF INTEREST AND DISCLOSURE POLICY, HAS READ AND UNDERSTANDS THE POLICY AND AGREES TO COMPLY WITH THE POLICY. THE POLICY REQUIRES THAT ALL POTENTIAL CONFLICTS BE REPORTED TO THE BOARD OF DIRECTORS OR RELEVANT COMMITTEE TO DETERMINE IF A CONFLICT EXISTS AND IF SO, THAT IT BE ADDRESSED IN AN APPROPRIATE MANNER CONSISTENT WITH THE POLICY. THE POLICIES ALSO PROVIDE THAT INTERESTED PERSONS MAY NOT PARTICIPATE WHEN A POTENTIAL CONFLICT IS DETERMINED NOR BE PRESENT FOR THE APPROVAL OF ANY TRANSACTION OR BUSINESS INVOLVING THE INTERESTED PARTY.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 15	<p>NONPROFIT FINANCE FUND'S BOARD OF DIRECTORS IS RESPONSIBLE FOR DETERMINING THE COMPENSATION OF THE CEO. IN 2012 THE BOARD APPROVED THE COMPENSATION COMMITTEE'S RECOMMENDATION OF BASE SALARY AND TARGET BONUS. THESE RECOMMENDATIONS WERE BASED UPON FACTORS INCLUDING COMPENSATION PAID BY SIMILAR ORGANIZATIONS AND COMPENSATION SURVEYS COMPILED BY INDEPENDENT FIRMS. IN 2019, THE BOARD REVIEWED THE CEO'S PERFORMANCE AGAINST ESTABLISHED GOALS, AND THEN ADJUSTED THE CEO'S BASE SALARY FOR 2020 AND ANNUAL BONUS FOR 2019. EACH OF THESE DECISIONS WAS DOCUMENTED IN CONTEMPORANEOUS MINUTES. SENIOR STAFF REPORTING DIRECTLY TO THE CEO ARE PAID SALARIES DETERMINED BY THE CEO. FOR 2019 THE BOARD REVIEWED AND APPROVED A TOTAL POOL FOR BASE SALARY CHANGES AND BONUSES FOR THIS GROUP. THIS APPROVAL WAS CONTEMPORANEOUSLY DOCUMENTED IN THE MINUTES. THE CEO DETERMINED THE AMOUNT OF EACH INDIVIDUAL ADJUSTMENT AND BONUS WITHIN THOSE POOLS BASED UPON ENTERPRISE AND INDIVIDUAL PERFORMANCE AND SCOPE OF RESPONSIBILITIES.</p>

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION C, LINE 19	FORM 990 IS AVAILABLE FOR PUBLIC INSPECTION AS REQUIRED UNDER SECTION 6104 OF THE INTERNAL REVENUE SERVICE CODE. IN ADDITION, FORMS 990 AND 1023, AS WELL AS THE FINANCIAL STATEMENTS, CONFLICT OF INTEREST POLICY, ARTICLES OF INCORPORATION AND BY-LAWS ARE AVAILABLE UPON WRITTEN REQUEST DIRECTED TO THE NONPROFIT FINANCE FUND, 5 HANOVER SQUARE, 9TH FLOOR, NEW YORK, NY 10004, OR BY CALLING THE ORGANIZATION AT 212-868-6710.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART XI, LINE 9:	ADJUSTMENT ON PRIOR YEAR'S GRANT REVENUE -150,000.

990 Schedule O, Supplemental Information

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

**SCHEDULE R
(Form 990)**

Related Organizations and Unrelated Partnerships

OMB No. 1545-0047

2019

**Open to Public
Inspection**

▶ **Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.**
▶ **Attach to Form 990.**
▶ **Go to www.irs.gov/Form990 for instructions and the latest information.**

Department of the Treasury
Internal Revenue Service

Name of the organization
NONPROFIT FINANCE FUND

Employer identification number

13-3238657

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

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
(1) BUILDING FOR THE FUTURE INC 5 HANOVER SQUARE 9TH FLOOR NEW YORK, NY 10004 13-4078657	INACTIVE	DE	501(C)(3)	12(A)	NONPROFIT FINANCE FUND	Yes	
(2) NEW ENGLAND CULTURAL FACILITIES FUND 5 HANOVER SQUARE 9TH FLOOR NEW YORK, NY 10004 04-3278959	DISSOLVED	MA	501(C)(3)	12(A)	NONPROFIT FINANCE FUND	Yes	

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

See Additional Data Table

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	

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

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

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

	Yes	No
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?		
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a	No
b Gift, grant, or capital contribution to related organization(s)	1b	No
c Gift, grant, or capital contribution from related organization(s)	1c	No
d Loans or loan guarantees to or for related organization(s)	1d	No
e Loans or loan guarantees by related organization(s)	1e	No
f Dividends from related organization(s)	1f	No
g Sale of assets to related organization(s)	1g	No
h Purchase of assets from related organization(s)	1h	No
i Exchange of assets with related organization(s)	1i	No
j Lease of facilities, equipment, or other assets to related organization(s)	1j	No
k Lease of facilities, equipment, or other assets from related organization(s)	1k	No
l Performance of services or membership or fundraising solicitations for related organization(s)	1l	Yes
m Performance of services or membership or fundraising solicitations by related organization(s)	1m	No
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n	Yes
o Sharing of paid employees with related organization(s)	1o	Yes
p Reimbursement paid to related organization(s) for expenses	1p	No
q Reimbursement paid by related organization(s) for expenses	1q	No
r Other transfer of cash or property to related organization(s)	1r	No
s Other transfer of cash or property from related organization(s)	1s	No

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

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved

Part VII **Supplemental Information**

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

Return Reference	Explanation

Additional Data

Software ID:
Software Version:
EIN: 13-3238657
Name: NONPROFIT FINANCE FUND

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal Domicile (State or Foreign Country)	(d) Direct Controlling Entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in Box 20 of Schedule K-1 (Form 1065)	(j) General or Managing Partner?		(k) Percentage ownership
							Yes	No		Yes	No	
NFF NEW MARKETS FUND XVI LLC 5 HANOVER SQUARE 9TH FLOOR NEW YORK, NY 10004 27-3227226	FINANCE PROJECTS THAT BENEFIT SMALL AND MIDDLE-SIZED NONPROFITS	NY	NONPROFIT FINANCE FUND	RELATED				No		Yes		0.010 %
NFF NEW MARKETS FUND XVII LLC 5 HANOVER SQUARE 9TH FLOOR NEW YORK, NY 10004 27-3227327	FINANCE PROJECTS THAT BENEFIT SMALL AND MIDDLE-SIZED NONPROFITS	NY	NONPROFIT FINANCE FUND	RELATED	85			No		Yes		0.010 %
NFF NEW MARKETS FUND XVIII LLC 5 HANOVER SQUARE 9TH FLOOR NEW YORK, NY 10004 27-3227397	FINANCE PROJECTS THAT BENEFIT SMALL AND MIDDLE-SIZED NONPROFITS	NY	NONPROFIT FINANCE FUND	RELATED	1			No		Yes		0.010 %
NFF NEW MARKETS FUND XIX LLC 5 HANOVER SQUARE 9TH FLOOR NEW YORK, NY 10004 27-3227511	FINANCE PROJECTS THAT BENEFIT SMALL AND MIDDLE-SIZED NONPROFITS	NY	NONPROFIT FINANCE FUND	RELATED	3			No		Yes		0.010 %
NFF NEW MARKETS FUND XX LLC 5 HANOVER SQUARE 9TH FLOOR NEW YORK, NY 10004 27-3227559	FINANCE PROJECTS THAT BENEFIT SMALL AND MIDDLE-SIZED NONPROFITS	NY	NONPROFIT FINANCE FUND	RELATED	1	582		No		Yes		0.010 %
NFF NEW MARKETS FUND XXI LLC 5 HANOVER SQUARE 9TH FLOOR NEW YORK, NY 10004 27-3227607	FINANCE PROJECTS THAT BENEFIT SMALL AND MIDDLE-SIZED NONPROFITS	NY	NONPROFIT FINANCE FUND	RELATED	1	966		No		Yes		0.010 %
NFF NEW MARKETS FUND XXII LLC 5 HANOVER SQUARE 9TH FLOOR NEW YORK, NY 10004 27-3227792	FINANCE PROJECTS THAT BENEFIT SMALL AND MIDDLE-SIZED NONPROFITS	NY	NONPROFIT FINANCE FUND	RELATED		772		No		Yes		0.010 %
NFF NEW MARKETS FUND XXIII LLC 5 HANOVER SQUARE 9TH FLOOR NEW YORK, NY 10004 27-3227871	FINANCE PROJECTS THAT BENEFIT SMALL AND MIDDLE-SIZED NONPROFITS	NY	NONPROFIT FINANCE FUND	RELATED	3	680		No		Yes		0.010 %
NFF NEW MARKETS FUND XXIV LLC 5 HANOVER SQUARE 9TH FLOOR NEW YORK, NY 10004 27-3227950	FINANCE PROJECTS THAT BENEFIT SMALL AND MIDDLE-SIZED NONPROFITS	NY	NONPROFIT FINANCE FUND	RELATED	-2	483		No		Yes		0.010 %
NFF NEW MARKETS FUND XXV LLC 5 HANOVER SQUARE 9TH FLOOR NEW YORK, NY 10004 27-3228011	FINANCE PROJECTS THAT BENEFIT SMALL AND MIDDLE-SIZED NONPROFITS	NY	NONPROFIT FINANCE FUND	RELATED	4	966		No		Yes		0.010 %
NFF NEW MARKETS FUND XXVI LLC 5 HANOVER SQUARE 9TH FLOOR NEW YORK, NY 10004 46-4909596	FINANCE PROJECTS THAT BENEFIT SMALL AND MIDDLE-SIZED NONPROFITS	NY	NONPROFIT FINANCE FUND	RELATED	1	598		No		Yes		0.010 %
NFF NEW MARKETS FUND XXVII LLC 5 HANOVER SQUARE 9TH FLOOR NEW YORK, NY 10004 46-4922051	FINANCE PROJECTS THAT BENEFIT SMALL AND MIDDLE-SIZED NONPROFITS	NY	NONPROFIT FINANCE FUND	RELATED	6	395		No		Yes		0.010 %
NFF NEW MARKETS FUND XXVIII LLC 5 HANOVER SQUARE 9TH FLOOR NEW YORK, NY 10004 46-4936104	FINANCE PROJECTS THAT BENEFIT SMALL AND MIDDLE-SIZED NONPROFITS	NY	NONPROFIT FINANCE FUND	RELATED	19	595		No		Yes		0.010 %
NFF NEW MARKETS FUND XXX LLC 5 HANOVER SQUARE 9TH FLOOR NEW YORK, NY 10004 46-4969840	FINANCE PROJECTS THAT BENEFIT SMALL AND MIDDLE-SIZED NONPROFITS	NY	NONPROFIT FINANCE FUND	RELATED	5	543		No		Yes		0.010 %
NFF NEW MARKETS FUND XXXI LLC 5 HANOVER SQUARE 9TH FLOOR NEW YORK, NY 10004 46-4977783	FINANCE PROJECTS THAT BENEFIT SMALL AND MIDDLE-SIZED NONPROFITS	NY	NONPROFIT FINANCE FUND	RELATED	6	1,094		No		Yes		0.010 %

Form 990, Schedule R, Part III - Identification of Related Organizations Taxable as a Partnership												
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal Domicile (State or Foreign Country)	(d) Direct Controlling Entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in Box 20 of Schedule K-1 (Form 1065)	(j) General or Managing Partner?		(k) Percentage ownership
							Yes	No		Yes	No	
NFF NEW MARKETS FUND XXXII LLC 5 HANOVER SQUARE 9TH FLOOR NEW YORK, NY 10004 46-4992297	FINANCE PROJECTS THAT BENEFIT SMALL AND MIDDLE-SIZED NONPROFITS	NY	NONPROFIT FINANCE FUND	RELATED	5	746		No		Yes		0.010 %
NFF NEW MARKETS FUND XXXIV LLC 5 HANOVER SQUARE 9TH FLOOR NEW YORK, NY 10004 46-5018327	FINANCE PROJECTS THAT BENEFIT SMALL AND MIDDLE-SIZED NONPROFITS	NY	NONPROFIT FINANCE FUND	RELATED	33	1,247		No		Yes		0.010 %
NFF NEW MARKETS FUND XXXVII LLC 5 HANOVER SQUARE 9TH FLOOR NEW YORK, NY 10004 61-1885294	FINANCE PROJECTS THAT BENEFIT SMALL AND MIDDLE-SIZED NONPROFITS	NY	NONPROFIT FINANCE FUND	RELATED	3	1,099		No		Yes		0.010 %
NFF NEW MARKETS FUND XXXVIII LLC 5 HANOVER SQUARE 9TH FLOOR NEW YORK, NY 10004 83-0527220	FINANCE PROJECTS THAT BENEFIT SMALL AND MIDDLE-SIZED NONPROFITS	NY	NONPROFIT FINANCE FUND	RELATED		901		No		Yes		0.010 %
NFF NEW MARKETS FUND XXXIX LLC 5 HANOVER SQUARE 9TH FLOOR NEW YORK, NY 10004 35-2626140	FINANCE PROJECTS THAT BENEFIT SMALL AND MIDDLE-SIZED NONPROFITS	NY	NONPROFIT FINANCE FUND	RELATED	1	1,100		No		Yes		0.010 %
NFF NEW MARKETS FUND XLI LLC 5 HANOVER SQUARE 9TH FLOOR NEW YORK, NY 10004 82-5406766	FINANCE PROJECTS THAT BENEFIT SMALL AND MIDDLE-SIZED NONPROFITS	NY	NONPROFIT FINANCE FUND	RELATED		1,000		No		Yes		0.010 %
CHASE NMTC BREXTON INVESTMENT FUND LLC 5 HANOVER SQUARE 9TH FLOOR NEW YORK, NY 10004 90-0906987	FINANCE PROJECTS THAT BENEFIT SMALL AND MIDDLE-SIZED NONPROFITS	NY	NONPROFIT FINANCE FUND	RELATED	-8			No		Yes		0.010 %