



**Part III. Statement of Program Service Accomplishments**

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

☒ X**1** Briefly describe the organization's mission

COMMUNITY VISION CAPITAL & CONSULTING PROMOTES ECONOMIC JUSTICE AND ALLEVIATES POVERTY BY INCREASING THE FINANCIAL RESILIENCE AND SUSTAINABILITY OF COMMUNITY-BASED NONPROFITS AND ENTERPRISES. THROUGH FLEXIBLE FINANCIAL PRODUCTS AND SOUND ADVICE, WE CREATE OPPORTUNITIES

**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 \$ 2,634,694. including grants of \$ 0. ) (Revenue \$ 4,048,850. )

DIRECT LENDING: SINCE 1987, COMMUNITY VISION HAS MADE 467 LOANS TOTALING \$185 MILLION TO NONPROFITS SERVING LOW-INCOME COMMUNITIES IN NORTHERN CALIFORNIA, LEVERAGING OVER \$1.7 BILLION IN ADDITIONAL PROJECT FUNDING. THESE LOANS HAVE HELPED CREATE OR PRESERVE 7,213 AFFORDABLE HOUSING UNITS FOR LOW-INCOME FAMILIES AND INDIVIDUALS, AND FINANCED OVER 2.4 MILLION SQUARE FEET OF NEIGHBORHOOD-SERVING NONPROFIT AND RETAIL SPACE. THESE LOANS HAVE ALSO HELPED CREATE OR PRESERVE 18,424 PERMANENT AND CONSTRUCTION JOBS, AND HELPED FINANCE PROJECTS BY ORGANIZATIONS THAT SERVE OVER 1.2 MILLION INDIVIDUALS. AT THE END OF FY18, COMMUNITY VISION MANAGED A PORTFOLIO OF 99 LOANS WORTH \$56.6 MILLION TO 86 NONPROFIT AND COMMUNITY-ORIENTED ORGANIZATIONS. DURING THE COURSE OF FY18, COMMUNITY VISION CLOSED 32 LOANS TOTALING \$26.

**4b** (Code ) (Expenses \$ 1,937,188. including grants of \$ 0. ) (Revenue \$ 879,597. )

CONSULTING AND TRAINING: SINCE THE INCEPTION OF OUR CONSULTING & TRAINING PROGRAM, COMMUNITY VISION HAS PROVIDED 856 CONSULTING ENGAGEMENTS IN REAL ESTATE AND NONPROFIT FINANCIAL MANAGEMENT, AND SERVED 3,283 ORGANIZATIONS THROUGH WORKSHOPS ON THESE TOPICS. DURING FY18, THE PROGRAM COMPLETED 81 CONSULTING ENGAGEMENTS, AND REACHED 481 ORGANIZATIONS THROUGH WORKSHOPS.

**4c** (Code ) (Expenses \$ 1,140,131. including grants of \$ 0. ) (Revenue \$ 0. )

CAPITALIZATION: COMMUNITY VISION WAS FOUNDED BY COMMUNITY RESIDENTS AS A VEHICLE TO CHANNEL CAPITAL FROM SOCIALLY RESPONSIBLE AND MISSION MOTIVATED INVESTORS TO PROJECTS THAT BENEFIT LOW INCOME PEOPLE. AT THE END OF FY18, INVESTMENTS MADE BY BANKS, FOUNDATIONS, GOVERNMENT ENTITIES, INDIVIDUALS, RELIGIOUS ORGANIZATIONS, NONPROFIT ORGANIZATIONS AND HOSPITAL SYSTEMS INTO OUR REVOLVING LOAN FUND TOTALED \$49.3 MILLION.

**4d** Other program services (Describe in Schedule O )

(Expenses \$ 984,228. including grants of \$ 0. ) (Revenue \$ 0. )

**4e** Total program service expenses 6,696,241.

Form 990 (2017)

ABCDGJLOR

**Part IV Checklist of Required Schedules**

	Yes	No
<b>1</b> Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	<b>X</b>	
<b>2</b> Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ?	<b>X</b>	
<b>3</b> Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		<b>X</b>
<b>4</b> <b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>	<b>X</b>	
<b>5</b> 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? <i>If "Yes," complete Schedule C, Part III</i>		<b>X</b>
<b>6</b> 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? <i>If "Yes," complete Schedule D, Part I</i>		<b>X</b>
<b>7</b> Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>		<b>X</b>
<b>8</b> Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>		<b>X</b>
<b>9</b> 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? <i>If "Yes," complete Schedule D, Part IV</i>		<b>X</b>
<b>10</b> Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>		<b>X</b>
<b>11</b> 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		
<b>a</b> Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>	<b>X</b>	
<b>b</b> Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i>		<b>X</b>
<b>c</b> 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? <i>If "Yes," complete Schedule D, Part VIII</i>		<b>X</b>
<b>d</b> 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? <i>If "Yes," complete Schedule D, Part IX</i>		<b>X</b>
<b>e</b> Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>	<b>X</b>	
<b>f</b> 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)? <i>If "Yes," complete Schedule D, Part X</i>	<b>X</b>	
<b>12a</b> Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>	<b>X</b>	
<b>b</b> Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>		<b>X</b>
<b>13</b> Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		<b>X</b>
<b>14a</b> Did the organization maintain an office, employees, or agents outside of the United States?		<b>X</b>
<b>b</b> Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i>		<b>X</b>
<b>15</b> 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? <i>If "Yes," complete Schedule F, Parts II and IV</i>		<b>X</b>
<b>16</b> Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i>		<b>X</b>
<b>17</b> 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? <i>If "Yes," complete Schedule G, Part I</i>		<b>X</b>
<b>18</b> Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	<b>X</b>	
<b>19</b> Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		<b>X</b>

**Part IV Checklist of Required Schedules** (continued)

	Yes	No
<b>20a</b> Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		X
<b>b</b> If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
<b>21</b> 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? <i>If "Yes," complete Schedule I, Parts I and II</i>		X
<b>22</b> 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>		X
<b>23</b> 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>	X	
<b>24a</b> 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>		X
<b>b</b> Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
<b>c</b> Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
<b>d</b> Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
<b>25a</b> <b>Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.</b> 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>		X
<b>b</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>		X
<b>26</b> Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If "Yes," complete Schedule L, Part II</i>	X	
<b>27</b> Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>		X
<b>28</b> 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)		
<b>a</b> A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
<b>b</b> A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
<b>c</b> An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>	X	
<b>29</b> Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>		X
<b>30</b> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		X
<b>31</b> Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		X
<b>32</b> 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>		X
<b>33</b> 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>	X	
<b>34</b> 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>	X	
<b>35a</b> Did the organization have a controlled entity within the meaning of section 512(b)(13)?	X	
<b>b</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>	X	
<b>36</b> <b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		X
<b>37</b> 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>		X
<b>38</b> Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	X	

**Note.** All Form 990 filers are required to complete Schedule O

Form 990 (2017)

**Part V** Statements Regarding Other IRS Filings and Tax ComplianceCheck if Schedule O contains a response or note to any line in this Part V ☐

		Yes	No
<b>1a</b> Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable.	<b>1a</b> 164		
<b>b</b> Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.	<b>1b</b> 0		
<b>c</b> Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		<b>1c</b> X	
<b>2a</b> Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return.	<b>2a</b> 40		
<b>b</b> If at least one is reported on line 2a, did the organization file all required federal employment tax returns? <b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions).		<b>2b</b> X	
<b>3a</b> Did the organization have unrelated business gross income of \$1,000 or more during the year?		<b>3a</b> X	
<b>b</b> If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O.		<b>3b</b> X	
<b>4a</b> At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?			<b>4a</b> X
<b>b</b> If "Yes," enter the name of the foreign country: See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
<b>5a</b> Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			<b>5a</b> X
<b>b</b> Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			<b>5b</b> X
<b>c</b> If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			<b>5c</b>
<b>6a</b> Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?			<b>6a</b> X
<b>b</b> If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?			<b>6b</b>
<b>7 Organizations that may receive deductible contributions under section 170(c).</b>			
<b>a</b> Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?		<b>7a</b> X	
<b>b</b> If "Yes," did the organization notify the donor of the value of the goods or services provided?		<b>7b</b> X	
<b>c</b> Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8882?			<b>7c</b> X
<b>d</b> If "Yes," indicate the number of Forms 8882 filed during the year.	<b>7d</b>		
<b>e</b> Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?			<b>7e</b> X
<b>f</b> Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?			<b>7f</b> X
<b>g</b> If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?			<b>7g</b>
<b>h</b> If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?			<b>7h</b>
<b>8 Sponsoring organizations maintaining donor advised funds.</b> Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?			<b>8</b>
<b>9 Sponsoring organizations maintaining donor advised funds.</b>			
<b>a</b> Did the sponsoring organization make any taxable distributions under section 4966?			<b>9a</b>
<b>b</b> Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?			<b>9b</b>
<b>10 Section 501(c)(7) organizations.</b> Enter:			
<b>a</b> Initiation fees and capital contributions included on Part VIII, line 12.	<b>10a</b>		
<b>b</b> Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities.	<b>10b</b>		
<b>11 Section 501(c)(12) organizations.</b> Enter:			
<b>a</b> Gross income from members or shareholders.	<b>11a</b>		
<b>b</b> Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	<b>11b</b>		
<b>12a Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041?		<b>12a</b>	
<b>b</b> If "Yes," enter the amount of tax-exempt interest received or accrued during the year.	<b>12b</b>		
<b>13 Section 501(c)(29) qualified nonprofit health insurance issuers.</b>			
<b>a</b> Is the organization licensed to issue qualified health plans in more than one state? <b>Note.</b> See the instructions for additional information the organization must report on Schedule O.		<b>13a</b>	
<b>b</b> Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans.	<b>13b</b>		
<b>c</b> Enter the amount of reserves on hand.	<b>13c</b>		
<b>14a</b> Did the organization receive any payments for indoor tanning services during the tax year?		<b>14a</b>	X
<b>b</b> If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.		<b>14b</b>	

Form 990 (2017)

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

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

☒ X

**Section A. Governing Body and Management**

	Yes	No
<b>1a</b> Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.	11	
<b>1b</b> Enter the number of voting members included in line 1a, above, who are independent	9	
<b>2</b> Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		X
<b>3</b> Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?		X
<b>4</b> Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	X	
<b>5</b> Did the organization become aware during the year of a significant diversion of the organization's assets?		X
<b>6</b> Did the organization have members or stockholders?		X
<b>7a</b> 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?		X
<b>7b</b> Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		X
<b>8</b> Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
<b>a</b> The governing body?	X	
<b>b</b> Each committee with authority to act on behalf of the governing body?	X	
<b>9</b> Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O.		X

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

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

**Section C. Disclosure**

**17** List the states with which a copy of this Form 990 is required to be filed **CA**

**18** Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 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 **C. LEA SALEM - 415-392-8215**  
**870 MARKET ST, SUITE 677, SAN FRANCISCO, CA 94102**

**Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors**Check if Schedule O contains a response or note to any line in this Part VII ☐**Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees****1a** Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below 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			
(1) PATRICIA GOPAUL BOARD CHAIR	2.00	X		X				0.	0.	0.
(2) ANITA ADDISON BOARD VICE-CHAIR	2.00	X		X				0.	0.	0.
(3) JAMES SNYDER TREASURER	2.00	X		X				0.	0.	0.
(4) JOY HOFFMAN SECRETARY	2.00	X		X				0.	0.	0.
(5) ILANA SCHATZ BOARD MEMBER	2.00	X						0.	0.	0.
(6) KIRKE WILSON BOARD MEMBER (THRU 12/31/17)	2.00	X						0.	0.	0.
(7) ANDRE MADIERA BOARD MEMBER	2.00	X						0.	0.	0.
(8) AMY RASSEN BOARD MEMBER (THRU 11/15/17)	2.00	X						0.	0.	0.
(9) STEPHEN FLORANCE BOARD MEMBER	2.00	X						0.	0.	0.
(10) COLBY DAILEY BOARD MEMBER	2.00	X						0.	0.	0.
(11) BRYAN IGNOZZI BOARD MEMBER	2.00	X						0.	0.	0.
(12) JOHN CHAN BOARD MEMBER	2.00	X						0.	0.	0.
(13) LUIS GRANADOS BOARD MEMBER	2.00	X						0.	0.	0.
(14) MARY A. ROGIER PRESIDENT	40.00			X				165,561.	0.	28,990.
(15) C. LEA SALEM DIRECTOR OF FINANCE	40.00			X				147,339.	0.	16,897.
(16) E. ROSS CULVERWELL CHIEF LENDING OFFICER	40.00					X		144,485.	0.	24,792.
(17) JOANNE LEE DIRECTOR OF CONSULTING SER	40.00					X		149,846.	0.	22,060.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below 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			
(18) DANIEL HLAD DIRECTOR OF DEVELOPMENT & COMMUNICAT	40.00					X		132,083.	0.	16,558.
(19) ANDREA PAPANASSIOU DEPUTY DIRECTOR OF CONSULT	40.00					X		129,378.	0.	25,197.
(20) CATHERINE HOWARD DIRECTOR OF STRATEGIC INIT	40.00					X		142,865.	0.	21,674.
<b>1b Sub-total</b>								1,011,557.	0.	156,168.
<b>c Total from continuation sheets to Part VII, Section A</b>								0.	0.	0.
<b>d Total (add lines 1b and 1c)</b>								1,011,557.	0.	156,168.

**2** Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **11**

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

**Section B. Independent Contractors**

**1** Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
NONE		
<b>2</b> Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization <b>0</b>		

Form 990 (2017)

**Part VIII** Statement of RevenueCheck 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
<b>Contributions, Gifts, Grants and Other Similar Amounts</b>	<b>1 a</b> Federated campaigns	<b>1a</b>					
	<b>b</b> Membership dues	<b>1b</b>					
	<b>c</b> Fundraising events	<b>1c</b>	76,026.				
	<b>d</b> Related organizations	<b>1d</b>					
	<b>e</b> Government grants (contributions)	<b>1e</b>	4,015,656.				
	<b>f</b> All other contributions, gifts, grants, and similar amounts not included above	<b>1f</b>	3,132,284.				
	<b>g</b> Noncash contributions included in lines 1a-1f \$						
	<b>h Total.</b> Add lines 1a-1f			7,223,966.			
<b>Program Service Revenue</b>	<b>2 a</b> INTEREST ON COMMUNITY LOANS	<b>Business Code</b>	522200	2,781,302.	2,781,302.		
	<b>b</b> LOAN FEES/NMTC FEES		522200	1,267,548.	1,267,548.		
	<b>c</b> CONSULTING AND FISCAL AGENT FEES		541900	879,597.	879,597.		
	<b>d</b>						
	<b>e</b>						
	<b>f</b> All other program service revenue						
	<b>g Total.</b> Add lines 2a-2f			4,928,447.			
	<b>3</b> Investment income (including dividends, interest, and other similar amounts)			468,773.			468,773.
<b>4</b> Income from investment of tax-exempt bond proceeds							
<b>5</b> Royalties							
<b>Other Revenue</b>	<b>6 a</b> Gross rents	(i) Real	(ii) Personal				
	<b>b</b> Less rental expenses						
	<b>c</b> Rental income or (loss)						
	<b>d</b> Net rental income or (loss)						
	<b>7 a</b> Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
	<b>b</b> Less cost or other basis and sales expenses						
	<b>c</b> Gain or (loss)						
	<b>d</b> Net gain or (loss)						
	<b>8 a</b> Gross income from fundraising events (not including \$ 76,026. of contributions reported on line 1c) See Part IV, line 18	<b>a</b>		6,949.			
	<b>b</b> Less direct expenses	<b>b</b>		30,055.			
	<b>c</b> Net income or (loss) from fundraising events			-23,106.			-23,106.
	<b>9 a</b> Gross income from gaming activities See Part IV, line 19	<b>a</b>					
	<b>b</b> Less direct expenses	<b>b</b>					
	<b>c</b> Net income or (loss) from gaming activities						
	<b>10 a</b> Gross sales of inventory, less returns and allowances	<b>a</b>					
	<b>b</b> Less cost of goods sold	<b>b</b>					
	<b>c</b> Net income or (loss) from sales of inventory						
	<b>11 a</b> Miscellaneous Revenue	<b>Business Code</b>					
<b>b</b>							
<b>c</b>							
<b>d</b> All other revenue							
<b>e Total.</b> Add lines 11a-11d							
<b>12 Total revenue.</b> See instructions.				12,488,077.	4,928,447.	0.	335,664.

**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				
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	365,741.	192,648.	125,471.	47,622.
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	3,203,163.	2,884,904.	77,340.	240,919.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	170,055.	152,226.	4,666.	13,163.
9 Other employee benefits	415,097.	370,575.	13,515.	31,007.
10 Payroll taxes	258,330.	223,903.	13,634.	20,793.
11 Fees for services (non-employees)				
a Management				
b Legal	98,935.	94,481.	4,454.	
c Accounting	58,525.	5,390.	52,824.	311.
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	25,457.		25,457.	
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)	369,705.	342,289.	21,151.	6,265.
12 Advertising and promotion	80,551.	72,751.	1,764.	6,036.
13 Office expenses	112,733.	96,193.	6,915.	9,625.
14 Information technology	69,499.	60,315.	3,946.	5,238.
15 Royalties				
16 Occupancy	366,102.	319,125.	19,530.	27,447.
17 Travel	61,268.	53,733.	2,717.	4,818.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	65,710.	50,820.	10,344.	4,546.
20 Interest	821,587.	821,587.		
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	28,721.	24,896.	1,590.	2,235.
23 Insurance	67,393.	37,255.	29,800.	338.
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 <b>PROVISION FOR LOAN LOSS</b>	861,994.	861,994.		
b <b>FEES AND LICENSES</b>	32,071.	29,083.	1,760.	1,228.
c <b>BAD DEBT EXPENSE</b>	2,073.	2,073.		
d				
e All other expenses				
25 <b>Total functional expenses.</b> Add lines 1 through 24e	7,534,710.	6,696,241.	416,878.	421,591.
26 <b>Joint costs.</b> Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				

Check here ☐ if following SOP 98-2 (ASC 958-720)

**Part X Balance Sheet**Check if Schedule O contains a response or note to any line in this Part X ☐

		(A) Beginning of year		(B) End of year
<b>Assets</b>	1 Cash - non-interest-bearing	145,340.	1	232,743.
	2 Savings and temporary cash investments	13,243,442.	2	13,930,640.
	3 Pledges and grants receivable, net	342,500.	3	250,000.
	4 Accounts receivable, net	800,826.	4	630,943.
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(D), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L		6	
	7 Notes and loans receivable, net	43,602,646.	7	52,827,165.
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	217,659.	9	197,036.
	10a Land, buildings, and equipment - cost or other basis. Complete Part VI of Schedule D	10a 319,848.		
	10b Less accumulated depreciation	10b 272,235.	10c	47,613.
	11 Investments - publicly traded securities	14,824,858.	11	12,836,454.
	12 Investments - other securities. See Part IV, line 11	247,800.	12	1,668,367.
	13 Investments - program-related. See Part IV, line 11	282,644.	13	479,801.
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11	2,756,121.	15	1,069,196.
16 <b>Total assets.</b> Add lines 1 through 15 (must equal line 34)	76,514,627.	16	84,169,958.	
<b>Liabilities</b>	17 Accounts payable and accrued expenses	937,910.	17	963,169.
	18 Grants payable		18	
	19 Deferred revenue	6,077,335.	19	6,877,724.
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L	78,841.	22	78,841.
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties	46,718,576.	24	49,916,778.
	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	2,294,473.	25	1,043,381.
	26 <b>Total liabilities.</b> Add lines 17 through 25	56,107,135.	26	58,879,893.
<b>Net Assets or Fund Balances</b>	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	19,647,334.	27	24,842,726.
	28 Temporarily restricted net assets	760,158.	28	447,339.
	29 Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
	33 <b>Total net assets or fund balances</b>	20,407,492.	33	25,290,065.
	34 <b>Total liabilities and net assets/fund balances</b>	76,514,627.	34	84,169,958.

Form 990 (2017)

**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	12,488,077.
2	Total expenses (must equal Part IX, column (A), line 25)	2	7,534,710.
3	Revenue less expenses Subtract line 2 from line 1	3	4,953,367.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	20,407,492.
5	Net unrealized gains (losses) on investments	5	-70,794.
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	0.
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	25,290,065.

**Part XII Financial Statements and Reporting**Check if Schedule O contains a response or note to any line in this Part XII ☐

	Yes	No
1 Accounting method used to prepare the Form 990 <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O	<input type="checkbox"/>	<input type="checkbox"/>
2a Were the organization's financial statements compiled or reviewed by an independent accountant? 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 <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	<input type="checkbox"/>	<input checked="" type="checkbox"/>
b Were the organization's financial statements audited by an independent accountant? 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 <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	<input checked="" type="checkbox"/>	<input type="checkbox"/>
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? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	<input checked="" type="checkbox"/>	<input type="checkbox"/>
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?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
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	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Form 990 (2017)



**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 fails to qualify under the tests listed below, please complete Part III.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ►	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")	2300740.	1874293.	1717388.	1899505.	7223966.	15015892.
<b>2</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
<b>3</b> The value of services or facilities furnished by a governmental unit to the organization without charge						
<b>4 Total.</b> Add lines 1 through 3	2300740.	1874293.	1717388.	1899505.	7223966.	15015892.
<b>5</b> 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)						2165585.
<b>6 Public support.</b> Subtract line 5 from line 4						12850307.

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
<b>7</b> Amounts from line 4	2300740.	1874293.	1717388.	1899505.	7223966.	15015892.
<b>8</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	534,247.	698,361.	696,461.	442,755.	468,773.	2840597.
<b>9</b> Net income from unrelated business activities, whether or not the business is regularly carried on						
<b>10</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI)	17,500.		11,473.	8,758.	6,949.	44,680.
<b>11 Total support.</b> Add lines 7 through 10						17901169.
<b>12</b> Gross receipts from related activities, etc. (see instructions)					12	15,861,504.
<b>13 First five years.</b> 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 <b>stop here</b> ► <input type="checkbox"/>						

**Section C. Computation of Public Support Percentage**

<b>14</b> Public support percentage for 2017 (line 6, column (f) divided by line 11, column (f))	<b>14</b>	71.78	%
<b>15</b> Public support percentage from 2016 Schedule A, Part II, line 14	<b>15</b>	56.47	%
<b>16a 33 1/3% support test - 2017.</b> If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization ► <input checked="" type="checkbox"/>			
<b>b 33 1/3% support test - 2016.</b> 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 <b>stop here.</b> The organization qualifies as a publicly supported organization ► <input type="checkbox"/>			
<b>17a 10%-facts-and-circumstances test - 2017.</b> 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 <b>stop here.</b> Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ► <input type="checkbox"/>			
<b>b 10%-facts-and-circumstances test - 2016.</b> 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 <b>stop here.</b> Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ► <input type="checkbox"/>			
<b>18 Private foundation.</b> If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ► <input type="checkbox"/>			

Schedule A (Form 990 or 990-EZ) 2017

**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) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
<b>2</b> 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						
<b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513						
<b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
<b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge						
<b>6 Total.</b> Add lines 1 through 5						
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons						
<b>b</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						
<b>c</b> Add lines 7a and 7b						
<b>8 Public support.</b> (Subtract line 7c from line 6)						

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
<b>9</b> Amounts from line 6						
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
<b>c</b> Add lines 10a and 10b						
<b>11</b> Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
<b>12</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
<b>13 Total support.</b> (Add lines 9, 10c, 11, and 12.)						
<b>14 First five years.</b> 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 <input type="checkbox"/>						

**Section C. Computation of Public Support Percentage**

<b>15</b> Public support percentage for 2017 (line 8, column (f) divided by line 13, column (f))	<b>15</b>	%
<b>16</b> Public support percentage from 2016 Schedule A, Part III, line 15	<b>16</b>	%

**Section D. Computation of Investment Income Percentage**

<b>17</b> Investment income percentage for 2017 (line 10c, column (f) divided by line 13, column (f))	<b>17</b>	%
<b>18</b> Investment income percentage from 2016 Schedule A, Part III, line 17	<b>18</b>	%

**19a 33 1/3% support tests - 2017.** 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 - 2016.** 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 in line 12 on 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
<b>1</b> Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in <b>Part VI</b> how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.		
<b>2</b> Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in <b>Part VI</b> how the organization determined that the supported organization was described in section 509(a)(1) or (2).		
<b>3a</b> Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.		
<b>b</b> Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in <b>Part VI</b> when and how the organization made the determination.		
<b>c</b> Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in <b>Part VI</b> what controls the organization put in place to ensure such use.		
<b>4a</b> Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.		
<b>b</b> Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in <b>Part VI</b> how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.		
<b>c</b> 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)? If "Yes," explain in <b>Part VI</b> 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.		
<b>5a</b> Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in <b>Part VI</b> , 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).		
<b>b</b> <b>Type I or Type II only.</b> Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
<b>c</b> <b>Substitutions only.</b> Was the substitution the result of an event beyond the organization's control?		
<b>6</b> 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? If "Yes," provide detail in <b>Part VI</b> .		
<b>7</b> 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? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).		
<b>8</b> Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).		
<b>9a</b> Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in <b>Part VI</b> .		
<b>b</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? If "Yes," provide detail in <b>Part VI</b> .		
<b>c</b> 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? If "Yes," provide detail in <b>Part VI</b> .		
<b>10a</b> 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)? If "Yes," answer 10b below.		
<b>b</b> Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)		

**Part IV Supporting Organizations** (continued)

	Yes	No
<b>11</b> 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>11a</b>		
b A family member of a person described in (a) above?		
<b>11b</b>		
c A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.		
<b>11c</b>		

**Section B. Type I Supporting Organizations**

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

**Section C. Type II Supporting Organizations**

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

**Section D. All Type III Supporting Organizations**

	Yes	No
<b>1</b> 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?		
<b>1</b>		
<b>2</b> Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).		
<b>2</b>		
<b>3</b> By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.		
<b>3</b>		

**Section E. Type III Functionally Integrated Supporting Organizations**

	Yes	No
<b>1</b> 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).		
<b>2</b> 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? 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.		
<b>2a</b>		
b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.		
<b>2b</b>		
<b>3</b> 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? Provide details in Part VI.		
<b>3a</b>		
b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.		
<b>3b</b>		

**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	<b>Adjusted Net Income</b> (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)		
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	<b>Total</b> (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	<b>Minimum Asset Amount</b> (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	<b>Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6	

- 7 ☐ Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions)

Schedule A (Form 990 or 990-EZ) 2017

**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	<b>Total annual distributions.</b> 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 2017 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-2017	(iii) Distributable Amount for 2017
1 Distributable amount for 2017 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2017 (reasonable cause required- explain in Part VI) See instructions			
3 Excess distributions carryover, if any, to 2017			
a 1			
b From 2013			
c From 2014			
d From 2015			
e From 2016			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2017 distributable amount			
i Carryover from 2012 not applied (see instructions)			
j Remainder Subtract lines 3g, 3h, and 3i from 3f			
4 Distributions for 2017 from Section D, line 7 \$			
a Applied to underdistributions of prior years			
b Applied to 2017 distributable amount			
c Remainder Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2017, if any Subtract lines 3g and 4a from line 2 For result greater than zero, explain in Part VI. See instructions			
6 Remaining underdistributions for 2017 Subtract lines 3h and 4b from line 1 For result greater than zero, explain in Part VI See instructions			
7 <b>Excess distributions carryover to 2018.</b> Add lines 3j and 4c			
8 Breakdown of line 7			
a Excess from 2013			
b Excess from 2014			
c Excess from 2015			
d Excess from 2016			
e Excess from 2017			

Schedule A (Form 990 or 990-EZ) 2017

**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)

**SCHEDULE A, PART II, LINE 10, EXPLANATION FOR OTHER INCOME:****GROSS INCOME FROM FUNDRAISING EVENTS**

2013 AMOUNT: \$ 17,500.

2015 AMOUNT: \$ 11,473.

2016 AMOUNT: \$ 8,758.

2017 AMOUNT: \$ 6,949.

**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](http://www.irs.gov/Form990) for instructions and the latest information.**

OMB No 1545-0047

**2017**

**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 organization

COMMUNITY VISION CAPITAL & CONSULTING

Employer identification number

94-3032394

**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
- 2 Political campaign activity expenditures ▶ \$ \_\_\_\_\_
- 3 Volunteer hours for political campaign activities \_\_\_\_\_

**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-

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

Schedule C (Form 990 or 990-EZ) 2017

LHA

732041 11-09-17

**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												
<b>1a</b> Total lobbying expenditures to influence public opinion (grass roots lobbying)		2,500.	0.												
<b>b</b> Total lobbying expenditures to influence a legislative body (direct lobbying)		2,300.	0.												
<b>c</b> Total lobbying expenditures (add lines 1a and 1b)		4,800.	0.												
<b>d</b> Other exempt purpose expenditures		7,504,453.	0.												
<b>e</b> Total exempt purpose expenditures (add lines 1c and 1d)		7,509,253.	0.												
<b>f</b> Lobbying nontaxable amount Enter the amount from the following table in both columns		525,463.	0.												
<table border="1"> <thead> <tr> <th>If the amount on line 1e, column (a) or (b) is:</th> <th>The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000</td> </tr> </tbody> </table>		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		
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														
<b>g</b> Grassroots nontaxable amount (enter 25% of line 1f)		131,366.	0.												
<b>h</b> Subtract line 1g from line 1a. If zero or less, enter -0-		0.													
<b>i</b> Subtract line 1f from line 1c. If zero or less, enter -0-		0.													
<b>j</b> 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?			<input type="checkbox"/> Yes <input type="checkbox"/> 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) 2014	(b) 2015	(c) 2016	(d) 2017	(e) Total
<b>2a</b> Lobbying nontaxable amount	448,238.	459,965.	493,588.	525,463.	1,927,254.
<b>b</b> Lobbying ceiling amount (150% of line 2a, column (e))					2,890,881.
<b>c</b> Total lobbying expenditures	4,705.	6,500.	5,610.	4,800.	21,615.
<b>d</b> Grassroots nontaxable amount	112,060.	114,991.	123,397.	131,366.	481,814.
<b>e</b> Grassroots ceiling amount (150% of line 2d, column (e))					722,721.
<b>f</b> Grassroots lobbying expenditures		200.	850.	2,500.	3,550.

Schedule C (Form 990 or 990-EZ) 2017



**SCHEDULE D**  
**(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Supplemental Financial Statements**

▶ **Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.**  
▶ **Attach to Form 990.**

▶ **Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.**

OMB No 1545-0047

**2017**

**Open to Public Inspection**

Name of the organization

COMMUNITY VISION CAPITAL & CONSULTING

Employer identification number

94-3032394

**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

- 1 Total number at end of year
- 2 Aggregate value of contributions to (during year)
- 3 Aggregate value of grants from (during year)
- 4 Aggregate value at end of year

(a) Donor advised funds	(b) Funds and other accounts

- 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No
- 6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? ☐ Yes ☐ No

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

- 1 Purpose(s) of conservation easements held by the organization (check all that apply)
- ☐ Preservation of land for public use (e.g., recreation or education) ☐ Preservation of a historically important land area
- ☐ Protection of natural habitat ☐ Preservation of a certified historic structure
- ☐ Preservation of open space

- 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

- a Total number of conservation easements
- b Total acreage restricted by conservation easements
- c Number of conservation easements on a certified historic structure included in (a)
- d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register

	Held at the End of the Tax Year
2a	
2b	
2c	
2d	

- 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ \_\_\_\_\_
- 4 Number of states where property subject to conservation easement is located ▶ \_\_\_\_\_
- 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No
- 6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ \_\_\_\_\_
- 7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ \$ \_\_\_\_\_
- 8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No
- 9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

**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

- 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items
- b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items
- (i) Revenue included on Form 990, Part VIII, line 1 ▶ \$ \_\_\_\_\_
- (ii) Assets included in Form 990, Part X ▶ \$ \_\_\_\_\_
- 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items
- a Revenue included on Form 990, Part VIII, line 1 ▶ \$ \_\_\_\_\_
- b Assets included in Form 990, Part X ▶ \$ \_\_\_\_\_

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

Schedule D (Form 990) 2017

732051 10-09-17

**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 exhibitiond ☐ Loan or exchange programsb ☐ Scholarly researche ☐ Other \_\_\_\_\_c ☐ Preservation for future generations

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

c Beginning balance

d Additions during the year

e Distributions during the year

f Ending balance

	Amount
1c	
1d	
1e	
1f	

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?

☐ Yes☐ Nob If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII ☐**Part V Endowment Funds.** Complete if the organization answered "Yes" on Form 990, Part IV, line 10

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a					
b					
c					
d					
e					
f					
g					

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

(i) unrelated organizations

(ii) related organizations

b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?

	Yes	No
3a(i)		
3a(ii)		
3b		

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		40,614.	19,365.	21,249.
d Equipment		279,234.	252,870.	26,364.
e Other				
<b>Total.</b> Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				47,613.

Schedule D (Form 990) 2017

**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. (Col. (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)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		

Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶

**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) FUNDS HELD IN TRUST	1,043,381.
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	1,043,381.

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 ☒

Schedule D (Form 990) 2017

**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	12,620,751.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12			
a	Net unrealized gains (losses) on investments	2a	-70,794.	
b	Donated services and use of facilities	2b	228,925.	
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII)	2d		
e	Add lines 2a through 2d	2e	158,131.	
3	Subtract line 2e from line 1	3	12,462,620.	
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	25,457.	
b	Other (Describe in Part XIII)	4b		
c	Add lines 4a and 4b	4c	25,457.	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	12,488,077.	

**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	7,738,178.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25			
a	Donated services and use of facilities	2a	228,925.	
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII)	2d		
e	Add lines 2a through 2d	2e	228,925.	
3	Subtract line 2e from line 1	3	7,509,253.	
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	25,457.	
b	Other (Describe in Part XIII)	4b		
c	Add lines 4a and 4b	4c	25,457.	
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	7,534,710.	

**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.

**PART X, LINE 2:**

COMMUNITY VISION IS EXEMPT FROM FEDERAL INCOME TAXES UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE AND FROM CALIFORNIA FRANCHISE AND/OR INCOME TAXES UNDER SECTION 23701D OF THE REVENUE AND TAXATION CODE.

COMMUNITY VISION FOLLOWS THE GUIDANCE OF ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES ISSUED BY THE FINANCIAL ACCOUNTING STANDARDS BOARD. AS OF SEPTEMBER 30, 2018, MANAGEMENT EVALUATED COMMUNITY VISION'S TAX POSITIONS AND CONCLUDED THAT COMMUNITY VISION HAD MAINTAINED ITS TAX EXEMPT STATUS AND HAD TAKEN NO UNCERTAIN TAX POSITIONS THAT REQUIRE ADJUSTMENT TO THE FINANCIAL STATEMENTS.

Department of the Treasury  
Internal Revenue Service

### Supplemental Information Regarding Fundraising or Gaming Activities

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

**▶ Attach to Form 990 or Form 990-EZ.**

**▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest instructions.**

OMB No. 1545-0047

# 2017

**Open to Public Inspection**

Name of the organization

**COMMUNITY VISION CAPITAL & CONSULTING**

**Employer identification number**  
**94-3032394**

## Part I

### Fundraising Activities.

**Fundraising Activities.** Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

- 1** Indicate whether the organization raised funds through any of the following activities. Check all that apply.

- a** ☐ Mail solicitations  
**b** ☐ Internet and email solicitations  
**c** ☐ Phone solicitations  
**d** ☐ In-person solicitations  
**e** ☐ Solicitation of non-government grants  
**f** ☐ Solicitation of government grants  
**g** ☐ Special fundraising events

- 2 a** Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?

☐ **Yes**☐ **No**

- b** If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
Total						

**Total**

- 3** List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing

**Part II Fundraising Events.** Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

	(a) Event #1 <b>EDUCATIONAL FORUM / PARTY</b> (event type)	(b) Event #2 (event type)	(c) Other events <b>NONE</b> (total number)	(d) Total events (add col (a) through col (c))
	<b>Revenue</b>			
<b>1</b> Gross receipts	82,975.			82,975.
<b>2</b> Less: Contributions	76,026.			76,026.
<b>3</b> Gross income (line 1 minus line 2)	6,949.			6,949.
<b>Direct Expenses</b>				
<b>4</b> Cash prizes				
<b>5</b> Noncash prizes				
<b>6</b> Rent/facility costs	2,871.			2,871.
<b>7</b> Food and beverages	14,395.			14,395.
<b>8</b> Entertainment	6,730.			6,730.
<b>9</b> Other direct expenses	6,059.			6,059.
<b>10</b> Direct expense summary: Add lines 4 through 9 in column (d)				30,055.
<b>11</b> Net income summary: Subtract line 10 from line 3, column (d)				-23,106.

**Part III Gaming.** Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

	(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
<b>Revenue</b>				
<b>1</b> Gross revenue				
<b>Direct Expenses</b>				
<b>2</b> Cash prizes				
<b>3</b> Noncash prizes				
<b>4</b> Rent/facility costs				
<b>5</b> Other direct expenses				
<b>6</b> Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	
<b>7</b> Direct expense summary: Add lines 2 through 5 in column (d)				
<b>8</b> Net gaming income summary: Subtract line 7 from line 1, column (d)				

9 Enter the state(s) in which the organization conducts gaming activities \_\_\_\_\_

a Is the organization licensed to conduct gaming activities in each of these states? ☐ Yes ☐ No

b If "No," explain \_\_\_\_\_

10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? ☐ Yes ☐ No

b If "Yes," explain \_\_\_\_\_

11. Does the organization conduct gaming activities with nonmembers? ☐ Yes ☐ No12. Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming? ☐ Yes ☐ No

13. Indicate the percentage of gaming activity conducted in

a. The organization's facility

13a. \_\_\_\_\_ %

b. An outside facility

13b. \_\_\_\_\_ %

14. Enter the name and address of the person who prepares the organization's gaming/special events books and records

Name ▶ \_\_\_\_\_

Address ▶ \_\_\_\_\_

15a. Does the organization have a contract with a third party from whom the organization receives gaming revenue? ☐ Yes ☐ No

b. If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ \_\_\_\_\_ and the amount of gaming revenue retained by the third party ▶ \$ \_\_\_\_\_

c. If "Yes," enter name and address of the third party

Name ▶ \_\_\_\_\_

Address ▶ \_\_\_\_\_

16. Gaming manager information

Name ▶ \_\_\_\_\_

Gaming manager compensation ▶ \$ \_\_\_\_\_

Description of services provided ▶ \_\_\_\_\_

☐ Director/officer☐ Employee☐ Independent contractor

17. Mandatory distributions

a. Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? ☐ Yes ☐ No

b. Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ \_\_\_\_\_

**Part IV** **Supplemental Information.** Provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.

**SCHEDULE J  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Compensation Information**

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

▶ Attach to Form 990.

▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No 1545-0047

**2017**

Open to Public Inspection

Name of the organization

**COMMUNITY VISION CAPITAL & CONSULTING**

Employer identification number

**94-3032394**

**Part I Questions Regarding Compensation**

	Yes	No
<b>1a</b> 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.		
<input type="checkbox"/> First-class or charter travel		
<input type="checkbox"/> Travel for companions		
<input type="checkbox"/> Tax indemnification and gross-up payments		
<input type="checkbox"/> Discretionary spending account		
<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 (such as, maid, chauffeur, chef)		
<b>b</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		
<b>2</b> Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?		
<b>3</b> 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.		
<input type="checkbox"/> Compensation committee		
<input type="checkbox"/> Independent compensation consultant		
<input checked="" type="checkbox"/> Form 990 of other organizations		
<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		
<b>4</b> 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:		
<b>a</b> Receive a severance payment or change-of-control payment?		X
<b>b</b> Participate in, or receive payment from, a supplemental nonqualified retirement plan?		X
<b>c</b> Participate in, or receive payment from, an equity-based compensation arrangement?		X
If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.		
<b>Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.</b>		
<b>5</b> 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:		
<b>a</b> The organization?		X
<b>b</b> Any related organization?		X
If "Yes" on line 5a or 5b, describe in Part III		
<b>6</b> 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:		
<b>a</b> The organization?		X
<b>b</b> Any related organization?		X
If "Yes" on line 6a or 6b, describe in Part III		
<b>7</b> For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III		X
<b>8</b> 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		X
<b>9</b> If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?		

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

Schedule J (Form 990) 2017



(Form 990 or 990-EZ)

OMB No. 1545-0047

2017

### Open To Public Inspection

Department of the Treasury  
Internal Revenue Service

► Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

▶ Attach to Form 990 or Form 990-EZ.

► Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

Name of the organization

COMMUNITY VISION CAPITAL & CONSULTING

Employer identification number

94-3032394

<b>Part I</b>	<b>Excess Benefit Transactions</b> (section 501(c)(3), section 501(c)(4), and 501(c)(29) organizations only)
---------------	--

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b

[illegible]

**2** Enter the amount of tax incurred by the organization managers or disqualified persons during the year under section 4958

► \$

**3** Enter the amount of tax, if any, on line 2, above, reimbursed by the organization.

► \$

<b>Part II</b>	<b>Loans to and/or From Interested Persons.</b>
----------------	---

Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a or Form 990, Part IV, line 26, or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22

(a) Name of interested person	(b) Relationship with organization	(c) Purpose of loan	(d) Loan to or from the organization?		(e) Original principal amount	(f) Balance due	(g) In default?		(h) Approved by board or committee?		(i) Written agreement?	
			To	From			Yes	No	Yes	No	Yes	No
MARY A. ROGIER	PRESIDENT	TO FUND	X		3,000.	3,000.		X	X		X	
ILANA SCHATZ	BOARD MEMBER	TO FUND	X		75,000.	75,841.		X	X		X	
Total					\$	78,841.						

<b>Part III</b>	<b>Grants or Assistance Benefiting Interested Persons.</b>
-----------------	--

Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

[illegible]

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

Schedule L (Form 990 or 990-EZ) 2017 9

SEE PART V FOR CONTINUATIONS

**Part IV Business Transactions Involving Interested Persons.**

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

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
LUIS GRENADOS	BOARD MEMBER, IS TH	2,020,000.	OUTSTANDING		X

**Part V Supplemental Information**

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

**SCHEDULE L, PART II, LOANS TO AND FROM INTERESTED PERSONS:**

(A) NAME OF PERSON: MARY A. ROGIER

(B) RELATIONSHIP WITH ORGANIZATION: PRESIDENT

(C) PURPOSE OF LOAN: TO FUND CAPITAL POOL FOR COMMUNITY AND ECONOMIC DEV.

PROJECTS FINANCING

(A) NAME OF PERSON: ILANA SCHATZ

(B) RELATIONSHIP WITH ORGANIZATION: BOARD MEMBER

(C) PURPOSE OF LOAN: TO FUND CAPITAL POOL FOR COMMUNITY AND ECONOMIC DEV.

PROJECTS FINANCING

**SCH L, PART IV, BUSINESS TRANSACTIONS INVOLVING INTERESTED PERSONS:**

(A) NAME OF PERSON: LUIS GRENADOS

(B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION:

BOARD MEMBER, IS THE EXECUTIVE DIRECTOR OF MISSION ECONOMIC DEV. AGENCY

(D) DESCRIPTION OF TRANSACTION: OUTSTANDING LOAN TO MISSION ECONOMIC

DEVELOPMENT AGENCY

**SCHEDULE L, PART II, LOANS FROM INTERESTED PERSONS:****COMMUNITY VISION CAPITAL & CONSULTING OPERATES A REVOLVING LOAN FUND**

Schedule L (Form 990 or 990-EZ) 2017

**Part V** Supplemental Information

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

THAT PROVIDES SOCIALLY MOTIVATED INVESTORS WITH AN OPPORTUNITY TO HELP  
NONPROFIT ORGANIZATIONS PROVIDE AFFORDABLE HOUSING, ESSENTIAL COMMUNITY  
FACILITIES, AND VITAL HUMAN SERVICE. THE REVOLVING LOAN FUND ALSO  
SUPPORTS ENTERPRISE LENDING THAT CONTRIBUTES TO A MORE EQUITABLE AND  
SUSTAINABLE FOOD SYSTEM. QUALIFIED INSTITUTIONS AND INDIVIDUALS INVEST  
IN THE FORM OF FIXED RATE LOANS. COMMUNITY VISION AGGREGATES THESE  
LOANS INTO A CAPITAL POOL WHICH WE USE TO FINANCE APPROPRIATE COMMUNITY  
AND ECONOMIC DEVELOPMENT PROJECTS..

AT THE END OF FY2018, COMMUNITY VISION HAD 291 LOANS IN THIS POOL FROM  
BANKS, CORPORATIONS, INDIVIDUALS, RELIGIOUS GROUPS, HEALTH SYSTEMS AND  
NONPROFIT ORGANIZATIONS. THE PRESIDENT AND ONE DIRECTOR CHOSE TO  
SUPPORT COMMUNITY VISION'S MISSION BY LENDING MONEY TO THE  
ORGANIZATION'S CAPITAL POOL. THESE LOANS WERE ACCEPTED ON TERMS THAT  
CONFORM TO COMMUNITY VISION'S STANDARD POLICIES FOR ACCEPTING LOANS  
INTO THE INVESTMENT POOL; THEY DID NOT REQUIRE SPECIAL APPROVAL FROM  
THE BOARD OF DIRECTORS. DURING FY2018, COMMUNITY VISION HAD OUTSTANDING  
NOTES AS FOLLOWS:

MARY A. ROGIER

PRESIDENT

LOAN MADE TO COMMUNITY VISION: \$3,000 AT 0%

ILANA SCHATZ

BOARD MEMBER

LOAN MADE TO COMMUNITY VISION: \$75,000 AT 1.5%

SCHEDULE L, PART IV, BUSINESS TRANSACTIONS INVOLVING INTERESTED PERSONS:

**Part V** Supplemental Information

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

AS A MISSION-DRIVEN COMMUNITY DEVELOPMENT LENDER, COMMUNITY VISION STRIVES TO INCLUDE CLIENTS AND BORROWERS ON OUR BOARD OF DIRECTORS TO INSURE THAT WE ARE APPROPRIATELY SERVING THESE ORGANIZATIONS. BOARD MEMBER LUIS GRANADOS IS THE EXECUTIVE DIRECTOR OF THE MISSION ECONOMIC DEVELOPMENT AGENCY (MEDA). COMMUNITY VISION HAD THREE LOANS OUTSTANDING TO MEDA DURING FY2018, EACH OF WHICH WAS UNDERWRITTEN AND APPROVED IN ACCORDANCE WITH COMMUNITY VISION'S WRITTEN GUIDELINES AND ON TERMS COMPARABLE TO SIMILAR LOANS IN OUR PORTFOLIO. LUIS GRANADOS DOES NOT SERVE ON THE LOAN COMMITTEE AND WAS NOT INVOLVED IN THE APPROVAL OF THE LOAN.

**SCHEDULE O**  
**(Form 990 or 990-EZ)**

Department of the Treasury  
Internal Revenue Service

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

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

▶ Attach to Form 990 or 990-EZ.

▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

OMB No 1545-0047

**2017**

Open to Public  
Inspection

Name of the organization

COMMUNITY VISION CAPITAL & CONSULTING

Employer identification number

94-3032394

FORM 990, PART I, DOING BUSINESS AS:

NORTHERN CALIFORNIA COMMUNITY LOAN FUND

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

TO MAKE SOCIALLY RESPONSIBLE INVESTMENTS THAT REVITALIZE NORTHERN  
CALIFORNIA COMMUNITIES.

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:

MILLION.

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

NEW MARKETS TAX CREDIT: COMMUNITY VISION HAS RECEIVED A TOTAL \$212  
MILLION IN NEW MARKETS TAX CREDIT (NMTC) ALLOCATION FOR USE IN OUR 46  
NORTHERN AND CENTRAL CALIFORNIA COUNTIES. THE TAX CREDITS ALLOW US TO  
MAKE INVESTMENT CAPITAL AVAILABLE TO BUSINESSES AND NONPROFITS IN  
QUALIFYING LOW-INCOME COMMUNITIES, CREATING JOBS AND SPURRING  
ADDITIONAL ECONOMIC DEVELOPMENT. DURING FY18, COMMUNITY VISION PROVIDED  
\$8.8 MILLION OF ALLOCATION TO FINANCE ONE PROJECT AND MANAGED OUR  
17-PROJECT PORTFOLIO. OUR NMTC PROGRAM HAS HELPED TO CREATE OR PRESERVE  
4,716 JOBS, CREATED 711,463 SQUARE FEET OF COMMUNITY FACILITY SPACE,  
HELPED TO DEVELOP 84 UNITS OF AFFORDABLE HOUSING AND LEVERAGED AN  
ADDITIONAL \$258 MILLION IN PRIVATE INVESTMENT. OVER 618,800 INDIVIDUALS  
WILL BE SERVED BY THE PROJECTS DEVELOPED USING THESE FUNDS. STRATEGIC  
INITIATIVES: COMMUNITY VISION DEVELOPS AND MANAGES TARGETED PROGRAMS  
THAT WILL FACILITATE TECHNICAL ASSISTANCE AND PROVIDE FINANCIAL TOOLS  
SUCH AS CREDIT ENHANCEMENTS FOR SMALL BUSINESSES AND NONPROFITS ENGAGED

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

Schedule O (Form 990 or 990-EZ) (2017)

732211 09-07-17

Name of the organization

COMMUNITY VISION CAPITAL &amp; CONSULTING

Employer identification number

94-3032394

IN COMMUNITY DEVELOPMENT WORK. STRATEGIC INITIATIVES ALSO COORDINATES  
STRATEGIC PLANNING AND PROGRAM EFFORTS AND PROMOTES ALIGNMENT ACROSS  
THE ORGANIZATION.

EXPENSES \$ 984,228. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.

FORM 990, PART VI, SECTION A, LINE 4:

THE ORGANIZATION HAS CHANGED ITS NAME FROM NORTHERN CALIFORNIA COMMUNITY  
LOAN FUND TO COMMUNITY VISION CAPITAL & CONSULTING. IN ADDITION, THE NUMBER  
OF DIRECTORS TO SERVE ON THE BOARD CHANGED FROM NO LESS THAN 13 DIRECTORS  
AND NO MORE THAN 21 DIRECTORS TO NOW NO LESS THAN 11 DIRECTORS BUT NO MORE  
THAN 15 DIRECTORS.

FORM 990, PART VI, SECTION B, LINE 11B:

ALL BOARD MEMBERS RECEIVE A COPY OF THE FORM 990 BEFORE IT IS FILED. BOARD  
MEMBERS ARE ENCOURAGED TO REVIEW THE FORM 990 AND FORWARD THEIR QUESTIONS  
TO THE DIRECTOR OF FINANCE & ADMINISTRATION OR TO COMMUNITY VISION'S  
ACCOUNTING FIRM WHO ADDRESSES THESE QUESTIONS. THE FINANCE COMMITTEE  
REVIEWS THE FORM IN DETAIL PRIOR TO FILING AND RECOMMENDS THE FILING OF THE  
RETURN TO THE FULL BOARD OF DIRECTORS.

FORM 990, PART VI, SECTION B, LINE 12C:

ALL STAFF AND BOARD MEMBERS COMPLETE A DISCLOSURE FORM ANNUALLY. DISCUSSION  
AND DISCLOSURE ARE INCLUDED IN REGULAR BOARD AND COMMITTEE MEETINGS, AS  
APPROPRIATE. IF AN ACTUAL CONFLICT EXISTS, THE PERSON INVOLVED IS TO RECUSE  
THEMSELVES FROM TAKING ACTION ON THE TRANSACTION.

FORM 990, PART VI, SECTION B, LINE 15:

THE PERSONNEL COMMITTEE AND EXECUTIVE COMMITTEE OF THE BOARD OF DIRECTORS

Name of the organization

COMMUNITY VISION CAPITAL &amp; CONSULTING

Employer identification number

94-3032394

REVIEWED SALARY INFORMATION FOR SIMILAR POSITIONS AT OTHER NONPROFIT AND  
COMMUNITY DEVELOPMENT FINANCIAL INSTITUTIONS. THEY CONDUCTED PERFORMANCE  
EVALUATIONS AND SET COMPENSATIONS BASED ON COMMUNITY VISION'S OVERALL  
SALARY STRUCTURE INFORMED BY COMPARABLE SALARY DATA. ALL DISCUSSIONS AND  
DECISIONS WERE DOCUMENTED AND NOTES WERE MAINTAINED IN THE ORGANIZATION'S  
FILES.

FORM 990, PART VI, SECTION C, LINE 19:

THE ORGANIZATION'S GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND  
FINANCIAL STATEMENTS ARE AVAILABLE UPON REQUEST FOR THE SAME PERIOD OF TIME  
SET FORTH IN SEC. 6104(D).





**Part III** Continuation of 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) Disproportion- ate 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			
CHASE NMTC RICHMOND MARITIME INV. FD LLC - 27-3428752, 870 MARKET STREET, SUITE 677, SAN FRANCISCO, CA 94102	NEW MARKETS TAX CREDIT	CA	COMMUNITY VISION CAPITAL & CONSULTING	RELATED	9.	0.		X	N/A	X	.01%
NORTHERN CALIFORNIA COMMUNITY LOAN FUND NMTC SUB-CDE VI, LLC - 26-3765259, 870 MARKET STREET, SUITE 677, SAN	NEW MARKETS TAX CREDIT	CA	COMMUNITY VISION CAPITAL & CONSULTING	RELATED	30,003.	587.		X	N/A	X	.01%
NORTHERN CALIFORNIA COMMUNITY LOAN FUND NMTC SUB-CDE VII, LLC - 80-0931504, 870 MARKET STREET, SUITE 677, SAN	NEW MARKETS TAX CREDIT	CA	COMMUNITY VISION CAPITAL & CONSULTING	RELATED	42,502.	838.		X	N/A	X	.01%
NORTHERN CALIFORNIA COMMUNITY LOAN FUND NMTC SUB-CDE VIII, LLC - 46-2952806, 870 MARKET STREET, SUITE 677, SAN	NEW MARKETS TAX CREDIT	CA	COMMUNITY VISION CAPITAL & CONSULTING	RELATED	27,501.	7,414.		X	N/A	X	.01%
NORTHERN CALIFORNIA COMMUNITY LOAN FUND NMTC SUB-CDE IX, LLC - 46-2960150, 870 MARKET STREET, SUITE 677, SAN	NEW MARKETS TAX CREDIT	CA	COMMUNITY VISION CAPITAL & CONSULTING	RELATED	43,002.	2,349.		X	N/A	X	.01%
NORTHERN CALIFORNIA COMMUNITY LOAN FUND NMTC SUB-CDE X, LLC - 46-2968654, 870 MARKET STREET, SUITE 677, SAN	NEW MARKETS TAX CREDIT	CA	COMMUNITY VISION CAPITAL & CONSULTING	RELATED	43,001.	4,432.		X	N/A	X	.01%
NORTHERN CALIFORNIA COMMUNITY LOAN FUND NMTC SUB-CDE XI, LLC - 80-0934944, 870 MARKET STREET, SUITE 677, SAN	NEW MARKETS TAX CREDIT	CA	COMMUNITY VISION CAPITAL & CONSULTING	RELATED	41,503.	819.		X	N/A	X	.01%
NORTHERN CALIFORNIA COMMUNITY LOAN FUND NMTC SUB-CDE 14, LLC - 47-4524945, 870 MARKET STREET, SUITE 677, SAN	NEW MARKETS TAX CREDIT	CA	COMMUNITY VISION CAPITAL & CONSULTING	RELATED	77,508.	7,998.		X	N/A	X	.01%
NORTHERN CALIFORNIA COMMUNITY LOAN FUND NMTC SUB-CDE 15, LLC - 47-4535771, 870 MARKET STREET, SUITE 677, SAN	NEW MARKETS TAX CREDIT	CA	COMMUNITY VISION CAPITAL & CONSULTING	RELATED	30,012.	603.		X	N/A	X	.01%





**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

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

b Gift, grant, or capital contribution to related organization(s)

c Gift, grant, or capital contribution from related organization(s)

d Loans or loan guarantees to or for related organization(s)

e Loans or loan guarantees by related organization(s)

f Dividends from related organization(s)

g Sale of assets to related organization(s)

h Purchase of assets from related organization(s)

i Exchange of assets with related organization(s)

j Lease of facilities, equipment, or other assets to related organization(s)

k Lease of facilities, equipment, or other assets from related organization(s)

l Performance of services or membership or fundraising solicitations for related organization(s)

m Performance of services or membership or fundraising solicitations by related organization(s)

n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)

o Sharing of paid employees with related organization(s)

p Reimbursement paid to related organization(s) for expenses

q Reimbursement paid by related organization(s) for expenses

r Other transfer of cash or property to related organization(s)

s Other transfer of cash or property from related organization(s)

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

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) NCCLF NMTC SUB-CDE V, LLC	L	53,252.	CONTRACT
(2) NCCLF NMTC SUB-CDE 14, LLC	L	77,500.	CONTRACT
(3)			
(4)			
(5)			
(6)			



**Part VII** Supplemental Information.

Provide additional information for responses to questions on Schedule R. See instructions.

**PART III, IDENTIFICATION OF RELATED ORGANIZATIONS TAXABLE AS PARTNERSHIP:****NAME, ADDRESS, AND EIN OF RELATED ORGANIZATION:**

NORTHERN CALIFORNIA COMMUNITY LOAN FUND NMTC SUB-CDE II,  
LLC

EIN: 26-3764098

870 MARKET STREET, SUITE 677

SAN FRANCISCO, CA 94102

**NAME, ADDRESS, AND EIN OF RELATED ORGANIZATION:**

NORTHERN CALIFORNIA COMMUNITY LOAN FUND NMTC SUB-CDE III,  
LLC

EIN: 26-3764155

870 MARKET STREET, SUITE 677

SAN FRANCISCO, CA 94102

**NAME, ADDRESS, AND EIN OF RELATED ORGANIZATION:**

NORTHERN CALIFORNIA COMMUNITY LOAN FUND NMTC SUB-CDE IV,  
LLC

EIN: 26-3764212

870 MARKET STREET, SUITE 677

SAN FRANCISCO, CA 94102

**NAME, ADDRESS, AND EIN OF RELATED ORGANIZATION:**

NORTHERN CALIFORNIA COMMUNITY LOAN FUND NMTC SUB-CDE V, LLC

EIN: 26-3764429

870 MARKET STREET, SUITE 677

SAN FRANCISCO, CA 94102

**Part VII** Supplemental Information.

Provide additional information for responses to questions on Schedule R. See instructions.

## NAME, ADDRESS, AND EIN OF RELATED ORGANIZATION:

NORTHERN CALIFORNIA COMMUNITY LOAN FUND NMTC SUB-CDE VI,  
LLC

EIN: 26-3765259

870 MARKET STREET, SUITE 677

SAN FRANCISCO, CA 94102

## NAME, ADDRESS, AND EIN OF RELATED ORGANIZATION:

NORTHERN CALIFORNIA COMMUNITY LOAN FUND NMTC SUB-CDE VII,  
LLC

EIN: 80-0931504

870 MARKET STREET, SUITE 677

SAN FRANCISCO, CA 94102

## NAME, ADDRESS, AND EIN OF RELATED ORGANIZATION:

NORTHERN CALIFORNIA COMMUNITY LOAN FUND NMTC SUB-CDE VIII,  
LLC

EIN: 46-2952806

870 MARKET STREET, SUITE 677

SAN FRANCISCO, CA 94102

## NAME, ADDRESS, AND EIN OF RELATED ORGANIZATION:

NORTHERN CALIFORNIA COMMUNITY LOAN FUND NMTC SUB-CDE IX,  
LLC

EIN: 46-2960150

870 MARKET STREET, SUITE 677

SAN FRANCISCO, CA 94102

**Part VII** Supplemental Information.

Provide additional information for responses to questions on Schedule R. See instructions.

## NAME, ADDRESS, AND EIN OF RELATED ORGANIZATION:

NORTHERN CALIFORNIA COMMUNITY LOAN FUND NMTC SUB-CDE X, LLC

EIN: 46-2968654

870 MARKET STREET, SUITE 677

SAN FRANCISCO, CA 94102

## NAME, ADDRESS, AND EIN OF RELATED ORGANIZATION:

NORTHERN CALIFORNIA COMMUNITY LOAN FUND NMTC SUB-CDE XI,

LLC

EIN: 80-0934944

870 MARKET STREET, SUITE 677

SAN FRANCISCO, CA 94102

## NAME, ADDRESS, AND EIN OF RELATED ORGANIZATION:

NORTHERN CALIFORNIA COMMUNITY LOAN FUND NMTC SUB-CDE 14,

LLC

EIN: 47-4524945

870 MARKET STREET, SUITE 677

SAN FRANCISCO, CA 94102

## NAME, ADDRESS, AND EIN OF RELATED ORGANIZATION:

NORTHERN CALIFORNIA COMMUNITY LOAN FUND NMTC SUB-CDE 15,

LLC

EIN: 47-4535771

870 MARKET STREET, SUITE 677

SAN FRANCISCO, CA 94102

**Part VII** Supplemental Information.

Provide additional information for responses to questions on Schedule R. See instructions.

## NAME, ADDRESS, AND EIN OF RELATED ORGANIZATION:

NORTHERN CALIFORNIA COMMUNITY LOAN FUND NMTC SUB-CDE 16,

LLC

EIN: 47-4548038

870 MARKET STREET, SUITE 677

SAN FRANCISCO, CA 94102

## NAME, ADDRESS, AND EIN OF RELATED ORGANIZATION:

NORTHERN CALIFORNIA COMMUNITY LOAN FUND NMTC SUB-CDE 17,

LLC

EIN: 47-4557284

870 MARKET STREET, SUITE 677

SAN FRANCISCO, CA 94102

## NAME, ADDRESS, AND EIN OF RELATED ORGANIZATION:

NORTHERN CALIFORNIA COMMUNITY LOAN FUND NMTC SUB-CDE 18,

LLC

EIN: 47-4570333

870 MARKET STREET, SUITE 677

SAN FRANCISCO, CA 94102

## NAME, ADDRESS, AND EIN OF RELATED ORGANIZATION:

NORTHERN CALIFORNIA COMMUNITY LOAN FUND NMTC SUB-CDE 19,

LLC

EIN: 82-4881789

870 MARKET STREET, SUITE 677

SAN FRANCISCO, CA 94102

**Part VII** Supplemental Information.

Provide additional information for responses to questions on Schedule R. See instructions.

## NAME, ADDRESS, AND EIN OF RELATED ORGANIZATION:

NORTHERN CALIFORNIA COMMUNITY LOAN FUND NMTC SUB-CDE 20,

LLC

EIN: 82-4895633

870 MARKET STREET, SUITE 677

SAN FRANCISCO, CA 94102

## NAME, ADDRESS, AND EIN OF RELATED ORGANIZATION:

NORTHERN CALIFORNIA COMMUNITY LOAN FUND NMTC SUB-CDE 21,

LLC

EIN: 82-4904581

870 MARKET STREET, SUITE 677

SAN FRANCISCO, CA 94102

## NAME, ADDRESS, AND EIN OF RELATED ORGANIZATION:

NORTHERN CALIFORNIA COMMUNITY LOAN FUND NMTC SUB-CDE 22,

LLC

EIN: 82-4921713

870 MARKET STREET, SUITE 677

SAN FRANCISCO, CA 94102

## NAME, ADDRESS, AND EIN OF RELATED ORGANIZATION:

NORTHERN CALIFORNIA COMMUNITY LOAN FUND NMTC SUB-CDE 23,

LLC

EIN: 82-4952887

870 MARKET STREET, SUITE 677

SAN FRANCISCO, CA 94102

**Part VII** Supplemental Information.

Provide additional information for responses to questions on Schedule R. See instructions.

## NAME, ADDRESS, AND EIN OF RELATED ORGANIZATION:

NORTHERN CALIFORNIA COMMUNITY LOAN FUND NMTC SUB-CDE 24,

LLC

EIN: 82-4962734

870 MARKET STREET, SUITE 677

SAN FRANCISCO, CA 94102

## NAME, ADDRESS, AND EIN OF RELATED ORGANIZATION:

NORTHERN CALIFORNIA COMMUNITY LOAN FUND NMTC SUB-CDE 25,

LLC

EIN: 82-4986555

870 MARKET STREET, SUITE 677

SAN FRANCISCO, CA 94102

## NAME, ADDRESS, AND EIN OF RELATED ORGANIZATION:

NORTHERN CALIFORNIA COMMUNITY LOAN FUND NMTC SUB-CDE 26,

LLC

EIN: 82-5011686

870 MARKET STREET, SUITE 677

SAN FRANCISCO, CA 94102

## NAME, ADDRESS, AND EIN OF RELATED ORGANIZATION:

BAY AREA TRANSIT ORIENTED AFFORDABLE HOUSING FUND, LLC

EIN: 27-5288604

50 CALIFORNIA STREET, SUITE 2900

SAN FRANCISCO, CA 94111

## SCHEDULE R, PART III

**Part VII** Supplemental Information.

Provide additional information for responses to questions on Schedule R. See instructions.

COMMUNITY VISION CAPITAL & CONSULTING ("COMMUNITY VISION") IS A CALIFORNIA NONPROFIT PUBLIC BENEFIT ORGANIZATION, A CERTIFIED COMMUNITY DEVELOPMENT FINANCIAL INSTITUTION ("CDFI") AND A CERTIFIED COMMUNITY DEVELOPMENT ENTITY ("CDE"). SINCE 2009, THE CDE HAS RECEIVED SEVEN ALLOCATIONS OF NEW MARKETS TAX CREDIT ("NMTC") AUTHORITY UNDER SECTION 45D OF THE INTERNAL REVENUE CODE OF 1986, AS AMENDED (THE "CODE") TOTALING \$212,000,000.

UNDER THE RULES OF THE NMTC PROGRAM, COMMUNITY VISION AS A NONPROFIT CORPORATION MUST CREATE AND CONDUCT ITS NEW MARKETS PROGRAM THROUGH ONE OR MORE FOR-PROFIT CORPORATIONS OR LIMITED LIABILITY COMPANIES (HEREINAFTER THE "LLC"). THE LLC IS TYPICALLY REFERRED TO AS A "SUBSIDIARY", HOWEVER THE TERM "SUBSIDIARY" IS USED VERY DIFFERENTLY IN THE NEW MARKETS CREDIT PROGRAM THAN IT IS IN NORMAL CORPORATE FINANCE AND ACCOUNTING. IN THE NMTC PROGRAM, THE ECONOMIC INVESTMENT IN THIS "SUBSIDIARY" LLC IS MADE 99.99% BY A THIRD PARTY INVESTOR; AND THAT INVESTOR WILL RECEIVE ALL OF THE TAX BENEFITS. THE TERM "SUBSIDIARY" IS USED BY THE CDFI FUND TO SIGNIFY A RELATIONSHIP WHERE THE NEW FOR-PROFIT LLC IS MANAGED BY THE ALLOCATEE (COMMUNITY VISION) AND WHERE THE ALLOCATEE HAS SUFFICIENT CONTROL OVER THE OPERATIONS AND INVESTMENTS OF THE FOR-PROFIT LLC TO KEEP THE LLC IN COMPLIANCE WITH THE NEW MARKETS PROGRAM RULES. THE CDFI FUND HAS ESTABLISHED RULES TO DETERMINE WHAT CONSTITUTES CONTROL BUT, IN GENERAL, CONTROL MEANS (I) MAINTAINING MANAGEMENT CONTROL BY EITHER ACTING AS MANAGER OR OWNING A MAJORITY INTEREST AND (II) MAINTAINING INVESTMENT CONTROL (VETO POWER) OVER THE QUALIFIED LOW-INCOME COMMUNITY INVESTMENTS ("QLICIS") MADE BY THE SUBSIDIARY CDE.

**Part VII** Supplemental Information.

Provide additional information for responses to questions on Schedule R. See instructions.

IT IS COMMON IN COMMUNITY DEVELOPMENT FINANCING, SUCH AS IN FINANCING OF AFFORDABLE HOUSING, NEW MARKETS LENDING, AND HISTORIC PRESERVATION, FOR NONPROFITS TO BE MANAGING MEMBERS OR GENERAL PARTNERS OF A FOR-PROFIT ENTITY. THE LLC HAS BEEN FORMED WITH A MISSION CONSISTENT WITH THE NONPROFIT'S EXEMPT PURPOSE, AND WILL OPERATE WITHIN THE CONSTRAINTS OF THE FEDERAL NMTC PROGRAM.

IN ADDITION, THE LLC CREATED TO ACT AS CONDUIT LENDER UNDER THE NMTC PROGRAM DOES NOT HAVE A SEPARATE BOARD OF DIRECTORS. ALL DECISIONS FOR THE LLC ARE MADE BY THE MEMBERS. COMMUNITY VISION IS THE MANAGING MEMBER OF THE LLC, AND ALL ACTIONS OF THE LLC IN MAKING AND HOLDING LOANS TO BORROWERS ARE MANAGED BY COMMUNITY VISION UNDER THE LLC'S OPERATING AGREEMENT WITH AN INVESTOR. ACTIONS BY COMMUNITY VISION IN THIS CAPACITY, LIKE ALL ITS OTHER LOAN ACTIVITY TO BORROWERS, ARE MANAGED BY THE STAFF AND OFFICERS OF COMMUNITY VISION UNDER THE DIRECTION OF THE BOARD OF DIRECTORS OF COMMUNITY VISION.

NCTO

A0828425

OFFICERS' CERTIFICATE OF AMENDMENT OF  
ARTICLES OF INCORPORATION

*imk*  
**FILED**  
Secretary of State  
State of California

MAY 20 2019  
*lcc*

The undersigned certify that:

1. They are the **chairperson** of the board and **secretary**, respectively, of  
NORTHERN CALIFORNIA COMMUNITY LOAN FUND, a California  
nonprofit public benefit corporation.
2. Article I of the Articles of Incorporation of this corporation is amended to read as  
follows:  
The name of this corporation is Community Vision Capital & Consulting.
3. The foregoing amendment of Articles of Incorporation has been duly approved by a  
majority of the authorized number of the board of directors.
4. The corporation has no members.

We further declare under penalty of perjury under the laws of the State of California that  
the matters set forth in this certificate are true and correct of our own knowledge.

*Patricia S. GoPaul*  
\_\_\_\_\_  
Patricia GoPaul  
Chairperson of the Board

*8 May 2019*  
\_\_\_\_\_  
Date

*Joy Hoffman*  
\_\_\_\_\_  
Joy Hoffman  
Secretary

*8 May 19*  
\_\_\_\_\_  
Date



I hereby certify that the foregoing  
transcript of 1 page(s)  
is a full, true and correct copy of the  
original record in the custody of the  
California Secretary of State's office.

MAY 21 2019 GS

Date: \_\_\_\_\_

*Alex Padilla*

ALEX PADILLA, Secretary of State