

CitizenAudit.org

Form 990

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

OMB No 1545-0047

2011

Open to Public Inspection

A For the 2011 calendar year, or tax year beginning 01-01-2011 and ending 12-31-2011

B Check if applicable

☐ Address change

☐ Name change

☐ Initial return

☐ Terminated

☐ Amended return

☐ Application pending

C Name of organization
NEW VENTURE FUND

Doing Business As

Number and street (or P O box if mail is not delivered to street address)
734 15TH STREET NW NO 600

Room/suite

City or town, state or country, and ZIP + 4
WASHINGTON, DC 20005

F Name and address of principal officer
ERIC KESSLER
734 15TH STREET NW NO 600
WASHINGTON,DC 20005

H(a) Is this a group return for affiliates?

☐ Yes ☒ No

H(b) Are all affiliates included?

☐ Yes ☐ No

If "No," attach a list (see instructions)

H(c) Group exemption number ▶

I Tax-exempt status

☒ 501(c)(3) ☐ 501(c) () ◀(insert no) ☐ 4947(a)(1) or ☐ 527

J Website: ▶ WWW.NEWVENTUREFUND.ORG

K Form of organization

☒ Corporation ☐ Trust ☐ Association ☐ Other ▶

L Year of formation 2006

M State of legal domicile DC

Part I

Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities
TO SUPPORT INNOVATIVE AND EFFECTIVE PUBLIC INTEREST PROJECTS

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

3 Number of voting members of the governing body (Part VI, line 1a)

35

4 Number of independent voting members of the governing body (Part VI, line 1b)

44

5 Total number of individuals employed in calendar year 2011 (Part V, line 2a)

50

6 Total number of volunteers (estimate if necessary)

65

7a Total unrelated business revenue from Part VIII, column (C), line 12

7a0

7b Net unrelated business taxable income from Form 990-T, line 34

7b0

Revenue

8 Contributions and grants (Part VIII, line 1h)

9 Program service revenue (Part VIII, line 2g)

10 Investment income (Part VIII, column (A), lines 3, 4, and 7 d)

11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)

12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)

Prior Year

16,340,995

401,137

71,129

0

16,813,261

Current Year

35,238,110

1,138,686

162,836

2,716

36,542,348

Expenses

13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)

14 Benefits paid to or for members (Part IX, column (A), line 4)

15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)

16a Professional fundraising fees (Part IX, column (A), line 11e)

736,649

17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)

18 Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)

19 Revenue less expenses Subtract line 18 from line 12

4,105,145

0

0

0

10,788,245

14,893,390

1,919,871

9,217,867

0

0

128,983

15,375,513

24,722,363

11,819,985

Net Assets or Fund Balances

20 Total assets (Part X, line 16)

21 Total liabilities (Part X, line 26)

22 Net assets or fund balances Subtract line 21 from line 20

Beginning of Current Year

19,322,944

1,173,217

18,149,727

End of Year

32,883,497

2,913,785

29,969,712

Part II

Signature Block

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

Sign Here

Signature of officer

ERIC KESSLER, PRESIDENT

2012-11-14

Date

Paid Preparer's Use Only

Preparer's signature

KAREN GRIES

Date

Check if self-employed ☐

Preparer's taxpayer identification number (see instructions)
P00078514

Firm's name (or yours if self-employed), address, and ZIP + 4

CLIFTONLARSONALLEN LLP
4250 N FAIRFAX DRIVE SUITE 1020
ARLINGTON, VA 22203

EIN ▶ 41-0746749

Phone no ▶ (571) 227-9500

May the IRS discuss this return with the preparer shown above? (see instructions) ☒ Yes ☐ No

For Paperwork Reduction Act Notice, see the separate instructions.

Cat No 11282Y

Form 990 (2011)

Part III

Statement of Program Service Accomplishments

Check if Schedule O contains a response to any question in this Part III ☒

1

Briefly describe the organization's mission

FOUNDED IN OCTOBER 2006, THE NEW VENTURE FUND ("NVF") IS A 501(C)(3) PUBLIC CHARITABLE ORGANIZATION DEDICATED TO SUPPORTING INNOVATIVE AND EFFECTIVE PUBLIC INTEREST PROJECTS. THE ORGANIZATION CURRENTLY MANAGES PROGRAMS, PROVIDES FISCAL SPONSORSHIPS TO NONPROFIT ORGANIZATIONS, AND COORDINATES SMALL-GRANTS PROGRAMS. NVF SUPPORTS A RANGE OF PUBLIC INTEREST PROJECTS, THE MAJORITY OF WHICH FOCUS ON CONSERVATION AND GLOBAL HEALTH. NVF HAS ALSO MANAGED PROGRAMS FOCUSED ON VOTER REGISTRATION, EDUCATION, PUBLIC POLICY, DISASTER RECOVERY, AND MUSIC AND THE ARTS.

2

Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☒ 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 and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a

(Code) (Expenses \$ 4,382,468 including grants of \$ 3,009,710) (Revenue \$ 0)

HEALTH PROGRAMS. NVF'S PROGRAMS FOCUSED ON HEALTH INCLUDE THE GLOBAL HEALTH ADVOCACY SMALL GRANTS INITIATIVE, CEO ROUNDTABLE, EVERY MOTHER COUNTS, HEALTH INFORMATION PROJECT, AND KNOW YOUR CARE.

4b

(Code) (Expenses \$ 4,044,138 including grants of \$ 1,477,289) (Revenue \$ 0)

CONSERVATION & ENERGY PROGRAMS. NVF HOSTS A VARIETY OF PROGRAMS FOCUSED ON CONSERVATION. THESE PROGRAMS INCLUDE THE WESTERN ENERGY PROJECT, ORV CAMPAIGN, WESTERN LANDS CONSERVATION PROJECT, PACENOW, AND WILD RIVERS INITIATIVE.

4c

(Code) (Expenses \$ 12,085,219 including grants of \$ 4,210,268) (Revenue \$ 1,138,686)

GLOBAL DEVELOPMENT PROGRAMS. NVF ALSO SUPPORTS A VARIETY OF PROJECTS FOCUSED ON GLOBAL DEVELOPMENT INCLUDING THE EASTERN CONGO INITIATIVE, LAKE TANGANYIKA FLOATING HEALTH CLINIC, PARTNERSHIP FOR SEED DEVELOPMENT IN WEST AFRICA, AND THE FUND FOR GLOBAL DEVELOPMENT.

(Code) (Expenses \$ 1,656,376 including grants of \$ 520,600) (Revenue \$ 0)

NVF ALSO HOSTS OTHER PUBLIC INTEREST PROJECTS. MOST INTERESTINGLY IS THE IDEAS42 PROJECT WHICH APPLIES BEHAVIORAL ECONOMICS TO EVERYDAY SOCIAL PROBLEMS.

4d

Other program services (Describe in Schedule O)

























(Expenses \$ 1,656,376 including grants of \$ 520,600) (Revenue \$)

4e

Total program service expenses \$ 22,168,201

Form 990 (2011)

Part IV Checklist of Required Schedules

| | | Yes | No |
|-----|---|-----|-----|
| 1 | Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A  | 1 | Yes |
| 2 | Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?  | 2 | Yes |
| 3 | Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I  | 3 | No |
| 4 | Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II  | 4 | Yes |
| 5 | Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III  | 5 | No |
| 6 | Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I  | 6 | No |
| 7 | Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," complete Schedule D, Part II  | 7 | No |
| 8 | Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III  | 8 | No |
| 9 | Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV  | 9 | No |
| 10 | Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V  | 10 | No |
| 11 | If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable | | |
| a | Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.  | 11a | Yes |
| b | Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.  | 11b | No |
| c | Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.  | 11c | No |
| d | Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.  | 11d | Yes |
| e | Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.  | 11e | Yes |
| f | Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.  | 11f | Yes |
| 12a | Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII  | 12a | Yes |
| b | Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional  | 12b | No |
| 13 | Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E | 13 | No |
| 14a | Did the organization maintain an office, employees, or agents outside of the United States? | 14a | No |
| b | Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Part I  | 14b | Yes |
| 15 | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the U S ? If "Yes," complete Schedule F, Part II and IV  | 15 | Yes |
| 16 | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the U S ? If "Yes," complete Schedule F, Part III and IV  | 16 | No |
| 17 | Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I  | 17 | Yes |
| 18 | Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II  | 18 | No |
| 19 | Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III  | 19 | No |
| 20a | Did the organization operate one or more hospitals? If "Yes," complete Schedule H | 20a | No |
| b | If "Yes" to line 20a, did the organization attach its audited financial statement to this return? Note. All Form 990 filers that operated one or more hospitals must attach audited financial statements | 20b | |

Part IV

Checklist of Required Schedules (continued)

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

| | | | | | | |
|---|--|------------|-----------|--|------------|----|
| Part V Statements Regarding Other IRS Filings and Tax Compliance | | | | | | |
| Check if Schedule O contains a response to any question in this Part V <input type="checkbox"/> | | | | | | |
| | | Yes | No | | | |
| 1a | Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable. . | 1a | 0 | | | |
| b | Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable. | 1b | 0 | | | |
| c | Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? | 1c | | | | |
| 2a | Enter the number of employees reported on Form W-3, <i>Transmittal of Wage and Tax Statements</i> filed for the calendar year ending with or within the year covered by this return. . | 2a | 0 | | | |
| b | If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions). | 2b | | | | |
| 3a | Did the organization have unrelated business gross income of \$1,000 or more during the year? . | 3a | | | | No |
| b | If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O. . | 3b | | | | |
| 4a | At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account or securities account)? . | 4a | | | No | |
| b | If "Yes," enter the name of the foreign country: _____ See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. | | | | | |
| 5a | Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? . | 5a | | | No | |
| b | Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? | 5b | | | No | |
| c | If "Yes" to line 5a or 5b, did the organization file Form 8886-T? . | 5c | | | | |
| 6a | Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible? . | 6a | | | No | |
| b | If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? . | 6b | | | | |
| 7 | Organizations that may receive deductible contributions under section 170(c). | | | | | |
| a | Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? . | 7a | | | No | |
| b | If "Yes," did the organization notify the donor of the value of the goods or services provided? . | 7b | | | | |
| c | Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? . | 7c | | | No | |
| d | If "Yes," indicate the number of Forms 8282 filed during the year. . | 7d | | | | |
| e | Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? . | 7e | | | No | |
| f | Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . | 7f | | | No | |
| g | If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? . | 7g | | | | |
| h | If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? . | 7h | | | | |
| 8 | Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? . | | | | 8 | |
| 9 | Sponsoring organizations maintaining donor advised funds. | | | | | |
| a | Did the organization make any taxable distributions under section 4966? . | 9a | | | | |
| b | Did the organization make a distribution to a donor, donor advisor, or related person? . | 9b | | | | |
| 10 | Section 501(c)(7) organizations. Enter | | | | | |
| a | Initiation fees and capital contributions included on Part VIII, line 12. . | 10a | | | | |
| b | Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities. | 10b | | | | |
| 11 | Section 501(c)(12) organizations. Enter | | | | | |
| a | Gross income from members or shareholders. . | 11a | | | | |
| b | Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them). . | 11b | | | | |
| 12a | Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? . | | | | 12a | |
| b | If "Yes," enter the amount of tax-exempt interest received or accrued during the year. . | 12b | | | | |
| 13 | Section 501(c)(29) qualified nonprofit health insurance issuers. | | | | | |
| a | Is the organization licensed to issue qualified health plans in more than one state? Note. All 501(c)(29) organizations must list in Schedule O each state in which they are licensed to issue qualified health plans, the amount of reserves required by each state, and the amount of reserves the organization allocated to each state. | 13a | | | | |
| b | Enter the aggregate amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans. . | 13b | | | | |
| c | Enter the aggregate amount of reserves on hand. . | 13c | | | | |
| 14a | Did the organization receive any payments for indoor tanning services during the tax year? . | 14a | | | No | |
| b | If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O. . | 14b | | | | |

Part VI

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

Section A. Governing Body and Management

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

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

| | | | |
|-----|--|-----|-----|
| | | Yes | No |
| 10a | Did the organization have local chapters, branches, or affiliates? | 10a | No |
| 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? | 10b | |
| 11a | Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? | 11a | Yes |
| b | Describe in Schedule O the process, if any, used by the organization to review the Form 990 | | |
| 12a | Did the organization have a written conflict of interest policy? If "No," go to line 13 | 12a | Yes |
| b | Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? | 12b | Yes |
| c | Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done | 12c | Yes |
| 13 | Did the organization have a written whistleblower policy? | 13 | Yes |
| 14 | Did the organization have a written document retention and destruction policy? | 14 | Yes |
| 15 | Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? | | |
| a | The organization's CEO, Executive Director, or top management official | 15a | No |
| b | Other officers or key employees of the organization | 15b | No |
| | If "Yes," to line 15a or 15b, describe the process in Schedule O (see instructions) | | |
| 16a | Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? | 16a | No |
| 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? | 16b | |

Section C. Disclosure

| | |
|----|---|
| 17 | List the States with which a copy of this Form 990 is required to be filed <input checked="" type="checkbox"/> PA |
| 18 | Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. <input type="checkbox"/> Own website <input type="checkbox"/> Another's website <input checked="" type="checkbox"/> Upon request |
| 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. See Additional Data Table. |
| 20 | State the name, physical address, and telephone number of the person who possesses the books and records of the organization <input checked="" type="checkbox"/> ARABELLA PHILANTHROPIC INVESTMENT A 734 15TH STREET NW SUITE 600 WASHINGTON, DC 20005 (202) 595-1020 |

Check if Schedule O contains a response to any question in this Part VII ☐

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

Form **990** (2011)

Part VII

| | | | | |
|-----------|--|---|---|---|
| 1b | Sub-Total | | | |
| c | Total from continuation sheets to Part VII, Section A | | | |
| d | Total (add lines 1b and 1c) | 0 | 0 | 0 |

→ 0

| | | Yes | No |
|----------|---|----------|----|
| 3 | Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i> | 3 | No |
| 4 | 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> | 4 | No |
| 5 | 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> | 5 | No |

Section B. Independent Contractors

\$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 |
|---|--|---------------------|
| ARABELLA ADVISORS 1201 CONNECTICUT AVE NW SUITE 300 WASHINGTON, DC 20036 | MANAGEMENT/OPERATION SVCS, CONSULTING | 2,505,465 |
| STTEP INTERNATIONAL 90 ARCHBISHOP MARIOS III NICONSLA 20005 CY | STRATEGIC CONSULTING | 1,088,196 |
| WILLIAMSWORKS 3417 FREMONT AVE N SUITE 221 SEATTLE, WA 98103 | STRATEGIC CONSULTING/PROJECT MANAGEMENT | 693,735 |
| TURLY PICTURES 360 HAMILTON AVE SUITE 100 WHITE PLAINS, NY 10601 | STRATEGIC CONSULTING/PROJECT MANAGEMENT | 638,729 |
| GLOBAL HEALTH STRATEGIES 27 W 24TH ST SUITE 900 NEW YORK, NY 10010 | STRATEGIC CONSULTING | 475,203 |
| 2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization 19 | | |

Part VIII

Statement of Revenue

| | | | | (A) Total revenue | (B) Related or exempt function revenue | (C) Unrelated business revenue | (D) Revenue excluded from tax under sections 512, 513, or 514 | |
|---|--|--|---------------|----------------------|--|---|---|--|
| Contributions, gifts, grants and other similar amounts | 1a | Federated campaigns . . . | 1a | | | | | |
| | b | Membership dues | 1b | | | | | |
| | c | Fundraising events | 1c | | | | | |
| | d | Related organizations | 1d | | | | | |
| | e | Government grants (contributions) | 1e | | | | | |
| | f | All other contributions, gifts, grants, and similar amounts not included above | 1f | 35,238,110 | | | | |
| | g | Noncash contributions included in lines 1a-1f \$ _____ | | | | | | |
| | h | Total. Add lines 1a-1f | | | 35,238,110 | | | |
| Program Service Revenue | | | Business Code | | | | | |
| | 2a | CONSULTING REVENUE | 900099 | 1,138,686 | 1,138,686 | | | |
| | b | | | | | | | |
| | c | | | | | | | |
| | d | | | | | | | |
| | e | | | | | | | |
| | f | All other program service revenue | | | | | | |
| | g | Total. Add lines 2a-2f | | | 1,138,686 | | | |
| Other Revenue | 3 | Investment income (including dividends, interest and other similar amounts) | | | 162,836 | | 162,836 | |
| | 4 | Income from investment of tax-exempt bond proceeds . . | | | | | | |
| | 5 | Royalties | | | | | | |
| | 6a | (i) Real | | (ii) Personal | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | b | Less rental expenses | | | | | | |
| | c | Rental income or (loss) | | | | | | |
| | d | Net rental income or (loss) | | | | | | |
| | 7a | (i) Securities | | (ii) Other | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | b | Less cost or other basis and sales expenses | | | | | | |
| | c | Gain or (loss) | | | | | | |
| | d | Net gain or (loss) | | | | | | |
| | 8a | Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18 | | a | | | | |
| | b | Less direct expenses | | b | | | | |
| | c | Net income or (loss) from fundraising events . . | | | | | | |
| | 9a | Gross income from gaming activities See Part IV, line 19 | | a | | | | |
| | b | Less direct expenses | | b | | | | |
| | c | Net income or (loss) from gaming activities . . | | | | | | |
| 10a | Gross sales of inventory, less returns and allowances | | a | | | | | |
| b | Less cost of goods sold | | b | | | | | |
| c | Net income or (loss) from sales of inventory . . | | | | | | | |
| | Miscellaneous Revenue | | Business Code | | | | | |
| 11a | REIMBURSED EXPENSES | | 900099 | 2,716 | | | 2,716 | |
| b | | | | | | | | |
| c | | | | | | | | |
| d | All other revenue | | | | | | | |
| e | Total. Add lines 11a-11d | | | 2,716 | | | | |
| 12 | Total revenue. See Instructions | | | 36,542,348 | 1,138,686 | 0 | 165,552 | |

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) but are not required to complete columns (B), (C), and (D)

Check if Schedule O contains a response to any question 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 governments and organizations in the United States See Part IV, line 21 | 4,618,808 | 4,618,808 | | |
| 2 | Grants and other assistance to individuals in the United States See Part IV, line 22 | | | | |
| 3 | Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16 | 4,599,059 | 4,599,059 | | |
| 4 | Benefits paid to or for members | | | | |
| 5 | Compensation of current officers, directors, trustees, and key employees | | | | |
| 6 | Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) | | | | |
| 7 | Other salaries and wages | | | | |
| 8 | Pension plan contributions (include section 401(k) and section 403(b) employer contributions) | | | | |
| 9 | Other employee benefits | | | | |
| 10 | Payroll taxes | | | | |
| 11 | Fees for services (non-employees) | | | | |
| a | Management | 1,160,845 | 902,879 | 257,966 | |
| b | Legal | 405,863 | | 397,800 | 8,063 |
| c | Accounting | 19,361 | | 19,361 | |
| d | Lobbying | | | | |
| e | Professional fundraising See Part IV, line 17 | 128,983 | | | 128,983 |
| f | Investment management fees | | | | |
| g | Other | 11,608,509 | 10,236,071 | 777,087 | 595,351 |
| 12 | Advertising and promotion | 3,840 | 3,840 | | |
| 13 | Office expenses | 181,754 | 74,721 | 107,033 | |
| 14 | Information technology | 116,972 | 72,523 | 44,449 | |
| 15 | Royalties | | | | |
| 16 | Occupancy | 54,838 | | 54,838 | |
| 17 | Travel | 1,233,445 | 1,229,331 | 3,768 | 346 |
| 18 | Payments of travel or entertainment expenses for any federal, state, or local public officials | | | | |
| 19 | Conferences, conventions, and meetings | 96,109 | 94,990 | 970 | 149 |
| 20 | Interest | | | | |
| 21 | Payments to affiliates | | | | |
| 22 | Depreciation, depletion, and amortization | 5,781 | | 5,781 | |
| 23 | Insurance | | | | |
| 24 | Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O) | | | | |
| a | MISCELLANEOUS | 300,040 | 199,848 | 99,983 | 209 |
| b | EQUIPMENT | 102,931 | 73,115 | 29,816 | |
| c | DUES AND SUBSCRIPTIONS | 46,284 | 37,138 | 9,146 | |
| d | LICENSES AND FEES | 38,941 | 25,878 | 9,515 | 3,548 |
| e | | | | | |
| f | All other expenses | | | | |
| 25 | Total functional expenses. Add lines 1 through 24f | 24,722,363 | 22,168,201 | 1,817,513 | 736,649 |
| 26 | Joint costs. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation | | | | |

Part X

Balance Sheet

| | | | | | (A) | | (B) |
|-----------------------------|---|---|-----|--------|-------------------|-----|-------------|
| | | | | | Beginning of year | | End of year |
| Assets | 1 | Cash—non-interest-bearing | | | 2,756,601 | 1 | 8,930,090 |
| | 2 | Savings and temporary cash investments | | | 12,966,400 | 2 | 16,627,556 |
| | 3 | Pledges and grants receivable, net | | | 3,299,979 | 3 | 3,125,000 |
| | 4 | Accounts receivable, net | | | 6,078 | 4 | 205,256 |
| | 5 | Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L | | | | 5 | |
| | 6 | Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L | | | | 6 | |
| | 7 | Notes and loans receivable, net | | | | 7 | |
| | 8 | Inventories for sale or use | | | | 8 | |
| | 9 | Prepaid expenses and deferred charges | | | 281,128 | 9 | 1,221,706 |
| | 10a | Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D | 10a | 17,344 | | | |
| | b | Less: accumulated depreciation | 10b | 10,367 | 12,758 | 10c | 6,977 |
| | 11 | Investments—publicly traded securities | | | | 11 | |
| | 12 | Investments—other securities. See Part IV, line 11 | | | | 12 | |
| | 13 | Investments—program-related. See Part IV, line 11 | | | | 13 | |
| | 14 | Intangible assets | | | | 14 | |
| | 15 | Other assets. See Part IV, line 11 | | | 0 | 15 | 2,766,912 |
| | 16 | Total assets. Add lines 1 through 15 (must equal line 34) | | | 19,322,944 | 16 | 32,883,497 |
| Liabilities | 17 | Accounts payable and accrued expenses | | | 758,853 | 17 | 1,593,259 |
| | 18 | Grants payable | | | 388,048 | 18 | 690,000 |
| | 19 | Deferred revenue | | | 26,316 | 19 | 0 |
| | 20 | Tax-exempt bond liabilities | | | | 20 | |
| | 21 | Escrow or custodial account liability. Complete Part IV of Schedule D | | | | 21 | |
| | 22 | Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L | | | | 22 | |
| | 23 | Secured mortgages and notes payable to unrelated third parties | | | | 23 | |
| | 24 | Unsecured notes and loans payable to unrelated third parties | | | | 24 | |
| | 25 | Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D | | | 0 | 25 | 630,526 |
| | 26 | Total liabilities. Add lines 17 through 25 | | | 1,173,217 | 26 | 2,913,785 |
| Net Assets or Fund Balances | Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34. | | | | | | |
| | 27 | Unrestricted net assets | | | 313,914 | 27 | 340,436 |
| | 28 | Temporarily restricted net assets | | | 17,835,813 | 28 | 29,629,276 |
| | 29 | Permanently restricted net assets | | | | 29 | |
| | Organizations that do not follow SFAS 117, 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 | Total net assets or fund balances | | | 18,149,727 | 33 | 29,969,712 |
| | 34 | Total liabilities and net assets/fund balances | | | 19,322,944 | 34 | 32,883,497 |

Part XI Reconciliation of Net Assets

Check if Schedule O contains a response to any question in this Part XI

| | | | |
|---|---|---|------------|
| 1 | Total revenue (must equal Part VIII, column (A), line 12) | 1 | 36,542,348 |
| 2 | Total expenses (must equal Part IX, column (A), line 25) | 2 | 24,722,363 |
| 3 | Revenue less expenses Subtract line 2 from line 1 | 3 | 11,819,985 |
| 4 | Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) | 4 | 18,149,727 |
| 5 | Other changes in net assets or fund balances (explain in Schedule O) | 5 | 0 |
| 6 | Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B)) | 6 | 29,969,712 |

Part XII Financial Statements and Reporting

Check if Schedule O contains a response to any question 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 | | |
| 2a | Were the organization's financial statements compiled or reviewed by an independent accountant? | | No |
| b | Were the organization's financial statements audited by an independent accountant? | Yes | |
| c | If "Yes," to 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 | Yes | |
| d | If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued 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 separated basis | | |
| 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? | | No |
| 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 | | |

SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

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

OMB No 1545-0047

2011

Open to Public Inspection

| | |
|--|--|
| Name of the organization NEW VENTURE FUND | Employer identification number 20-5806345 |
|--|--|

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

The organization is not a private foundation because it is (For lines 1 through 11, check only one box)

1

☐

A church, convention of churches, or association of churches **section 170(b)(1)(A)(i).**

2

☐

A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E)

3

☐

A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**

4

☐

A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state

5

☐

An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II)

6

☐

A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**

7

☒

An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)** (Complete Part II)

8

☐

A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II)

9

☐

An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2).** (Complete Part III)

10

☐

An organization organized and operated exclusively to test for public safety See**section 509(a)(4).**

11

☐

An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See **section 509(a)(3).** Check the box that describes the type of supporting organization and complete lines 11e through 11h

a

☐

Type I

b

☐

Type II

c

☐

Type III - Functionally integrated

d

☐

Type III - Other

e

☐

By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)

f

☐

If the organization received a written determination from the IRS that it is a Type I, Type II or Type III supporting organization, check this box

g

☐

Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

(i)

a person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the the supported organization?

(ii)

a family member of a person described in (i) above?

(iii)

a 35% controlled entity of a person described in (i) or (ii) above?

h

☐

Provide the following information about the supported organization(s)

| | Yes | No |
|----------|-----|----|
| 11g(i) | | |
| 11g(ii) | | |
| 11g(iii) | | |

| (i) Name of supported organization | (ii) EIN | (iii) Type of organization (described on lines 1- 9 above or IRC section (see instructions)) | (iv) Is the organization in col (i) listed in your governing document? | | (v) Did you notify the organization in col (i) of your support? | | (vi) Is the organization in col (i) organized in the U S ? | | (vii) Amount of support? |
|---------------------------------------|-------------|---|---|----|--|----|---|----|-----------------------------|
| | | | Yes | No | Yes | No | Yes | No | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| Total | | | | | | | | | |

Part II

Support Schedule for Organizations Described in IRC 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) 2007 | (b) 2008 | (c) 2009 | (d) 2010 | (e) 2011 | (f) Total |
|---|-----------|-----------|------------|------------|------------|------------|
| 1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.") | 1,658,161 | 5,998,667 | 23,888,800 | 16,340,995 | 35,238,110 | 83,124,733 |
| 2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf | | | | | | |
| 3 The value of services or facilities furnished by a governmental unit to the organization without charge | | | | | | |
| 4 Total. Add lines 1 through 3 | 1,658,161 | 5,998,667 | 23,888,800 | 16,340,995 | 35,238,110 | 83,124,733 |
| 5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) | | | | | | 42,862,122 |
| 6 Public Support. Subtract line 5 from line 4 | | | | | | 40,262,611 |

Section B. Total Support

| Calendar year (or fiscal year beginning in) | (a) 2007 | (b) 2008 | (c) 2009 | (d) 2010 | (e) 2011 | (f) Total |
|--|-----------|-----------|------------|------------|------------|------------|
| 7 Amounts from line 4 | 1,658,161 | 5,998,667 | 23,888,800 | 16,340,995 | 35,238,110 | 83,124,733 |
| 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources | 5,202 | 13,115 | 16,741 | 71,129 | 162,836 | 269,023 |
| 9 Net income from unrelated business activities, whether or not the business is regularly carried on | | | | | | |
| 10 Other income (Explain in Part IV) Do not include gain or loss from the sale of capital assets | | | | | 2,716 | 2,716 |
| 11 Total support (Add lines 7 through 10) | | | | | | 83,396,472 |
| 12 Gross receipts from related activities, etc (See instructions) | | | | | 12 | 4,421,907 |

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

☒

Section C. Computation of Public Support Percentage

| | | |
|---|----|--|
| 14 Public Support Percentage for 2011 (line 6 column (f) divided by line 11 column (f)) | 14 | |
| 15 Public Support Percentage for 2010 Schedule A, Part II, line 14 | 15 | |

- 16a 33 1/3% support test—2011. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization
- ☒
- b 33 1/3% support test—2010. If the organization did not check the box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization
- ☒
- 17a 10%-facts-and-circumstances test—2011. If the organization did not check a box on line 13, 16a, or 16b and line 14 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization
- ☒
- b 10%-facts-and-circumstances test—2010. If the organization did not check a box on line 13, 16a, 16b, or 17a and line 15 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization
- ☒
- 18 Private Foundation If the organization did not check a box on line 13, 16a, 16b, 17a or 17b, check this box and see instructions
- ☒

Part IIIPart III

Support Schedule for Organizations Described in IRC 509(a)(2)
(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

| Section A. Public Support | | | | | | |
|--|----------|----------|----------|----------|----------|-----------|
| Calendar year (or fiscal year beginning in) | (a) 2007 | (b) 2008 | (c) 2009 | (d) 2010 | (e) 2011 | (f) Total |
| 1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.") | | | | | | |
| 2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose | | | | | | |
| 3 Gross receipts from activities that are not an unrelated trade or business under section 513 | | | | | | |
| 4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf | | | | | | |
| 5 The value of services or facilities furnished by a governmental unit to the organization without charge | | | | | | |
| 6 Total. Add lines 1 through 5 | | | | | | |
| 7a Amounts included on lines 1, 2, and 3 received from disqualified persons | | | | | | |
| b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year | | | | | | |
| c Add lines 7a and 7b | | | | | | |
| 8 Public Support (Subtract line 7c from line 6) | | | | | | |

| Section B. Total Support | | | | | | |
|---|----------|----------|----------|----------|----------|-----------|
| Calendar year (or fiscal year beginning in) | (a) 2007 | (b) 2008 | (c) 2009 | (d) 2010 | (e) 2011 | (f) Total |
| 9 Amounts from line 6 | | | | | | |
| 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources | | | | | | |
| b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 | | | | | | |
| c Add lines 10a and 10b | | | | | | |
| 11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on | | | | | | |
| 12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) | | | | | | |
| 13 Total support (Add lines 9, 10c, 11 and 12.) | | | | | | |
| 14 First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here | | | | | | |

| Section C. Computation of Public Support Percentage | | |
|---|----|--|
| 15 Public Support Percentage for 2011 (line 8 column (f) divided by line 13 column (f)) | 15 | |
| 16 Public support percentage from 2010 Schedule A, Part III, line 15 | 16 | |

| Section D. Computation of Investment Income Percentage | | |
|--|----|--|
| 17 Investment income percentage for 2011 (line 10c column (f) divided by line 13 column (f)) | 17 | |
| 18 Investment income percentage from 2010 Schedule A, Part III, line 17 | 18 | |
| 19a 33 1/3% support tests—2011. 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—2010. 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 **Supplemental Information.** Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Also complete this part for any additional information. (See instructions).

| |
|-------------------------------------|
| Facts And Circumstances Test |
| |

| |
|--------------------|
| Explanation |
| |
| |
| |
| |

SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Political Campaign and Lobbying Activities

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

▶ Complete if the organization is described below.

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

OMB No 1545-0047

2011

Open to Public Inspection

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

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

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

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

If the organization answered “Yes,” to Form 990, Part IV, Line 5 (Proxy Tax) or Form 990-EZ, line 35c (Proxy Tax), then

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

| | |
|--|--|
| Name of the organization NEW VENTURE FUND | Employer identification number 20-5806345 |
|--|--|

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 on behalf of or in opposition to candidates for public office in Part IV | |
| 2 | Political expenditures | ▶ \$ |
| 3 | Volunteer hours | |

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? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 4a | Was a correction made? | <input type="checkbox"/> Yes <input type="checkbox"/> 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 funtion 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? | <input type="checkbox"/> Yes <input type="checkbox"/> 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- |
|----------|-------------|---------|---|--|
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

Part II-A

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

- A

Check

☐

if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures)
- B

Check

☐

if the filing organization checked box A and "limited control" provisions apply

| Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.) | | (a) Filing Organization's Totals | (b) Affiliated Group Totals | | | | | | | | | | | | |
|--|---|---|--|--------------------|------------------------------|---|---|---|---|--|--|-------------------|-------------|--|--|
| 1a | Total lobbying expenditures to influence public opinion (grass roots lobbying) | 94,246 | | | | | | | | | | | | | |
| b | Total lobbying expenditures to influence a legislative body (direct lobbying) | 193,172 | | | | | | | | | | | | | |
| c | Total lobbying expenditures (add lines 1a and 1b) | 287,418 | | | | | | | | | | | | | |
| d | Other exempt purpose expenditures | 23,698,297 | | | | | | | | | | | | | |
| e | Total exempt purpose expenditures (add lines 1c and 1d) | 23,985,715 | | | | | | | | | | | | | |
| f | Lobbying nontaxable amount Enter the amount from the following table in both columns | 1,000,000 | | | | | | | | | | | | | |
| <table><tr><td>If the amount on line 1e, column (a) or (b) is:</td><td>The lobbying nontaxable amount is:</td></tr><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></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 | | | | | | | | | | | | | | |
| g | Grassroots nontaxable amount (enter 25% of line 1f) | 250,000 | | | | | | | | | | | | | |
| h | Subtract line 1g from line 1a If zero or less, enter -0- | 0 | | | | | | | | | | | | | |
| i | Subtract line 1f from line 1c If zero or less, enter -0- | 0 | | | | | | | | | | | | | |
| j | If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? | | <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 instructions for lines 2a through 2f on page 4.)

| Lobbying Expenditures During 4-Year Averaging Period | | | | | |
|--|----------|----------|----------|-----------|-----------|
| Calendar year (or fiscal year beginning in) | (a) 2008 | (b) 2009 | (c) 2010 | (d) 2011 | (e) Total |
| 2a Lobbying non-taxable amount | 349,962 | 833,756 | 874,352 | 1,000,000 | 3,058,070 |
| b Lobbying ceiling amount (150% of line 2a, column(e)) | | | | | 4,587,105 |
| c Total lobbying expenditures | 226,943 | 104,146 | 144,599 | 287,418 | 763,106 |
| d Grassroots non-taxable amount | 87,491 | 208,439 | 218,588 | 250,000 | 764,518 |
| e Grassroots ceiling amount (150% of line 2d, column (e)) | | | | | 1,146,777 |
| f Grassroots lobbying expenditures | 5,436 | 40,407 | 3,475 | 94,246 | 143,564 |

Part II-B

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

| | | (a) | | (b) |
|----|--|-----|----|--------|
| | | Yes | No | Amount |
| 1 | During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of | | | |
| a | Volunteers? | | | |
| b | Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? | | | |
| c | Media advertisements? | | | |
| d | Mailings to members, legislators, or the public? | | | |
| e | Publications, or published or broadcast statements? | | | |
| f | Grants to other organizations for lobbying purposes? | | | |
| g | Direct contact with legislators, their staffs, government officials, or a legislative body? | | | |
| h | Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? | | | |
| i | Other activities? If "Yes," describe in Part IV | | | |
| j | Total lines 1c through 1i | | | |
| 2a | Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? | | | |
| b | If "Yes," enter the amount of any tax incurred under section 4912 | | | |
| c | If "Yes," enter the amount of any tax incurred by organization managers under section 4912 | | | |
| d | If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? | | | |

Part III-A

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

| | | | Yes | No |
|---|--|---|-----|----|
| 1 | Were substantially all (90% or more) dues received nondeductible by members? | 1 | | |
| 2 | Did the organization make only in-house lobbying expenditures of \$2,000 or less? | 2 | | |
| 3 | Did the organization agree to carryover lobbying and political expenditures from the prior year? | 3 | | |

Part III-B

Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, line 3 is answered "Yes".

| | | | |
|---|--|----|--|
| 1 | Dues, assessments and similar amounts from members | 1 | |
| 2 | Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). | 2a | |
| a | Current year | | |
| b | Carryover from last year | | |
| c | Total | | |
| 3 | Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues | 3 | |
| 4 | If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year? | 4 | |
| 5 | Taxable amount of lobbying and political expenditures (see instructions) | 5 | |

Part IV

Supplemental Information

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, and Part II-B, line 1i. Also, complete this part for any additional information.

| Identifier | Return Reference | Explanation |
|------------|------------------|-------------|
|------------|------------------|-------------|

SCHEDULE D
(Form 990)

Supplemental Financial Statements

OMB No 1545-0047

2011

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

| | |
|--|--|
| Name of the organization NEW VENTURE FUND | Employer identification number 20-5806345 |
|--|--|

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

| | | |
|---|--|--|
| | (a) Donor advised funds | (b) Funds and other accounts |
| 1 | Total number at end of year | |
| 2 | Aggregate contributions to (during year) | |
| 3 | Aggregate grants from (during year) | |
| 4 | Aggregate value at end of year | |
| 5 | Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 6 | Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may 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 | <input type="checkbox"/> Yes <input type="checkbox"/> No |

Part II Conservation Easements. Complete if the organization answered "Yes" to 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 pleasure)
☐ Protection of natural habitat
☐ Preservation of open space
☐ Preservation of an historically importantly land area
☐ Preservation of a certified historic structure

2

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

| | |
|---|--|
| | Held at the End of the 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 8/17/06 |

3

Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable 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 and enforcing conservation easements during the year

7

Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year

\$

8

Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?

☐ Yes ☐ No

9

In Part XIV, 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" to Form 990, Part IV, line 8.

1a

If the organization elected, as permitted under SFAS 116, 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 XIV, the text of the footnote to its financial statements that describes these items

b

If the organization elected, as permitted under SFAS 116, 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)

Revenues included in Form 990, Part VIII, line 1

\$

(ii)

Assets included in Form 990, Part X

\$

2

If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items

a

Revenues included in Form 990, Part VIII, line 1

\$

b

Assets included in Form 990, Part X

\$

Part III

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

3

Using the organization's accession and other records, check any of the following that are a significant use of its collection items (check all that apply)

a

☐ Public exhibition

b

☐ Scholarly research

c

☐ Preservation for future generations

d

☐ Loan or exchange programs

e

☐ Other

4

Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV

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" to 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 XIV and complete the following table

| | |
|----|--------|
| | Amount |
| 1c | |
| 1d | |
| 1e | |
| 1f | |

2a

Did the organization include an amount on Form 990, Part X, line 21?

☐ Yes

☐ No

b

If "Yes," explain the arrangement in Part XIV

Part V

Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

| | | | | | |
|----|--|---------------|-------------------|---------------------|--------------------|
| | (a)Current Year | (b)Prior Year | (c)Two Years Back | (d)Three Years Back | (e)Four Years Back |
| 1a | Beginning of year balance | | | | |
| b | Contributions | | | | |
| c | Investment earnings or losses | | | | |
| d | Grants or scholarships | | | | |
| e | Other expenditures for facilities and programs | | | | |
| f | Administrative expenses | | | | |
| g | End of year balance | | | | |

2

Provide the estimated percentage of the year end balance held as

a

Board designated or quasi-endowment ▶

b

Permanent endowment ▶

c

Term endowment ▶

3a

Are there endowment funds not in the possession of the organization that are held and administered for the organization by

(i)

unrelated organizations

3a(i)

☐ Yes

☐ No

(ii)

related organizations

3a(ii)

☐ Yes

☐ No

b

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

3b

☐ Yes

☐ No

4

Describe in Part XIV the intended uses of the organization's endowment funds

Part VI

Land, Buildings, and Equipment. 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 | | | | |
| d Equipment | | 17,344 | 10,367 | 6,977 |
| e Other | | | | |
| Total. Add lines 1a-1e (Column (d) should equal Form 990, Part X, column (B), line 10(c).) | | | | 6,977 |

| Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements | | |
|--|---|-------------|
| 1 | Total revenue (Form 990, Part VIII, column (A), line 12) | 136,542,348 |
| 2 | Total expenses (Form 990, Part IX, column (A), line 25) | 24,722,363 |
| 3 | Excess or (deficit) for the year Subtract line 2 from line 1 | 11,819,985 |
| 4 | Net unrealized gains (losses) on investments | |
| 5 | Donated services and use of facilities | |
| 6 | Investment expenses | |
| 7 | Prior period adjustments | |
| 8 | Other (Describe in Part XIV) | |
| 9 | Total adjustments (net) Add lines 4 - 8 | |
| 10 | Excess or (deficit) for the year per financial statements Combine lines 3 and 9 | 11,819,985 |

| Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return | | |
|---|--|-------------|
| 1 | Total revenue, gains, and other support per audited financial statements | 136,542,348 |
| 2 | Amounts included on line 1 but not on Form 990, Part VIII, line 12 | |
| a | Net unrealized gains on investments2a | |
| b | Donated services and use of facilities2b | |
| c | Recoveries of prior year grants2c | |
| d | Other (Describe in Part XIV)2d | |
| e | Add lines 2a through 2d | 2e0 |
| 3 | Subtract line 2e from line 1 | 336,542,348 |
| 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 7b4a | |
| b | Other (Describe in Part XIV)4b | |
| c | Add lines 4a and 4b | 4c0 |
| 5 | Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12) | 536,542,348 |

| Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return | | |
|--|---|-------------|
| 1 | Total expenses and losses per audited financial statements | 124,722,363 |
| 2 | Amounts included on line 1 but not on Form 990, Part IX, line 25 | |
| a | Donated services and use of facilities2a | |
| b | Prior year adjustments2b | |
| c | Other losses2c | |
| d | Other (Describe in Part XIV)2d | |
| e | Add lines 2a through 2d | 2e0 |
| 3 | Subtract line 2e from line 1 | 324,722,363 |
| 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 7b4a | |
| b | Other (Describe in Part XIV)4b | |
| c | Add lines 4a and 4b | 4c0 |
| 5 | Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18) | 524,722,363 |

Part XIV Supplemental Information

Complete this part to 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, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.

| Identifier | Return Reference | Explanation |
|---|------------------|---|
| DESCRIPTION OF UNCERTAIN TAX POSITIONS UNDER FIN 48 | PART X | NVF IS EXEMPT FROM FEDERAL INCOME TAX UNDER SECTION 501(A) OF THE INTERNAL REVENUE CODE AS AN ORGANIZATION DESCRIBED IN SECTION 501(C)(3). THE INTERNAL REVENUE SERVICE RECOGNIZES THE ORGANIZATION'S STATUS AS A PUBLIC CHARITY ORGANIZATION. NVF'S INCOME TAX RETURNS ARE SUBJECT TO REVIEW AND EXAMINATION BY FEDERAL AND STATE AUTHORITIES. THE FUND IS NOT AWARE OF ANY ACTIVITIES THAT WOULD JEOPARDIZE ITS TAX-EXEMPT STATUS. NVF IS NOT AWARE OF ANY ACTIVITIES THAT ARE SUBJECT TO TAX ON UNRELATED BUSINESS INCOME OR EXCISE OR OTHER TAXES. THE TAX RETURNS FOR THE FISCAL YEARS ENDED 2008 THROUGH 2010 ARE OPEN TO EXAMINATION BY FEDERAL AND STATE AUTHORITIES. |

OMB No 1545-0047

Open to Public Inspection

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

▶ **Attach to Form 990. ▶ See separate instructions.**

Employer identification number

20-5806345

1 For grantmakers. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☒ **Yes** ☐ **No**

3 Activities per Region (Use Part V if additional space is needed)

Schedule F (Form 990) 2011

[illegible]**Schedule F (Form 990) 2011**

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

[illegible]

Part IV Foreign Forms

- 1

Was the organization a U S transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926 (see instructions for Form 926)*

☐

Yes

☒

No
- 2

Did the organization have an interest in a foreign trust during the tax year? *If " Yes," the organization may be required to file Form 3520 and/or Form 3520-A. (see instructions for Forms 3520 and 3520-A)*

☐

Yes

☒

No
- 3

Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with respect to Certain Foreign Corporations. (see instructions for Form 5471)*

☐

Yes

☒

No
- 4

Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see instructions for Form 8621)*

☐

Yes

☒

No
- 5

Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with respect to Certain Foreign Partnerships. (see instructions for Form 8865)*

☐

Yes

☒

No
- 6

Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to file Form 5713, International Boycott Report (see instructions for Form 5713).*

☐

Yes

☒

No

Complete this part to provide the information (see instructions) required in Part I, line 2, and any additional information.

Schedule F (Form 990) 2011

Additional Data

Software ID:
Software Version:
EIN: 20-5806345
Name: NEW VENTURE FUND

Form 990 Schedule F Part II - Grants or Entities Outside The United States

| (a) Name of organization | (b) IRS code section and EIN (if applicable) | (c) Region | (d) Purpose of grant | (e) Amount of cash grant | (f) Manner of cash disbursement | (g) Amount of non-cash assistance | (h) Description of non-cash assistance | (i) Method of valuation (book, FMV, appraisal, other) |
|--------------------------|--|---------------------------|--|--------------------------|---------------------------------|-----------------------------------|--|---|
| | | EAST ASIA AND THE PACIFIC | TO FUND THE ORGANIZATION'S CREATING THE JAPANESE DIET TASK FORCE ON POLIO ERADICATION AND GLOBAL HEALTH PROJECT | 100,000 | | | | |
| | | EAST ASIA AND THE PACIFIC | TO SUPPORT FOR THE 6TH ASIA PACIFIC CONFERENCE ON REPRODUCTIVE AND SEXUAL HEALTH AND RIGHT ASIAN PACIFIC NETWORKS FOCUSED ON FAMILY PLANNING AND REPRODUCTIVE HEALTH | 150,000 | | | | |
| | | EUROPE | GENERAL SUPPORT GRANT | 9,600 | | | | |

Form 990 Schedule F Part II - Grants or Entities Outside The United States

| (a) Name of organization | (b) IRS code section and EIN (if applicable) | (c) Region | (d) Purpose of grant | (e) Amount of cash grant | (f) Manner of cash disbursement | (g) Amount of non-cash assistance | (h) Description of non-cash assistance | (i) Method of valuation (book, FMV, appraisal, other) |
|--------------------------|--|------------|--|--------------------------|---------------------------------|-----------------------------------|--|---|
| | | EUROPE | GENERAL SUPPORT GRANT | 30,000 | | | | |
| | | EUROPE | TO FUND THE ORGANIZATION'S JOINT ACTION TOWARDS 2015 AND BEYOND PROJECT | 30,000 | | | | |
| | | EUROPE | TO ENHANCE THE CAPACITY OF CIVIL SOCIETY AND COMMUNITY-BASED ORGANIZATIONS TO BE REACH UNIVERSAL ACCESS TO HIV/AIDS PREVENTION, TREATMENT AND CARE TARGETS BY DEVELOPING A NETWORKS CAPACITY BUILDING FUND | 35,014 | | | | |

Form 990 Schedule F Part II - Grants or Entities Outside The United States

| (a) Name of organization | (b) IRS code section and EIN (if applicable) | (c) Region | (d) Purpose of grant | (e) Amount of cash grant | (f) Manner of cash disbursement | (g) Amount of non-cash assistance | (h) Description of non-cash assistance | (i) Method of valuation (book, FMV, appraisal, other) |
|--------------------------|--|------------|---|--------------------------|---------------------------------|-----------------------------------|--|---|
| | | EUROPE | GRANT TO ORGANIZATION IN THE UK FOR COMMUNITY BASED DDR PROJECT IN DEMOCRATIC REPUBLIC OF THE CONGO | 39,025 | | | | |
| | | EUROPE | TO FUND THE ORGANIZATION'S GLOBAL TRANSPARENCY IN AID PROJECT | 42,040 | | | | |
| | | EUROPE | TO FUND THE IMPLEMENTATION OF THE DATA ANALYSIS ON IUD AND HORMONAL CONTRACEPTIVE PROJECT | 50,000 | | | | |

Form 990 Schedule F Part II - Grants or Entities Outside The United States

| (a) Name of organization | (b) IRS code section and EIN (if applicable) | (c) Region | (d) Purpose of grant | (e) Amount of cash grant | (f) Manner of cash disbursement | (g) Amount of non-cash assistance | (h) Description of non-cash assistance | (i) Method of valuation (book, FMV, appraisal, other) |
|--------------------------|--|------------|--|--------------------------|---------------------------------|-----------------------------------|--|---|
| | | EUROPE | TO FUND THE ORGANIZATION'S GLOBAL INTERFAITH ADVOCACY PROJECT | 59,565 | | | | |
| | | EUROPE | TO FUND THE ORGANIZATION'S GLOBAL PARLIAMENTARY SUMMIT PROJECT | 70,000 | | | | |
| | | EUROPE | GRANT TO ORGANIZATION IN FRANCE TO SUPPORT A FAMILY PLANNING WORKSHOP FOR FRANCOPHONE WESTERN AFRICAN COUNTRIES TO PROMOTE, PLAN AND IMPLEMENT FAMILY PLANNING POLICIES AND OPERATIONAL PROGRAMS | 86,068 | | | | |

Form 990 Schedule F Part II - Grants or Entities Outside The United States

| (a) Name of organization | (b) IRS code section and EIN (if applicable) | (c) Region | (d) Purpose of grant | (e) Amount of cash grant | (f) Manner of cash disbursement | (g) Amount of non-cash assistance | (h) Description of non-cash assistance | (i) Method of valuation (book, FMV, appraisal, other) |
|--------------------------|--|------------|---|--------------------------|---------------------------------|-----------------------------------|--|---|
| | | EUROPE | GENERAL SUPPORT GRANT | 155,808 | | | | |
| | | EUROPE | TO FUND THE ORGANIZATION'S ELDERS PROJECT | 333,333 | | | | |
| | | EUROPE | GRANT TO ORGANIZATION IN THE UK TO CONTINUE PARTNERSHIP BETWEEN COCA-COLA, ADP AND TANZANIAN GOVERNMENT TO IMPROVE THE MEDICAL SUPPLY CHAIN IN TANZANIA | 511,806 | | | | |

Form 990 Schedule F Part II - Grants or Entities Outside The United States

| (a) Name of organization | (b) IRS code section and EIN (if applicable) | (c) Region | (d) Purpose of grant | (e) Amount of cash grant | (f) Manner of cash disbursement | (g) Amount of non-cash assistance | (h) Description of non-cash assistance | (i) Method of valuation (book, FMV, appraisal, other) |
|--------------------------|--|--------------------|--|--------------------------|---------------------------------|-----------------------------------|--|---|
| | | SUB-SAHARAN AFRICA | TO FUND THE ORGANIZATION'S ENGAGING WOMEN IN THE PUBLIC SPHERE PROJECT | 5,000 | | | | |
| | | SUB-SAHARAN AFRICA | TO FUND THE ORGNAIZATION'S ADVOCACY FOR MIXED CHAMBERS TO PROSECUTE HIGH-RANKING GOVERNMENT OFFENDERS CONFERENCE | 5,000 | | | | |
| | | SUB-SAHARAN AFRICA | GENERAL SUPPORT GRANT | 5,000 | | | | |

Form 990 Schedule F Part II - Grants or Entities Outside The United States

| (a) Name of organization | (b) IRS code section and EIN (if applicable) | (c) Region | (d) Purpose of grant | (e) Amount of cash grant | (f) Manner of cash disbursement | (g) Amount of non-cash assistance | (h) Description of non-cash assistance | (i) Method of valuation (book, FMV, appraisal, other) |
|--------------------------|--|--------------------|---|--------------------------|---------------------------------|-----------------------------------|--|---|
| | | SUB-SAHARAN AFRICA | TO FUND THE ORGANIZATION'S CITY VOICE PROJECT | 9,600 | | | | |
| | | SUB-SAHARAN AFRICA | TO FUND THE ORGANIZATION'S RADIO AS A TOOL TO PROMOTE GENDER PARITY AND STRENGTHENING DEMOCRATIC INSTITUTIONS PROJECT | 10,000 | | | | |
| | | SUB-SAHARAN AFRICA | TO FUND THE ORGANIZATION'S MIRCRO-GRANTS AND MONITORING SUPPORT FOR LET AFRICA LIVE PROGRAM GRADUATES PROJECT | 10,000 | | | | |

Form 990 Schedule F Part II - Grants or Entities Outside The United States

| (a) Name of organization | (b) IRS code section and EIN (if applicable) | (c) Region | (d) Purpose of grant | (e) Amount of cash grant | (f) Manner of cash disbursement | (g) Amount of non-cash assistance | (h) Description of non-cash assistance | (i) Method of valuation (book, FMV, appraisal, other) |
|--------------------------|--|--------------------|--|--------------------------|---------------------------------|-----------------------------------|--|---|
| | | SUB-SAHARAN AFRICA | TO FUND THE ORGANIZATION'S TRAINING YOUTH IN MEDIA PRODUCTION AND THE ARTS PROJECT | 10,000 | | | | |
| | | SUB-SAHARAN AFRICA | TO FUND THE ORGANIZATION'S COMMUNICATIONS DEVELOPMENT PROJECT | 10,700 | | | | |
| | | SUB-SAHARAN AFRICA | GENERAL SUPPORT GRANT | 14,000 | | | | |

Form 990 Schedule F Part II - Grants or Entities Outside The United States

| (a) Name of organization | (b) IRS code section and EIN (if applicable) | (c) Region | (d) Purpose of grant | (e) Amount of cash grant | (f) Manner of cash disbursement | (g) Amount of non-cash assistance | (h) Description of non-cash assistance | (i) Method of valuation (book, FMV, appraisal, other) |
|--------------------------|--|--------------------|---|--------------------------|---------------------------------|-----------------------------------|--|---|
| | | SUB-SAHARAN AFRICA | TO FUND THE ORGANIZATION'S ENGAGING WOMEN IN THE PUBLIC SPHERE PROJECT | 15,000 | | | | |
| | | SUB-SAHARAN AFRICA | TO FUND THE ORGANIZATION'S REINFORCEMENT OF MEDIA CAPACITY THROUGH WEBSITE DEVELOPMENT AND RURAL RADIO PRODUCTION PROJECT | 18,000 | | | | |
| | | SUB-SAHARAN AFRICA | TO FUND THE ORGANIZATION'S PRIMARY SCHOOL EDUCATION AND VOCATIONAL TRAINING FOR VULNERABLE CHILDREN PROJECT | 18,500 | | | | |

Form 990 Schedule F Part II - Grants or Entities Outside The United States

| (a) Name of organization | (b) IRS code section and EIN (if applicable) | (c) Region | (d) Purpose of grant | (e) Amount of cash grant | (f) Manner of cash disbursement | (g) Amount of non-cash assistance | (h) Description of non-cash assistance | (i) Method of valuation (book, FMV, appraisal, other) |
|--------------------------|--|--------------------|--|--------------------------|---------------------------------|-----------------------------------|--|---|
| | | SUB-SAHARAN AFRICA | TO FUND THE ORGANIZATION'S HRISTIAN RADIO FOR THE PROMOTION OF FREE AND FAIR ELECTIONS PROJECT | 15,343 | | | | |
| | | SUB-SAHARAN AFRICA | TO FUND THE ORGANIZATION'S PERSONNEL TRAINING AND STUDY ON MARKET DEMAND FOR VOCATION TRAINING PROJECT | 20,000 | | | | |
| | | SUB-SAHARAN AFRICA | TO FUND IT CAPACITY AND IMPROVED COMMUNICATIONS OF HEALTH PROFESSIONALS | 20,000 | | | | |

Form 990 Schedule F Part II - Grants or Entities Outside The United States

| (a) Name of organization | (b) IRS code section and EIN (if applicable) | (c) Region | (d) Purpose of grant | (e) Amount of cash grant | (f) Manner of cash disbursement | (g) Amount of non-cash assistance | (h) Description of non-cash assistance | (i) Method of valuation (book, FMV, appraisal, other) |
|--------------------------|--|--------------------|--|--------------------------|---------------------------------|-----------------------------------|--|---|
| | | SUB-SAHARAN AFRICA | TO FUND THE RAILWAY CHILDREN'S PRIMARY SCHOOL PER GA #TPWW HGF 0311 | 21,123 | | | | |
| | | SUB-SAHARAN AFRICA | TO FUND THE ORGNAIZATION'S ADVOCACY FOR MIXED CHAMBERS TO PROSECUTE HIGH-RANKING GOVERNMENT OFFENDERS CONFERENCE | 22,000 | | | | |
| | | SUB-SAHARAN AFRICA | TO FUND THE ORGANIZATION'S CONSTITUENCY AND PUBLIC RESPONSIBILITY EDUCATION PROJECT | 22,500 | | | | |

Form 990 Schedule F Part II - Grants or Entities Outside The United States

| (a) Name of organization | (b) IRS code section and EIN (if applicable) | (c) Region | (d) Purpose of grant | (e) Amount of cash grant | (f) Manner of cash disbursement | (g) Amount of non-cash assistance | (h) Description of non-cash assistance | (i) Method of valuation (book, FMV, appraisal, other) |
|--------------------------|--|--------------------|---|--------------------------|---------------------------------|-----------------------------------|--|---|
| | | SUB-SAHARAN AFRICA | TO FUND THE ORGANIZATION'S PRIMARY SCHOOL EDUCATION AND VOCATIONAL TRAINING FOR VULNERABLE CHILDREN PROJECT | 27,600 | | | | |
| | | SUB-SAHARAN AFRICA | TO CONTINUE TO ADVANCE THE TEACHING AND LEARNING PROCESS AT RAILWAY CHILDREN PRIMARY SCHOOL | 29,493 | | | | |
| | | SUB-SAHARAN AFRICA | TO FUND THE ORGANIZATION'S LIVING WITH HIV AND AIDS MEDIA FESTIVAL PROJECT | 30,000 | | | | |

Form 990 Schedule F Part II - Grants or Entities Outside The United States

| (a) Name of organization | (b) IRS code section and EIN (if applicable) | (c) Region | (d) Purpose of grant | (e) Amount of cash grant | (f) Manner of cash disbursement | (g) Amount of non-cash assistance | (h) Description of non-cash assistance | (i) Method of valuation (book, FMV, appraisal, other) |
|--------------------------|--|--------------------|--|--------------------------|---------------------------------|-----------------------------------|--|---|
| | | SUB-SAHARAN AFRICA | TO MOBILIZE RURAL WOMEN TO PARTICIPATE IN THE PUBLIC SPHERE AND POLITICAL PROCESSES | 31,800 | | | | |
| | | SUB-SAHARAN AFRICA | TO FUND THE ORGANIZATION'S CONSTITUENCY AND PUBLIC RESPONSIBILITY EDUCATION PROJECT | 34,200 | | | | |
| | | SUB-SAHARAN AFRICA | TO FUND THE ORGANIZATION'S EFFORTS IN PROSECUTING CASES OF WOMEN'S RIGHTS VIOLATIONS | 40,000 | | | | |

Form 990 Schedule F Part II - Grants or Entities Outside The United States

| (a) Name of organization | (b) IRS code section and EIN (if applicable) | (c) Region | (d) Purpose of grant | (e) Amount of cash grant | (f) Manner of cash disbursement | (g) Amount of non-cash assistance | (h) Description of non-cash assistance | (i) Method of valuation (book, FMV, appraisal, other) |
|--------------------------|--|--------------------|---|--------------------------|---------------------------------|-----------------------------------|--|---|
| | | SUB-SAHARAN AFRICA | TO FUND THE ORGANIZATION'S IMPROVING AID TRANSPARENCY IN AFRICA PROJECT | 42,020 | | | | |
| | | SUB-SAHARAN AFRICA | TO FUND THE ORGANIZATION'S TRANSITIONAL HOUSING PROJECT | 45,000 | | | | |
| | | SUB-SAHARAN AFRICA | GENERAL SUPPORT GRANT | 50,000 | | | | |

Form 990 Schedule F Part II - Grants or Entities Outside The United States

| (a) Name of organization | (b) IRS code section and EIN (if applicable) | (c) Region | (d) Purpose of grant | (e) Amount of cash grant | (f) Manner of cash disbursement | (g) Amount of non-cash assistance | (h) Description of non-cash assistance | (i) Method of valuation (book, FMV, appraisal, other) |
|--------------------------|--|--------------------|---|--------------------------|---------------------------------|-----------------------------------|--|---|
| | | SUB-SAHARAN AFRICA | GENERAL SUPPORT GRANT | 58,320 | | | | |
| | | SUB-SAHARAN AFRICA | TO FUND THE ORGANIZATION'S CONSTITUENCY AND PUBLIC RESPONSIBILITY EDUCATION PROJECT | 60,000 | | | | |
| | | SUB-SAHARAN AFRICA | TO FUND THE ORGANIZATION'S VOCATION TRAINING FOR AT RISK TEENAGEERS PROJECT | 60,000 | | | | |

Form 990 Schedule F Part II - Grants or Entities Outside The United States

| (a) Name of organization | (b) IRS code section and EIN (if applicable) | (c) Region | (d) Purpose of grant | (e) Amount of cash grant | (f) Manner of cash disbursement | (g) Amount of non-cash assistance | (h) Description of non-cash assistance | (i) Method of valuation (book, FMV, appraisal, other) |
|--------------------------|--|--------------------|---|--------------------------|---------------------------------|-----------------------------------|--|---|
| | | SUB-SAHARAN AFRICA | TO FUND THE ORGANIZATION'S EFFORTS TO INCREASE THE ROLE OF INDEPENDENT MEDIA IN ELECTION COVERAGE AND EDUCATION PROJECT | 60,000 | | | | |
| | | SUB-SAHARAN AFRICA | TO FUND THE ORGANIZATION'S CONSTITUENCY AND PUBLIC RESPONSIBILITY EDUCATION PROJECT | 67,500 | | | | |
| | | SUB-SAHARAN AFRICA | TO FUND THE ORGANIZATION'S COMMUNICATIONS AND MEDIA IMPACT PROJECT (2 OF 2) | 70,000 | | | | |

Form 990 Schedule F Part II - Grants or Entities Outside The United States

| (a) Name of organization | (b) IRS code section and EIN (if applicable) | (c) Region | (d) Purpose of grant | (e) Amount of cash grant | (f) Manner of cash disbursement | (g) Amount of non-cash assistance | (h) Description of non-cash assistance | (i) Method of valuation (book, FMV, appraisal, other) |
|--------------------------|--|--------------------|--|--------------------------|---------------------------------|-----------------------------------|--|---|
| | | SUB-SAHARAN AFRICA | TO FUND THE ORGANIZATION'S INCOME GENERATION THROUGH TRAINING TO FARMING COMMUNITIES IN ITURI DISTRICT AND NORTHERN NORTH KIVU PROJECT | 86,000 | | | | |
| | | SUB-SAHARAN AFRICA | GENERAL SUPPORT GRANT | 90,000 | | | | |
| | | SUB-SAHARAN AFRICA | TO ENGAGE RURAL POPULATIONS (WITH A FOCUS ON WOMEN) IN THE UPCOMING ELECTIONS AND CIVIC PROCESSES | 54,000 | | | | |

Form 990 Schedule F Part II - Grants or Entities Outside The United States

| (a) Name of organization | (b) IRS code section and EIN (if applicable) | (c) Region | (d) Purpose of grant | (e) Amount of cash grant | (f) Manner of cash disbursement | (g) Amount of non-cash assistance | (h) Description of non-cash assistance | (i) Method of valuation (book, FMV, appraisal, other) |
|--------------------------|--|--------------------|--|--------------------------|---------------------------------|-----------------------------------|--|---|
| | | SUB-SAHARAN AFRICA | TO FUND THE ORGANIZATION'S VOCATION TRAINING FOR AT RISK TEENAGEERS PROJECT | 90,000 | | | | |
| | | SUB-SAHARAN AFRICA | TO FUND THE ORGANIZATION'S VOCATIONAL TRAINING FOR AT RISK TEENAGERS PROJECT | 90,000 | | | | |
| | | SUB-SAHARAN AFRICA | TO PERFORM ISSUE ADVOCACY AND IMPROVE GLOBAL HEALTH COMMUNICATIONS | 249,100 | | | | |

Form 990 Schedule F Part II - Grants or Entities Outside The United States

| (a) Name of organization | (b) IRS code section and EIN (if applicable) | (c) Region | (d) Purpose of grant | (e) Amount of cash grant | (f) Manner of cash disbursement | (g) Amount of non-cash assistance | (h) Description of non-cash assistance | (i) Method of valuation (book, FMV, appraisal, other) |
|--------------------------|--|--------------------|---|--------------------------|---------------------------------|-----------------------------------|--|---|
| | | SUB-SAHARAN AFRICA | TO FUND THE ORGANIZATIONS AFRICAN'S SEED SYSTEM PROJECT IN SIERRA LEONE | 320,000 | | | | |
| | | SUB-SAHARAN AFRICA | TO FUND THE ORGANIZATIONS AFRICAN'S SEED SYSTEM PROJECT IN SIERRA LEONE | 960,000 | | | | |
| | | SUB-SAHARAN AFRICA | TO FUND THE ORGANIZATION'S JUSTICE FOR SEXUAL VIOLENCE SURVIVORS AND PREVENTION THROUGH COMMUNITY EDUCATION PROJECT | 20,000 | | | | |

Form 990 Schedule F Part II - Grants or Entities Outside The United States

| (a) Name of organization | (b) IRS code section and EIN (if applicable) | (c) Region | (d) Purpose of grant | (e) Amount of cash grant | (f) Manner of cash disbursement | (g) Amount of non-cash assistance | (h) Description of non-cash assistance | (i) Method of valuation (book, FMV, appraisal, other) |
|--------------------------|--|--------------------|--|--------------------------|---------------------------------|-----------------------------------|--|---|
| | | SUB-SAHARAN AFRICA | TO FUND THE ORGANIZATION'S JUDICIAL CLINIC PROJECT | 50,000 | | | | |

SCHEDULE G
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding
Fundraising or Gaming Activities

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

OMB No 1545-0047

2011

Open to Public Inspection

Name of the organization
NEW VENTURE FUND

Employer identification number

20-5806345

Part I Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17.

1

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

a

☐

Mail solicitations

e

☒

Solicitation of non-government grants

b

☐

Internet and e-mail solicitations

f

☐

Solicitation of government grants

c

☐

Phone solicitations

g

☐

Special fundraising events

d

☐

In-person solicitations

2a

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 ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. Form 990-EZ filers are not required to complete this table.

| (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 | | | |
| ARABELLA ADVISORS 1201 CONNECTICUT AVE NW SUITE 300 WASHINGTON, DC 20036 | FUNDRAISING MANAGEMENT SUPPORT | Yes | | 0 | 128,983 | -128,983 |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| Total ▶ | | | | | 128,983 | -128,983 |

3

List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or licensing.

Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 on Form 990-EZ, line 6a. List events with gross receipts greater than \$5,000.

| | | (a) Event #1 | (b) Event #2 | (c) Other Events | (d) Total Events (Add col (a) through col (c)) |
|-----------------|----|--|--------------|------------------|--|
| | | (event type) | (event type) | (total number) | |
| Revenue | 1 | Gross receipts | | | |
| | 2 | Less Charitable contributions | | | |
| | 3 | Gross income (line 1 minus line 2) | | | |
| Direct Expenses | 4 | Cash prizes | | | |
| | 5 | Non-cash prizes | | | |
| | 6 | Rent/facility costs | | | |
| | 7 | Food and beverages | | | |
| | 8 | Entertainment | | | |
| | 9 | Other direct expenses | | | |
| | 10 | Direct expense summary Add lines 4 through 9 in column (d) ▶ | | | () |
| | 11 | Net income summary Combine lines 3 and 10 in column (d). ▶ | | | |

Part III Gaming. Complete if the organization answered "Yes" to 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)) |
|-----------------|---|---|---|---|--|
| | | | | | |
| Revenue | 1 | Gross revenue | | | |
| | 2 | Cash prizes | | | |
| | 3 | Non-cash prizes | | | |
| | 4 | Rent/facility costs | | | |
| | 5 | Other direct expenses | | | |
| Direct Expenses | 6 | Volunteer labor | <div><input type="checkbox"/> Yes <input type="checkbox"/> No</div> | <div><input type="checkbox"/> Yes <input type="checkbox"/> No</div> | |
| | 7 | Direct expense summary Add lines 2 through 5 in column (d) ▶ | | | () |
| | 8 | Net gaming income summary Combine lines 1 and 7 in column (d) ▶ | | | |

9 Enter the state(s) in which the organization operates gaming activities _____

a Is the organization licensed to operate 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 operate gaming activities with nonmembers?

Yes

No
- 12

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 operated in

| | | |
|---|-----------------------------|-----|
| a | The organization's facility | 13a |
| b | An outside facility | 13b |

14

Provide 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

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 distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year \$

Part IV

Complete this part to provide additional information for responses to question on Schedule G (see instructions.)

| Identifier | ReturnReference | Explanation |
|------------|-----------------|-------------|
|------------|-----------------|-------------|

Schedule I
(Form 990)

Department of the Treasury
Internal Revenue Service

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

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

OMB No 1545-0047

2011

Open to Public
Inspection

Name of the organization
NEW VENTURE FUND

Employer identification number
20-5806345

Part I

General Information on Grants and Assistance

1

Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

Yes

No

2

Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II

Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed

| (a) Name and address of organization or government | (b) EIN | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|--|---------|------------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| See Additional Data Table | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |

2

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

87

3

Enter total number of other organizations listed in the line 1 table

3

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

Cat No 50055P

Schedule I (Form 990) 2011

Part III

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.
Use Schedule I-1 (Form 990) if additional space is needed.

| (a)Type of grant or assistance | (b)Number of recipients | (c)Amount of cash grant | (d)Amount of non-cash assistance | (e)Method of valuation (book, FMV, appraisal, other) | (f)Description of non-cash assistance |
|--------------------------------|-------------------------|-------------------------|----------------------------------|--|---------------------------------------|
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

Part IV

Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.

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

Software ID:
Software Version:
EIN: 20-5806345
Name: NEW VENTURE FUND

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

| (a) Name and address of organization or government | (b) EIN | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|--|------------|------------------------------------|--------------------------|-----------------------------------|---|--|--|
| BREAD FOR THE WORLD INSTITUTE 425 THIRD STREET SW SUITE 1200 WASHINGTON, DC 20024 | 51-0175510 | 501C3 | 5,000 | | | | TO FUND THE ORGANIZATION'S POVERTY FOCUSED DEVELOPMENT PROJECT |
| INVISIBLE CHILDREN1620 FIFTH AVE STE 400 SAN DIEGO, CA 92101 | 54-2164338 | 501C3 | 5,000 | | | | GENERAL SUPPORT GRANT |

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

| (a) Name and address of organization or government | (b) EIN | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|--|----------------|---|---------------------------------|--|--|---|---|
| PENCILS OF PROMISE195 CHRYSTIE ST SUITE 401A NEW YORK, NY 10002 | 26-3618722 | 501C3 | 5,000 | | | | GENERAL SUPPORT GRANT |
| RESOURCE MEDIA 325 PACIFIC AVE 3RD FLOOR SAN FRANCISCO, CA 94111 | 82-0564961 | 501C3 | 5,000 | | | | TO FUND WESTERN ENERGY PROJECT |

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

| (a) Name and address of organization or government | (b) EIN | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|---|----------------|------------------------------------|--------------------------|-----------------------------------|---|--|---|
| EARTHJUSTICE 1400 GLENARM SUITE 300 DENVER, CO 80202 | 94- 1730465 | 501C3 | 5,000 | | | | TO FUND THE ORGANIZATION'S ROCKY MOUNTAIN REGION OIL AND GAS SALE MAPPING PROJECT |
| HEADWATER ECONOMICSPO BOX 7059 BOZEMAN, MT 59771 | 74- 3171967 | 501C3 | 5,000 | | | | TO SUPPORT THE ORGANIZATION'S WESTERN DRILLING ACTIVITY INTERACTIVE MAPS PROJECT |

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

| (a) Name and address of organization or government | (b) EIN | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|--|----------------|---|---------------------------------|--|--|---|---|
| TIDES CENTER THE PRESIDIO PO BOX 29907 SAN FRANCISCO, CA 94129 | 94- 3213100 | 501C3 | 7,500 | | | | TO FUND THE ORGANIZATION'S WESTERN CLEAN ENERGY CAMPAIGN |
| PORT ORFORD OCEAN RESOURCE TEAM POBOX 679 PORT ORFORD, OR 97465 | 56- 2374399 | 501C3 | 8,500 | | | | TO FUND THE HALIBUT PROJECT THROUGH OUR WILD RIVERS INITIATIVE PROJECT |

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

| (a) Name and address of organization or government | (b) EIN | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|--|------------|------------------------------------|--------------------------|-----------------------------------|---|--|--|
| COLORADO WILDLIFE FEDERATION1410 GRANT STREET C-313 DENVER, CO 80203 | 84-0576376 | 501C3 | 9,000 | | | | TO FUND THE ORGANIZATION'S OIL AND GAS REFORM AND OIL SHALE CAMPAIGN |
| TRANSATLANTIC FUTURES1432 K STREET NW WASHINGTON, DC 20005 | 52-1667579 | C CORP | 9,300 | | | | TO FUND THE PRODUCTION OF THEGLOBALIST COM |

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

| (a) Name and address of organization or government | (b) EIN | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|--|----------------|---|---------------------------------|--|--|---|---|
| KNOW YOUR CARE 1250 EYE STREET NW SUITE 200 WASHINGTON, DC 20005 | 27- 2815440 | 501C3 | 9,600 | | | | GENERAL SUPPORT GRANT |
| DOC TO DOCK INC 75 WALL STREET NEW YORK, NY 10005 | 16- 1756195 | 501C3 | 9,658 | | | | GENERAL SUPPORT GRANT |

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

| (a) Name and address of organization or government | (b) EIN | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|--|------------|------------------------------------|--------------------------|-----------------------------------|---|--|---|
| THE CARTER CENTER453 FREEDOM PARKWAY ATLANTA, GA 30307 | 58-1454716 | 501C3 | 10,000 | | | | TO FUND THE TRANSFORMING SOCIAL NORMS FROM THE GRASSROOTS PROJECT |
| HEAL AFRICAPO BOX 147 MONROE, WA 98272 | 20-4104936 | 501C3 | 10,000 | | | | TO FUND THE ORGANIZATION'S SAFE MOTHERHOOD PROJECT |

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

| (a) Name and address of organization or government | (b) EIN | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|--|------------|------------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| BLESSINGS IN A BACKPACK37 JACKSON AVE PONTE VERDA BEACH,FL 32082 | 26-1964620 | 501C3 | 10,000 | | | | GENERAL SUPPORT GRANT |
| FALLING WHISTLES440 SEATON STREET SUITE 201 LOS ANGELES,CA 90013 | 26-3069105 | 501C3 | 10,000 | | | | GENERAL SUPPORT GRANT |

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

| (a) Name and address of organization or government | (b) EIN | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|--|------------|------------------------------------|--------------------------|-----------------------------------|---|--|--|
| WESTERN RESOURCE ADVOCATES2260 BASELINE RD SUITE 200 BOULDER, CO 80302 | 84-1113831 | 501C3 | 10,000 | | | | TO FUND THE ORGANIZATION'S UTAH OIL SHALE AND TAR SANDS REGULATION PROJECT |
| WYOMING OUTDOOR COUNCIL262 LINCOLN ST LANDER, WY 82520 | 83-0259411 | 501C3 | 10,000 | | | | TO FUND THE ORGANIZATION'S WYOMING RANGE OPPOSING THE HOBACK WELLS PROJECT |

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

| (a) Name and address of organization or government | (b) EIN | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|--|----------------|---|---------------------------------|--|--|---|---|
| INTERACTION 1400 16TH ST NW 210 WASHINGTON, DC 20036 | 13- 3287064 | 501C3 | 10,906 | | | | TO FUND THE ORGANIZATION'S INTERACTION GRASSTOPS OUTREACH PROGRAM |
| UNITED METHODIST COMMUNITY 904 SHELDON AVE SE GRAND RAPIDS, MI 49507 | 38- 1360555 | 501C3 | 12,960 | | | | TO FUND THE ORGANIZATION'S PRESCHOOL SCHOLARSHIP PROGRAM |

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

| (a) Name and address of organization or government | (b) EIN | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|---|------------|------------------------------------|--------------------------|-----------------------------------|---|--|---|
| ELK RIVER LAND TRUSTPO BOX 1158 PORT ORFORD, OR 97465 | 93-1289894 | 501C3 | 13,750 | | | | TO FUND THE ELK RIVER IMPLEMENTATION PROJECT |
| INTERACTION1400 16TH ST NW 210 WASHINGTON, DC 20036 | 13-3287064 | 501C3 | 14,094 | | | | TO FUND THE ORGANIZATION'S INTERACTION GRASSTOPS OUTREACH PROGRAM |

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

| (a) Name and address of organization or government | (b) EIN | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|--|------------|------------------------------------|--------------------------|-----------------------------------|---|--|--|
| HEAL AFRICAPO BOX 147 MONROE, WA 98272 | 20-4104936 | 501C3 | 14,400 | | | | TO FUND THE ORGANIZATION'S FISTULA REPAIR EFFORTS |
| AFRICAN LEADERSHIP AND RECONCILIATION MINPO BOX 740337 DALLAS, TX 75374 | 31-1660877 | 501C3 | 15,000 | | | | TO SUPPORT THE ORGANIZATION'S EFFORTS IN TRAINING YOUTH PASTORS IN SOUTHER SUDAN PROJECT |

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

| (a) Name and address of organization or government | (b) EIN | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|--|----------------|---|---------------------------------|--|--|---|---|
| WITNESS INC80 HANSON PLACE SUITE 510 BROOKLYN, NY 11217 | 13- 4167155 | 501C3 | 15,000 | | | | TO FUND THE ORGANIZATION'S WOMEN'S INITITATIVE FOR GENDER JUSTICE PROJECT |
| EVANGELICAL ENVIRONMENTAL NET24 EAST FRANKLIN ST NEW FREEDOM, PA 17349 | 23- 2827214 | 501C3 | 15,000 | | | | TO FUND THE ORGANIZATION'S NHCLC - HISPANIC PROJECT |

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

| (a) Name and address of organization or government | (b) EIN | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|--|------------|------------------------------------|--------------------------|-----------------------------------|---|--|--|
| HEAL AFRICA PO BOX 147 MONROE, WA 98272 | 20-4104936 | 501C3 | 15,000 | | | | TO FUND THE ORGANIZATIONS SAFE MOTHERHOOD PROJECT |
| TIDES CENTER THE PRESIDIO PO BOX 29907 SAN FRANCISCO, CA 94129 | 94-3213100 | 501C3 | 15,000 | | | | TO FUND THE ORGANIZATION'S WESTERN CLEAN ENERGY CAMPAIGN |

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

| (a) Name and address of organization or government | (b) EIN | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|--|----------------|---|---------------------------------|--|--|---|---|
| TAXPAYERS FOR COMMON SENSE 651 PENNSYLVANIA AVE SE WASHINGTON, DC 20003 | 52-1941122 | 501C3 | 15,000 | | | | TO FUND THE ORGANIZATION'S ENERGY SUBSIDY PROJECT |
| ENVIRONMENT COLORADO RESEARCH & POLICY CT1536 WYNKOOP ST SUITE 100 DENVER, CO 80202 | 57-1151227 | 501C3 | 15,000 | | | | TO FUND THE ORGANIZATION'S WESTERN ENERGY PROJECT |

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

| (a) Name and address of organization or government | (b) EIN | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|---|----------------|---|---------------------------------|--|--|---|---|
| THEODORE ROOSEVELT CONSERVATION PRTRNSHP1660 L STREET NW SUITE 208 WASHINGTON, DC 20036 | 04-3706385 | 501C3 | 16,000 | | | | TO FUND THE ORGANIZATION'S ROADLESS DEFENSE CAMPAIGN |
| VIRUNGA FUND INC 378 CLINTON STREET BROOKLYN, NY 11231 | 26-3292040 | 501C3 | 18,000 | | | | TO FUND THE ORGANIZATION'S CONSERVATION, INCOME GENERATION AND BASIC SERVICES PROJECT |

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

| (a) Name and address of organization or government | (b) EIN | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|---|------------|------------------------------------|--------------------------|-----------------------------------|---|--|--|
| BREAD FOR THE WORLD INSTITUTE 425 THIRD STREET SW SUITE 1200 WASHINGTON, DC 20024 | 51-0175510 | 501C3 | 20,000 | | | | TO FUND THE ORGANIZATION'S POVERTY FOCUSED DEVELOPMENT PROJECT |
| THE VOICE PROJECT151 1ST AVE 13 NEW YORK, NY 10003 | 27-0589217 | 501C3 | 20,000 | | | | TO FUND THE ORGANIZATION'S AMPLIFY PEACE PROJECT |

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

| (a) Name and address of organization or government | (b) EIN | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|---|----------------|---|---------------------------------|--|--|---|---|
| CENTER OF SOUTHWEST CULTURE500 COPPER AVENUE NW SUITE 103 ALBUQUERQUE, NM 87102 | 85-0402832 | 501C3 | 20,000 | | | | TO FUND THE ORGANIZATION'S NEW MEXICO PUBLIC LANDS ACTION NETWORK PROJECT |
| SOUTH COAST WATERSHEDSPO BOX 1614 GOLD BEACH, OR 97444 | 33-1118832 | 501C3 | 20,000 | | | | TO FUND THE ORGANIZATION'S LOCAL ENTREPRENEURS PROJECT |

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

| (a) Name and address of organization or government | (b) EIN | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|--|------------|------------------------------------|--------------------------|-----------------------------------|---|--|---|
| HUMAN RIGHTS WATCH350 FIFTH AVE 34TH FLOOR NEW YORK, NY 10018 | 13-2875808 | 501C3 | 20,300 | | | | TO FUND THE ORGANIZATION'S CONFERENCE ON THE DEMOCRATIC REPUBLIC OF CONGO'S SPECIALIZED MIXED CHAMBERS CONFERENCE PROJECT |
| LAKE TANGANYIKA FLOATING HEALTH CLINIC1646 N LEAVITT ST CHICAGO,IL 60647 | 27-1149995 | 501C3 | 23,511 | | | | GENERAL SUPPORT GRANT |

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

| (a) Name and address of organization or government | (b) EIN | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|--|------------|------------------------------------|--------------------------|-----------------------------------|---|--|---|
| LEVINE SULLIVAN KOCH & SCHULTZ LLP1050 17TH STREET NW SUITE 800 WASHINGTON, DC 20036 | 52-2004605 | LLP | 24,500 | | | | TO FUND THE ORGANIZATION'S FIRST-AMENDMENT RIGHTS PROJECT |
| LAKE TANGANYIKA FLOATING HEALTH CLINIC1646 N LEAVITT ST CHICAGO, IL 60647 | 27-1149995 | 501C3 | 24,771 | | | | GENERAL SUPPORT GRANT |

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

| (a) Name and address of organization or government | (b) EIN | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|---|----------------|---|---------------------------------|--|--|---|--|
| CENTER FOR US GLOBAL LEADERSHIP1129 20TH STREET NW WASHINGTON, DC 20036 | 74-3093659 | 501C3 | 25,000 | | | | GENERAL SUPPORT GRANT |
| BREAD FOR THE WORLD INSTITUTE 425 THIRD STREET SW SUITE 1200 WASHINGTON, DC 20024 | 51-0175510 | 501C3 | 25,000 | | | | TO FUND THE ORGANIZATION'S POVERTY FOCUSED DEVELOPMENT PROJECT |

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

| (a) Name and address of organization or government | (b) EIN | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|--|------------|------------------------------------|--------------------------|-----------------------------------|---|--|--|
| CHURCH WORLD SERVICE475 RIVERSIDE DRIVE SUITE 700 NEW YORK, NY 10115 | 13-4080201 | 501C3 | 25,000 | | | | TO FUND THE ORGANIZATION'S EDUCATION & ADVOCACY PRESERVING FOREIGN ASSISTANCE WORK PROJECT |
| REP AMERICA971 S CENTERVILLE ROAD STE 139 STURGIS, MI 49091 | 36-4112938 | 501C4 | 25,000 | | | | TO FUND THE ORGANIZATION'S RESPONSIBLE TRAILS AMERICA COALITION PROJECT |

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

| (a) Name and address of organization or government | (b) EIN | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|---|------------|------------------------------------|--------------------------|-----------------------------------|---|--|--|
| THE COLORADO MOUNTAIN CLUB 710 10TH ST SUITE 200 GOLDEN, CO 80021 | 84-0410760 | 501C3 | 25,000 | | | | TO FUND THE ORGANIZATION'S OHV CAMPAIGN |
| THE WILDERNESS SOCIETY1616 M STREET NW WASHINGTON, DC 20036 | 53-0167933 | 501C3 | 25,000 | | | | TO FUND THE ORGANIZATION'S WILDERNESS SUPPORT CENTER NATIONAL MONUMENTS CAMPAIGN PROJECT |

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

| (a) Name and address of organization or government | (b) EIN | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|---|----------------|---|---------------------------------|--|--|---|---|
| HEADWATER ECONOMICSPO BOX 7059 BOZEMAN, MT 59771 | 74-3171967 | 501C3 | 25,000 | | | | TO FUND THE ORGANIZATION'S UTAH CONSERVATION PROJECT |
| COLORADO CATTLEMEN'S AGRICULTURAL LAND TR8833 RALSTON RD ARVADA, CO 80002 | 84-1317592 | 501C3 | 25,000 | | | | TO FUND THE ORGANIZATION'S GLEASON MOUNTAIN RANCH PROJECT |

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

| (a) Name and address of organization or government | (b) EIN | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|---|------------|------------------------------------|--------------------------|-----------------------------------|---|--|---|
| RESOURCE MEDIA 325 PACIFIC AVE 3RD FLOOR SAN FRANCISCO, CA 94111 | 82-0564961 | 501C3 | 25,500 | | | | TO FUND THE ORGANIZATION'S MEDIA AUDIT OIL AND GAS DRILLING IN THE WEST PROJECT |
| THE NATURE CONSERVANCY OF OREGON822 SE 14TH AVENUE PORTLAND,OR 97214 | 53-0242652 | 501C3 | 26,000 | | | | TO FUND THE ORGANIZATION'S EVALUATIONG OPPORTUNITIES IN THE RESTORATION ECONOMY PROJECT |

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

| (a) Name and address of organization or government | (b) EIN | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|---|----------------|------------------------------------|--------------------------|-----------------------------------|---|--|--|
| INTRAHEALTH 6340 QUADRANGLE DR SUITE 200 CHAPEL HILL, NC 27517 | 55- 0825466 | 501C3 | 30,000 | | | | TO FUND THE ORGANIZATION'S URBAN FAMILY PLANNING SITE VISITS (DAKAR, SENEGAL) HEARING STORIES OF SUCCESS AND UNMET NEED PROJECT |
| TIDES CENTER494 8TH AVENUE NEW YORK, NY 10001 | 94- 3213100 | 501C3 | 30,000 | | | | TO SHOWCASE AND ADVOCATE FOR THE EFFECTIVENESS OF A COMMUNITY-DRIVEN INITIATIVE AND GRANT MAKING MODEL THAT SUPPORTS HIV TREATMENT ACCESS AND PREVENTION PROJECTS IN WEST, CENTRAL AND EAST AFRICA |

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

| (a) Name and address of organization or government | (b) EIN | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|---|----------------|---|---------------------------------|--|--|---|--|
| DSW59 MAIDEN LN NEW YORK, NY 10038 | 30-0245250 | 501C3 | 30,004 | | | | TO FUND THE ORGANIZATION'S FROM FAITH TO ACTION PROJECT |
| THE FRESHWATER TRUST65 SW YAMHILL 200 PORTLAND, OR 97204 | 93-0843521 | 501C3 | 32,000 | | | | TO FUND THE ORGANIZATION'S EVALUATING OPPORTUNITIES IN THE RESTORATION ECONOMY PROJECT |

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

| (a) Name and address of organization or government | (b) EIN | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|--|----------------|---|---------------------------------|--|--|---|--|
| SOUTHERN UTAH WILDERNESS ALLIANCE425 EAST 100 SOUTH SALT LAKE CITY, UT 84111 | 94-2936961 | 501C3 | 35,000 | | | | TO FUND THE ORGANIZATION'S UTAH WILDERNESS PROTECTION CAMPAIGN |
| BACKCOUNTRY HUNTER AND ANGLERSPO BOX 249 POLLOCK, ID 83547 | 20-1037177 | 501C3 | 36,000 | | | | TO FUND THE ORGANIZATION'S ORV ENFORCEMENT CAMPAIGN |

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

| (a) Name and address of organization or government | (b) EIN | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|--|------------|------------------------------------|--------------------------|-----------------------------------|---|--|--|
| AMERICAN BIBLE SOCIETY1865 BROADWAY NEW YORK, NY 10023 | 13-1623885 | 501C3 | 37,500 | | | | TO FUND THE ORGANIZATION'S SHE'S MY SISTER INITITATIVE |
| KNOW YOUR CARE 1250 EYE STREET NW SUITE 200 WASHINGTON, DC 20005 | 27-2815440 | 501C3 | 38,400 | | | | GENERAL SUPPORT GRANT |

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

| (a) Name and address of organization or government | (b) EIN | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|---|----------------|---|---------------------------------|--|--|---|---|
| RESOLVE UGANDA INC236 MASSACHUSETTS AVE NE SUITE 500 WASHINGTON, DC 20002 | 01-0891132 | 501C3 | 40,000 | | | | GENERAL SUPPORT GRANT |
| THE NATURE CONSERVANCY OF OREGON821 SE 14TH AVENUE PORTLAND, OR 97214 | 53-0242652 | 501C3 | 40,000 | | | | TO FUND THE ORGANISATION'S MAPPING INVASIVE SPECIES PROJECT |

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

| (a) Name and address of organization or government | (b) EIN | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|---|----------------|---|---------------------------------|--|--|---|---|
| THE PHILANTHROPY WORKSHOP WEST 201 CALIFORNIA STREET SUITE 630 SAN FRANCISCO, CA 94111 | 27-1043897 | 501C3 | 40,963 | | | | TO INCORPORATE A GLOBAL HEALTH FOCUS INTO TPW WEST'S PROGRAM FOR AND NETWORK OF PHILANTHROPISTS |
| PRESIDENT AND FELLOWS OF HARVARD COLLEGE 14 STORY STREET 2ND FLOOR CAMBRIDGE, MA 02138 | 04-2103580 | 501C3 | 49,720 | | | | TO FUND HARVARD HUMANITARIAN INITIATIVE AND ITS IMPROVING PROGRAMMING AND ADVOCACY REINTEG |

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

| (a) Name and address of organization or government | (b) EIN | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|--|----------------|---|---------------------------------|--|--|---|--|
| DISCOVER THE JOURNEY1718 MONROVIA AVE COSTA MESA, CA 92627 | 20-5061130 | 501C3 | 50,000 | | | | TO FUND THE ORGANIZATION'S MOBILE CINEMA PILOT PROJECT |
| HEAL AFRICAPO BOX 147 MONROE, WA 98272 | 20-4104936 | 501C3 | 50,000 | | | | TO FUND THE ORGANIZATION'S SAFE MOTHERHOOD PROJECT |

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

| (a) Name and address of organization or government | (b) EIN | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|--|------------|------------------------------------|--------------------------|-----------------------------------|---|--|--|
| HEAL AFRICAPO BOX 147 MONROE, WA 98272 | 20-4104936 | 501C3 | 50,000 | | | | TO FUND THE ORGANIZATION'S SAFE MOTHERHOOD PROJECT |
| POPULATION SERVICES INTERNATIONAL 1120 19TH ST NW WASHINGTON, DC 20036 | 56-0942853 | 501C3 | 50,000 | | | | TO FUND THE ORGANIZATION'S USAID 50TH ANNIVERSARY - THE POWER OF ONE PERCENT PROJECT |

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

| (a) Name and address of organization or government | (b) EIN | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|---|----------------|------------------------------------|--------------------------|-----------------------------------|---|--|---|
| VITAL VOICES GLOBAL PARTNERSHIP1625 MASSACHUSETTS AVENUE NW SUITE 300 WASHINGTON, DC 20036 | 52- 2151557 | 501C3 | 50,000 | | | | TO BUILD ON THE SUCCESS OF THE VITAL VOICES EVENT AND WORKSHOP TO PROVIDE EMERGING WOMEN LEADERS WITH THE CAPACITY AND NETWORKS NECESSARY TO ADVANCE THEIR CAUSES |
| NORTHERN ARIZONA UNIVERSITY FOUNDATIONPO BOX 4086 FLAGSTAFF, AZ 86011 | 86- 0193726 | 501C3 | 50,000 | | | | TO FUND THE ORGANIZATION'S FOUR CORNERS SUSTAINABLE FUTURES PROJECT |

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

| (a) Name and address of organization or government | (b) EIN | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV , appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|---|------------|------------------------------------|--------------------------|-----------------------------------|--|--|---|
| MESA COUNTY LAND CONSERVANCY 1006 MAIN STREET GRAND JUNCTION GRAND JUNCTION, CO 81601 | 74-2155358 | 501C3 | 50,000 | | | | TO FUND THE ORGANIZATION'S GLADE PARK PRIORITY LANDSCAPE CONSERVATION EASEMENTS PROJECT |
| IMPACT ARTS AND FILM FUND1218 29TH ST NW WASHINGTON, DC 20007 | 26-2384030 | C CORP | 51,063 | | | | GENERAL SUPPORT GRANT |

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

| (a) Name and address of organization or government | (b) EIN | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|---|----------------|---|---------------------------------|--|--|---|--|
| WESTERN CONSERVATION FOUNDATION1536 WYNKOOP ST DENVER, CO 80202 | 33-1107506 | 501C3 | 56,000 | | | | TO FUND THE ORGANIZATION'S SOLAR ENERGY COMMUNICATIONS PROJECT |
| 30 PROJECT110 HORATION ST 706 NEW YORK, NY 10014 | 27-4638954 | 501C3 | 63,515 | | | | GENERAL SUPPORT GRANT |

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

| (a) Name and address of organization or government | (b) EIN | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|--|------------|------------------------------------|--------------------------|-----------------------------------|---|--|--|
| DRAKE UNIVERSITY2507 UNIVERSITY AVE DES MOINES,IA 50311 | 42-0680460 | 501C3 | 65,500 | | | | TO FUND THE ORGANIZATION'S LAW CENTER PUBLIC PRIVATE PARTNERSHIP AGRICULTURE AND FOOD POLICY PROJECT |
| INVISIBLE CHILDREN1620 FIFTH AVE STE 400 SAN DIEGO, CA 92101 | 54-2164338 | 501C3 | 74,800 | | | | TO FUND THE ORGANIZATION'S EARLY WARNING RADIO NETWORK EXPANSION IS BAS UELE PROJECT |

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

| (a) Name and address of organization or government | (b) EIN | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|---|------------|------------------------------------|--------------------------|-----------------------------------|---|--|---|
| CIELO PRODUCTIONS256 WAGON TRAIN DRIVE ANTONITO, CO 81120 | 20-5617707 | 501C3 | 75,000 | | | | TO FUND THE ORGANIZATION'S GLOBAL MEDIA PRODUCTIONS |
| CIELO PRODUCTIONS256 WAGON TRAIN DRIVE ANTONITO, CO 81120 | 20-5617707 | 501C3 | 75,000 | | | | TO FUND THE ORGANIZATION'S GLOBAL MEDIA PRODUCTIONS |

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

| (a) Name and address of organization or government | (b) EIN | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|--|----------------|---|---------------------------------|--|--|---|--|
| JOHNS HOPKINS CENTER FOR COMMUNICATION PR JOHNS HOPKINS CENTER FOR COMMUNICAT ON PROGRAMS 111 MARKET PLACE STE 31 BALTIMORE, MD 21202 | 52-0595110 | 501C3 | 75,000 | | | | TO FUND THE ENTERTAINMENT EDUCATION 5 CONFERENCE PROJECT |
| CHRISTIANS FOR ENVIRONMENTAL STEWARDSHIPPO BOX 877 LA CENTER, WA 98629 | 91-1725182 | 501C3 | 76,000 | | | | TO FUND THE ORGANIZATION'S JUSTPOWER CAMPAIGN |

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

| (a) Name and address of organization or government | (b) EIN | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|--|----------------|---|---------------------------------|--|--|---|---|
| NATIONAL RELIGIOUS PARTNERSHIP FOR THE ENVIRONMENT 94 KING STREET SUITE B NORTHAMPTON, MA 01060 | 13-6996770 | 501C3 | 82,500 | | | | TO FUND THE ORGANIZATION'S STOP THE MERCURY POISONING OF THE UNBORN PROJECT |
| CONGO INITIATIVE PO BOX 246 GERMANTOWN, WI 53022 | 20-3467419 | 501C3 | 87,860 | | | | TO FUND THE ORGANIZATION'S COMMUNICATIONS DEVELOPMENT PROJECT |

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

| (a) Name and address of organization or government | (b) EIN | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|--|------------|------------------------------------|--------------------------|-----------------------------------|---|--|--|
| GLOBAL IMPACT INSTITUTE208 E 58TH STREET FLOOR 3 NEW YORK, NY 10022 | 26-2384030 | 501C3 | 99,000 | | | | GENERAL SUPPORT GRANT |
| FUNDERS CONCERNED ABOUT AIDS2121 CRYSTAL DRIVE STE 700 ARLINGTON, VA 22202 | 13-3869632 | 501C3 | 100,000 | | | | TO ENCOURAGE STRATEGIC AND EFFICIENT HIV/AIDS FOCUSED GRANTMAKING BY EDUCATING AND CONNECTING FUNDERS, MOBILIZING NEW PARTNERSHIPS AND RAISING AWARENESS |

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

| (a) Name and address of organization or government | (b) EIN | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|--|----------------|---|---------------------------------|--|--|---|--|
| HOMELANDS RESEARCH GROUP 4 THE BYWAY ITHACA, NY 14850 | 74-2543648 | 501C3 | 100,000 | | | | TO FUND THE ORGANIZATION'S FOOD FOR NINE BILLION PROJECT |
| THE WILDERNESS SOCIETY1615 M STREET NW WASHINGTON, DC 20036 | 53-0167933 | 501C3 | 100,000 | | | | TO FUND THE ORGANIZATION'S WESTERN ENERGY PROJECT |

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

| (a) Name and address of organization or government | (b) EIN | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|---|------------|------------------------------------|--------------------------|-----------------------------------|---|--|--|
| DEMOCRACY CORPS10 G STREET NE WASHINGTON, DC 20002 | 52-2146456 | 501C3 | 115,200 | | | | TO FUND THE ORGANIZATION'S EFFECTIVE VOTER PROJECT |
| GRAND CANYON TRUST2501 N FORT VALLEY ROAD FLAGSTAFF, AZ 86001 | 86-0512633 | 501C3 | 183,075 | | | | TO FUND THE ORGANIZATION'S MOAB LAND PROTECTION PURCHASE |

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

| (a) Name and address of organization or government | (b) EIN | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV , appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|--|------------|------------------------------------|--------------------------|-----------------------------------|--|--|--|
| HOMELANDS RESEARCH GROUP4 THE BYWAY ITHACA,NY 14850 | 74-2543649 | 501C4 | 200,000 | | | | TO FUND THE ORGANIZATION'S FOOD FOR NINE BILLION PROJECT |
| COLORADO CATTLEMEN'S AGRICULTURAL LAND TR8833 RALSTON RD ARVADA,CO 80002 | 84-1317592 | 501C3 | 306,000 | | | | TO FUND THE ORGANIZATION'S AGENCY PARK RANCHES PROJECT |

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

| (a) Name and address of organization or government | (b) EIN | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|--|------------|------------------------------------|--------------------------|-----------------------------------|---|--|--|
| HEALTH INFORMATION CENTER1250 EYE STREET NW SUITE 200 WASHINGTON, DC 20005 | 27-2815440 | 501C3 | 492,500 | | | | AMENDMENT TO GRANT # HIP HIC 0411-01 FOR ADDITIONAL PAYMENT OF \$492,500 |
| HEALTH INFORMATION CENTER1250 EYE STREET NW SUITE 200 WASHINGTON, DC 20005 | 27-2815440 | 501C3 | 492,500 | | | | GENERAL SUPPORT GRANT |

Schedule L
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Transactions with Interested Persons
▶ Complete if the organization answered
"Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c,
or Form 990-EZ, Part V lines 38a or 40b.
▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No 1545-0047
2011
Open to Public Inspection

Name of the organization
NEW VENTURE FUND

Employer identification number
20-5806345

Part I Excess Benefit Transactions (section 501(c)(3) and section 501 (c)(4) organizations only).

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

| 1 | (a) Name of disqualified person | (b) Description of transaction | (c) Corrected? | |
|---|---------------------------------|--------------------------------|----------------|----|
| | | | Yes | No |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

2 Enter the amount of tax imposed on 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 ▶ \$

Part II Loans to and/or From Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 26, or Form 990-EZ, Part V, line 38a

| (a) Name of interested person and purpose | (b) Loan to or from the organization? | | (c)Original principal amount | (d)Balance due | (e) In default? | | (f) Approved by board or committee? | | (g)Written agreement? | |
|---|---------------------------------------|------|------------------------------|----------------|-----------------|----|-------------------------------------|----|-----------------------|----|
| | To | From | | | Yes | No | Yes | No | Yes | No |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| Total ▶ \$ | | | | | | | | | | |

Part III Grants or Assistance Benefitting Interested Persons.

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

| (a) Name of interested person | (b)Relationship between interested person and the organization | (c)Amount of grant or type of assistance |
|-------------------------------|--|--|
| | | |
| | | |
| | | |
| | | |
| | | |

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 |
| (1) ARABELLA ADVISORS LLC | ENTITY MORE THAN 35% OWNED BY ERIC KESSLER-PRESIDENT | 4,952,612 | SPECIFICALLY, ARABELLA ADVISORS PROVIDED 1) STAFF FOR NVF PROJECTS, 2) OPERATIONAL SUPPORT IN MANAGING THE ORGANIZATION AND 3) SUPPLEMENTAL CONSULTING SUPPORT FOR SOME NVF PROJECTS | | No |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

Part V

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

| Identifier | Return Reference | Explanation |
|------------|------------------|-------------|
|------------|------------------|-------------|

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

OMB No 1545-0047

2011

Open to Public
Inspection

| | |
|--|--|
| Name of the organization NEW VENTURE FUND | Employer identification number 20-5806345 |
|--|--|

| Identifier | Return Reference | Explanation |
|-----------------------------|--|---|
| NEW PROGRAM SERVICES | FORM 990, PART III, LINE 2 | IN 2011, NVF ADDED FOUR NEW MAJOR PROJECTS THE PROJECTS ARE FUND FOR A SAFER FUTURE, WHICH WORKS TO BUILD A MOVEMENT AGAINST GUN VIOLENCE, ADVOCATES FOR DEVELOPMENT ASSISTANCE, WHICH SEEKS TO SIGNIFICANTLY INCREASE US PUBLIC FUNDING FOR LONG-TERM DEVELOPMENT ASSISTANCE OVERSEAS, FUND FOR GLOBAL DEVELOPMENT, WHICH PROVIDES TARGETED FUNDING TO SUPPORT GLOBAL DEVELOPMENT POLICY, MEDIA, AND ADVOCACY EFFORTS, AND PACENOW, WHICH WORKS TO INCREASE SUPPORT FOR PROPERTY ASSESSED CLEAN ENERGY |
| CHANGES IN PROGRAM SERVICES | FORM 990, PART III, LINE 3 | THE ORGANIZATION HAS DISCONTINUED OR PUT ON HOLD CERTAIN PROJECTS |
| | FORM 990, PART VI, SECTION A, LINE 3 | NEW VENTURE FUND HAS AN ADMINISTRATIVE SERVICES AGREEMENT WITH ARABELLA ADVISORS DURING THE YEAR, NEW VENTURE FUND PAID TO ARABELLA ADVISORS \$4,952,612 FOR MANAGEMENT/ADMINISTRATIVE/PERSONNEL/CONSULTING SERVICES |
| | FORM 990, PART VI, SECTION A, LINE 8B | NEW VENTURE FUND DOES NOT HAVE ANY COMMITTEES WITH AUTHORITY TO ACT ON BEHALF OF THE GOVERNING BODY, THUS DOES NOT DOCUMENT MEETINGS HELD OR WRITTEN ACTIONS BY SUCH A COMMITTEE |
| | FORM 990, PART VI, SECTION B, LINE 11 | THE BOARD OF DIRECTORS AND THE ORGANIZATION'S LEGAL COUNSEL REVIEWED THE RETURN PRIOR TO FILING IN ADDITION, MANAGEMENT PERFORMED AN INDEPTH REVIEW PRIOR TO THE RETURN BEING PROVIDED TO THE BOARD OF DIRECTORS |
| | FORM 990, PART VI, SECTION B, LINE 12C | ALL PERSONS COVERED BY THE ORGANIZATION'S CONFLICT OF INTEREST POLICY ARE REQUIRED TO DECLARE CONFLICTS OF INTEREST ANNUALLY COVERED INDIVIDUALS CANNOT VOTE ON MATTERS BEFORE THE BOARD WHEN THEY HAVE A CONFLICT IN THE MATTER DISINTERESTED MEMBERS MUST DETERMINE WHETHER OR NOT THERE ARE ANY SUITABLE ALTERNATIVES TO POTENTIAL TRANSACTIONS THAT CAUSE CONFLICT IF A COVERED PERSON IS FOUND IN VIOLATION OF THIS POLICY IT MAY BE CAUSE FOR REMOVAL FROM THE BOARD OF DIRECTORS |
| | FORM 990, PART VI, SECTION C, LINE 19 | THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, OR FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST |

Additional Data

Software ID:
Software Version:
EIN: 20-5806345
Name: NEW VENTURE FUND

Form 990, Special Condition Description:

| |
|-------------------------------|
| Special Condition Description |
|-------------------------------|

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

| |
|--|
| 4d. Other program services |
| (Code) (Expenses \$ 1,656,376 including grants of \$ 520,600) (Revenue \$ 0) NVF ALSO HOSTS OTHER PUBLIC INTEREST PROJECTS MOST INTERESTINGLY IS THE IDEAS42 PROJECT WHICH APPLIES BEHAVIORAL ECONOMICS TO EVERYDAY SOCIAL PROBLEMS |