

**Return of Organization Exempt From Income Tax**  
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

▶ Do not enter social security numbers on this form as it may be made public.  
▶ Information about Form 990 and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

**A** For the 2015 calendar year, or tax year beginning **JUL 1, 2015** and ending **JUN 30, 2016**

<b>B</b> Check if applicable:  Address change Name change Initial return Final return/terminated Amended return Application pending	<b>C</b> Name of organization <b>NEW HAMPSHIRE COMMUNITY LOAN FUND, INC.</b> Doing business as Number and street (or P.O. box if mail is not delivered to street address) Room/suite <b>7 WALL STREET</b> City or town, state or province, country, and ZIP or foreign postal code <b>CONCORD, NH 03301</b>	<b>D</b> Employer identification number <b>22-2524015</b>
	<b>F</b> Name and address of principal officer: <b>JULIANA EADES</b> <b>SAME AS C ABOVE</b>	<b>E</b> Telephone number <b>603-224-6669</b>
<b>I</b> Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) 501(c) ( ) (insert no.) 4947(a)(1) or 527	<b>J</b> Website: ▶ <b>WWW.COMMUNITYLOANFUND.ORG</b>	<b>G</b> Gross receipts \$ <b>12,117,520.</b>
<b>K</b> Form of organization: <input checked="" type="checkbox"/> Corporation Trust Association Other ▶	<b>L</b> Year of formation: <b>1983</b>	<b>H(a)</b> Is this a group return for subordinates? ..... Yes <input checked="" type="checkbox"/> No <b>H(b)</b> Are all subordinates included? Yes No If "No," attach a list. (see instructions)
		<b>H(c)</b> Group exemption number ▶
		<b>M</b> State of legal domicile: <b>NH</b>

**Part I Summary**

<b>1</b>	Briefly describe the organization's mission or most significant activities: <b>SEE SCHEDULE O</b>	
	<b>2</b> Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.	
<b>Activities &amp; Governance</b>	<b>3</b> Number of voting members of the governing body (Part VI, line 1a) .....	<b>3</b> 15
	<b>4</b> Number of independent voting members of the governing body (Part VI, line 1b) .....	<b>4</b> 14
	<b>5</b> Total number of individuals employed in calendar year 2015 (Part V, line 2a) .....	<b>5</b> 58
	<b>6</b> Total number of volunteers (estimate if necessary) .....	<b>6</b> 14
	<b>7a</b> Total unrelated business revenue from Part VIII, column (C), line 12 .....	<b>7a</b> 0.
	<b>b</b> Net unrelated business taxable income from Form 990-T, line 34 .....	<b>7b</b> 0.
	<b>Revenue</b>	<b>8</b> Contributions and grants (Part VIII, line 1h) .....
<b>9</b> Program service revenue (Part VIII, line 2g) .....		6,185,299. 7,089,733.
<b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d) .....		44,582. 98,074.
<b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) .....		281,759. -18,063.
<b>12</b> Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) .....		11,119,429. 11,628,343.
<b>Expenses</b>		<b>13</b> Grants and similar amounts paid (Part IX, column (A), lines 1-3) .....
	<b>14</b> Benefits paid to or for members (Part IX, column (A), line 4) .....	0. 0.
	<b>15</b> Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) .....	4,624,157. 4,649,761.
	<b>16a</b> Professional fundraising fees (Part IX, column (A), line 11e) .....	0. 0.
	<b>b</b> Total fundraising expenses (Part IX, column (D), line 25) ▶ <b>270,771.</b>	
	<b>17</b> Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) .....	4,823,169. 5,600,809.
	<b>18</b> Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) .....	9,975,276. 10,846,182.
<b>19</b> Revenue less expenses. Subtract line 18 from line 12 .....	1,144,153. 782,161.	
<b>Net Assets or Fund Balances</b>	<b>20</b> Total assets (Part X, line 16) .....	<b>Beginning of Current Year</b> 104,617,612. <b>End of Year</b> 113,051,523.
	<b>21</b> Total liabilities (Part X, line 26) .....	82,630,378. 90,039,385.
	<b>22</b> Net assets or fund balances. Subtract line 21 from line 20 .....	21,987,234. 23,012,138.

**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.

<b>Sign Here</b>	▶ Signature of officer <b>JULIANA EADES, PRESIDENT</b> Type or print name and title	Date			
<b>Paid Preparer Use Only</b>	Print/Type preparer's name <b>THOMAS WASHBURN, CPA</b>	Preparer's signature <b>THOMAS WASHBURN, CPA</b>	Date <b>11/03/16</b>	Check if self-employed <input type="checkbox"/>	PTIN <b>P00537319</b>
	Firm's name ▶ <b>ALEXANDER, ARONSON, FINNING &amp; CO., P.C.</b>	Firm's EIN ▶ <b>04-2571780</b>			
	Firm's address ▶ <b>21 EAST MAIN STREET WESTBORO, MA 01581</b>	Phone no. <b>508-366-9100</b>			

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

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission: SEE SCHEDULE O

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 X No

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes X No

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.

4a (Code: ) (Expenses \$ 5,035,962. including grants of \$ 503,494. ) (Revenue \$ 6,355,193. ) AFFORDABLE HOUSING - SEE SCHEDULE O

4b (Code: ) (Expenses \$ 3,594,095. including grants of \$ 0. ) (Revenue \$ 946. ) CAPITALIZATION AND PHILANTHROPY - SEE SCHEDULE O

4c (Code: ) (Expenses \$ 1,131,066. including grants of \$ 70,904. ) (Revenue \$ 712,971. ) ECONOMIC OPPORTUNITY - SEE SCHEDULE O

4d Other program services (Describe in Schedule O.) (Expenses \$ 188,114. including grants of \$ 21,214. ) (Revenue \$ 17,176. )

4e Total program service expenses 9,949,237.

**Part IV Checklist of Required Schedules**

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

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

	Yes	No
<b>20a</b> Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i> .....		X
<b>b</b> If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? .....		
<b>21</b> Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i> .....	X	
<b>22</b> Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i> .....	X	
<b>23</b> Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i> .....	X	
<b>24a</b> Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i> .....		X
<b>b</b> Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? .....		
<b>c</b> Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? .....		
<b>d</b> Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? .....		
<b>25a</b> <b>Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i> .....		X
<b>b</b> Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i> .....		X
<b>26</b> Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If "Yes," complete Schedule L, Part II</i> .....		X
<b>27</b> Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i> .....		X
<b>28</b> Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
<b>a</b> A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i> .....		X
<b>b</b> A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i> .....		X
<b>c</b> An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i> .....		X
<b>29</b> Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> .....	X	
<b>30</b> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i> .....		X
<b>31</b> Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i> .....		X
<b>32</b> Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i> .....		X
<b>33</b> Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i> .....		X
<b>34</b> Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i> .....		X
<b>35a</b> Did the organization have a controlled entity within the meaning of section 512(b)(13)? .....		X
<b>b</b> If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i> .....		
<b>36</b> <b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i> .....		X
<b>37</b> Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i> .....		X
<b>38</b> Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? .....	X	

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

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

Table with columns for question numbers (1a-14b), descriptions, and Yes/No checkboxes. Includes sub-questions for backup withholding, employee reporting, foreign accounts, and charitable contributions.

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

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

**Section A. Governing Body and Management**

		Yes	No
<b>1a</b>	Enter the number of voting members of the governing body at the end of the tax year ..... If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.		
	<b>1a</b> 15		
<b>b</b>	Enter the number of voting members included in line 1a, above, who are independent .....		
	<b>1b</b> 14		
<b>2</b>	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? .....		<input checked="" type="checkbox"/>
<b>3</b>	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? .....		<input checked="" type="checkbox"/>
<b>4</b>	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? .....		<input checked="" type="checkbox"/>
<b>5</b>	Did the organization become aware during the year of a significant diversion of the organization's assets? .....		<input checked="" type="checkbox"/>
<b>6</b>	Did the organization have members or stockholders? .....		<input checked="" type="checkbox"/>
<b>7a</b>	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? .....		<input checked="" type="checkbox"/>
<b>b</b>	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? .....		<input checked="" type="checkbox"/>
<b>8</b>	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
<b>a</b>	The governing body? .....	<input checked="" type="checkbox"/>	
<b>b</b>	Each committee with authority to act on behalf of the governing body? .....	<input checked="" type="checkbox"/>	
<b>9</b>	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O .....		<input checked="" type="checkbox"/>

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

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

**Section C. Disclosure**

- 17** List the states with which a copy of this Form 990 is required to be filed **NH**
- 18** Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.  
 Own website      Another's website       Upon request      Other (explain in Schedule O)
- 19** Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
- 20** State the name, address, and telephone number of the person who possesses the organization's books and records: **BONNIE SCADOVA - 603-224-6669**  
**7 WALL STREET, CONCORD, NH 03301**

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

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

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

**1a** Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

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

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) ANTHONY POORE MEMBER	1.00	X					0.	0.	0.	
(2) BETSY MCNAMARA SECRETARY	1.00	X		X			0.	0.	0.	
(3) BRIGID MURRAY VICE SECRETARY	1.00	X		X			0.	0.	0.	
(4) CHRISTINA HILL MEMBER	1.00	X					0.	0.	0.	
(5) DAN MULLER CHAIR	1.00	X		X			0.	0.	0.	
(6) DEBORAH BUTLER TREASURER	1.00	X		X			0.	0.	0.	
(7) JAMIE RICHARDSON MEMBER	1.00	X					0.	0.	0.	
(8) JANET ACKERMAN VICE TREASURER	1.00	X		X			0.	0.	0.	
(9) JULIANA EADES PRESIDENT	40.00	X		X			148,030.	0.	11,979.	
(10) KIM CAPEN MEMBER	1.00	X					0.	0.	0.	
(11) MICHAEL SWACK EMERITUS	1.00	X					0.	0.	0.	
(12) PAUL SPANG MEMBER	1.00	X					0.	0.	0.	
(13) PETER BRANKMAN MEMBER	1.00	X					0.	0.	0.	
(14) SARAH VARELA MEMBER	1.00	X					0.	0.	0.	
(15) TOM BUNNELL VICE CHAIR	1.00	X		X			0.	0.	0.	
(16) BONNIE SCADOVA CFO	40.00			X			101,892.	0.	18,872.	
(17) DEBRA MILLER VICE PRESIDENT OF EXTERNAL RELATIONS	40.00				X		106,503.	0.	15,041.	





**Part VIII Statement of Revenue**

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

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514	
<b>Contributions, Gifts, Grants and Other Similar Amounts</b>	<b>1 a</b> Federated campaigns	<b>1a</b>					
	<b>b</b> Membership dues	<b>1b</b>					
	<b>c</b> Fundraising events	<b>1c</b>					
	<b>d</b> Related organizations	<b>1d</b>					
	<b>e</b> Government grants (contributions)	<b>1e</b>	2,236,437.				
	<b>f</b> All other contributions, gifts, grants, and similar amounts not included above	<b>1f</b>	2,222,162.				
	<b>g</b> Noncash contributions included in lines 1a-1f: \$		93,950.				
	<b>h Total.</b> Add lines 1a-1f		4,458,599.				
<b>Program Service Revenue</b>	<b>2 a</b> INTEREST FROM LOANS	<b>Business Code</b> 531390	6,694,651.	6,694,651.			
	<b>b</b> LOAN RELATED FEES	531390	362,971.	362,971.			
	<b>c</b> TRAINING AND OTHER FEES	531390	32,111.	32,111.			
	<b>d</b>						
	<b>e</b>						
	<b>f</b> All other program service revenue						
	<b>g Total.</b> Add lines 2a-2f		7,089,733.				
<b>Other Revenue</b>	<b>3</b> Investment income (including dividends, interest, and other similar amounts)		83,458.			83,458.	
	<b>4</b> Income from investment of tax-exempt bond proceeds						
	<b>5</b> Royalties						
	<b>6 a</b> Gross rents	(i) Real					
		(ii) Personal					
		<b>b</b> Less: rental expenses					
		<b>c</b> Rental income or (loss)					
	<b>d</b> Net rental income or (loss)						
	<b>7 a</b> Gross amount from sales of assets other than inventory	(i) Securities					
		(ii) Other		503,793.			
		<b>b</b> Less: cost or other basis and sales expenses		489,177.			
		<b>c</b> Gain or (loss)		14,616.			
	<b>d</b> Net gain or (loss)		14,616.	14,616.			
	<b>8 a</b> Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	<b>a</b>					
		<b>b</b> Less: direct expenses	<b>b</b>				
<b>c</b> Net income or (loss) from fundraising events							
<b>9 a</b> Gross income from gaming activities. See Part IV, line 19	<b>a</b>						
	<b>b</b> Less: direct expenses	<b>b</b>					
	<b>c</b> Net income or (loss) from gaming activities						
<b>10 a</b> Gross sales of inventory, less returns and allowances	<b>a</b>						
	<b>b</b> Less: cost of goods sold	<b>b</b>					
	<b>c</b> Net income or (loss) from sales of inventory						
<b>Miscellaneous Revenue</b>		<b>Business Code</b>					
<b>11 a</b> LOSS ON SALE OF OTHER ASSETS	900099		-18,063.	-18,063.			
	<b>b</b>						
	<b>c</b>						
	<b>d</b> All other revenue						
<b>e Total.</b> Add lines 11a-11d			-18,063.				
<b>12 Total revenue.</b> See instructions.			11,628,343.	7,086,286.	0.	83,458.	

**Part IX Statement of Functional Expenses**

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	133,624.	133,624.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	461,988.	461,988.		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	297,364.	100,755.	163,024.	33,585.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	3,502,552.	3,190,421.	161,409.	150,722.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	107,524.	97,549.	5,122.	4,853.
9 Other employee benefits	462,791.	416,775.	23,748.	22,268.
10 Payroll taxes	279,530.	242,715.	22,643.	14,172.
11 Fees for services (non-employees):				
a Management				
b Legal	24,909.	21,651.	2,966.	292.
c Accounting	53,929.	35,979.	16,332.	1,618.
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)	211,685.	161,756.	46,635.	3,294.
12 Advertising and promotion	52,201.	43,241.	845.	8,115.
13 Office expenses	314,360.	261,584.	23,676.	29,100.
14 Information technology	50,178.	38,762.	10,371.	1,045.
15 Royalties				
16 Occupancy	103,283.	66,683.	36,593.	7.
17 Travel	115,821.	110,663.	4,309.	849.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	49,325.	48,254.	856.	215.
20 Interest	2,931,850.	2,931,850.		
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	184,422.	121,151.	63,271.	
23 Insurance	105,775.	68,288.	37,487.	
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a <b>LOAN LOSS PROVISION</b>	1,310,609.	1,310,609.		
b <b>TRAINING EXPENSES</b>	40,932.	33,409.	6,887.	636.
c <b>GURANTY FEE</b>	38,915.	38,915.		
d <b>PROPERTY EXPENSES</b>	12,615.	12,615.		
e All other expenses				
<b>25 Total functional expenses.</b> Add lines 1 through 24e	<b>10,846,182.</b>	<b>9,949,237.</b>	<b>626,174.</b>	<b>270,771.</b>
<b>26 Joint costs.</b> Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				

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

**Part X Balance Sheet**

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

		(A) Beginning of year		(B) End of year
<b>Assets</b>	<b>1</b> Cash - non-interest-bearing		<b>1</b>	
	<b>2</b> Savings and temporary cash investments	6,608,932.	<b>2</b>	6,185,618.
	<b>3</b> Pledges and grants receivable, net	697,318.	<b>3</b>	638,811.
	<b>4</b> Accounts receivable, net	721,586.	<b>4</b>	464,965.
	<b>5</b> Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		<b>5</b>	
	<b>6</b> Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L		<b>6</b>	
	<b>7</b> Notes and loans receivable, net		<b>7</b>	
	<b>8</b> Inventories for sale or use		<b>8</b>	
	<b>9</b> Prepaid expenses and deferred charges	12,255.	<b>9</b>	15,561.
	<b>10a</b> Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	<b>10a</b> 5,669,148.		
	<b>b</b> Less: accumulated depreciation	<b>10b</b> 1,517,269.	4,225,419.	<b>10c</b> 4,151,879.
	<b>11</b> Investments - publicly traded securities	6,485,220.	<b>11</b>	6,570,287.
	<b>12</b> Investments - other securities. See Part IV, line 11		<b>12</b>	
	<b>13</b> Investments - program-related. See Part IV, line 11	85,857,882.	<b>13</b>	95,024,402.
	<b>14</b> Intangible assets		<b>14</b>	
	<b>15</b> Other assets. See Part IV, line 11	9,000.	<b>15</b>	
<b>16 Total assets.</b> Add lines 1 through 15 (must equal line 34)	104,617,612.	<b>16</b>	113,051,523.	
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses	1,167,795.	<b>17</b>	1,124,112.
	<b>18</b> Grants payable		<b>18</b>	
	<b>19</b> Deferred revenue	438,831.	<b>19</b>	218,036.
	<b>20</b> Tax-exempt bond liabilities		<b>20</b>	
	<b>21</b> Escrow or custodial account liability. Complete Part IV of Schedule D		<b>21</b>	
	<b>22</b> Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		<b>22</b>	
	<b>23</b> Secured mortgages and notes payable to unrelated third parties		<b>23</b>	
	<b>24</b> Unsecured notes and loans payable to unrelated third parties	72,423,752.	<b>24</b>	80,097,237.
	<b>25</b> 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	8,600,000.	<b>25</b>	8,600,000.
	<b>26 Total liabilities.</b> Add lines 17 through 25	82,630,378.	<b>26</b>	90,039,385.
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.</b>			
	<b>27</b> Unrestricted net assets	10,432,220.	<b>27</b>	12,592,625.
	<b>28</b> Temporarily restricted net assets	11,555,014.	<b>28</b>	10,419,513.
	<b>29</b> Permanently restricted net assets		<b>29</b>	
	<b>Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.</b>			
	<b>30</b> Capital stock or trust principal, or current funds		<b>30</b>	
	<b>31</b> Paid-in or capital surplus, or land, building, or equipment fund		<b>31</b>	
	<b>32</b> Retained earnings, endowment, accumulated income, or other funds		<b>32</b>	
<b>33</b> Total net assets or fund balances	21,987,234.	<b>33</b>	23,012,138.	
<b>34</b> Total liabilities and net assets/fund balances	104,617,612.	<b>34</b>	113,051,523.	

**Part XI Reconciliation of Net Assets**

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

<b>1</b>	Total revenue (must equal Part VIII, column (A), line 12)	<b>1</b>	11,628,343.
<b>2</b>	Total expenses (must equal Part IX, column (A), line 25)	<b>2</b>	10,846,182.
<b>3</b>	Revenue less expenses. Subtract line 2 from line 1	<b>3</b>	782,161.
<b>4</b>	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	<b>4</b>	21,987,234.
<b>5</b>	Net unrealized gains (losses) on investments	<b>5</b>	242,743.
<b>6</b>	Donated services and use of facilities	<b>6</b>	
<b>7</b>	Investment expenses	<b>7</b>	
<b>8</b>	Prior period adjustments	<b>8</b>	
<b>9</b>	Other changes in net assets or fund balances (explain in Schedule O)	<b>9</b>	0.
<b>10</b>	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	<b>10</b>	23,012,138.

**Part XII Financial Statements and Reporting**

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

**X**

		Yes	No
<b>1</b>	Accounting method used to prepare the Form 990: Cash <input type="checkbox"/> Accrual <input checked="" type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
<b>2a</b>	Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: Separate basis      Consolidated basis      Both consolidated and separate basis		<b>X</b>
<b>b</b>	Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input checked="" type="checkbox"/> Separate basis      Consolidated basis      Both consolidated and separate basis	<b>X</b>	
<b>c</b>	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.	<b>X</b>	
<b>3a</b>	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?	<b>X</b>	
<b>b</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	<b>X</b>	

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

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.

▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No. 1545-0047

**2015**

Open to Public Inspection

<b>Name of the organization</b> <p style="text-align:center;"><b>NEW HAMPSHIRE COMMUNITY LOAN FUND, INC.</b></p>	<b>Employer identification number</b> <p style="text-align:center;"><b>22-2524015</b></p>
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**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 described in **section 170(b)(1)(A)(i)**.
- 2** A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E (Form 990 or 990-EZ).)
- 3** A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4** A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state: \_\_\_\_\_
- 5** An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
- 6** A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7 X** 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 in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g.
  - a Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
  - b Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
  - c Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
  - d Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
  - e** Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.

**f** Enter the number of supported organizations .....

**g** Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
<b>Total</b>						

**Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)**

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ►	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .....	4,203,462.	4,680,786.	3,086,673.	4,607,789.	4,458,599.	21,037,309.
<b>2</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf .....						
<b>3</b> The value of services or facilities furnished by a governmental unit to the organization without charge .....						
<b>4 Total.</b> Add lines 1 through 3 .....	4,203,462.	4,680,786.	3,086,673.	4,607,789.	4,458,599.	21,037,309.
<b>5</b> The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) .....						467,429.
<b>6 Public support.</b> Subtract line 5 from line 4.						20,569,880.

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
<b>7</b> Amounts from line 4 .....	4,203,462.	4,680,786.	3,086,673.	4,607,789.	4,458,599.	21,037,309.
<b>8</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources .....	151,560.	142,090.	106,052.	108,072.	83,458.	591,232.
<b>9</b> Net income from unrelated business activities, whether or not the business is regularly carried on .....						
<b>10</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) .....						
<b>11 Total support.</b> Add lines 7 through 10						21,628,541.
<b>12</b> Gross receipts from related activities, etc. (see instructions) .....					12	30,085,658.
<b>13 First five years.</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and <b>stop here</b> .....						►

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

<b>14</b> Public support percentage for 2015 (line 6, column (f) divided by line 11, column (f)) .....	<b>14</b>	95.11 %
<b>15</b> Public support percentage from 2014 Schedule A, Part II, line 14 .....	<b>15</b>	97.35 %
<b>16a 33 1/3% support test - 2015.</b> If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization .....		► X
<b>b 33 1/3% support test - 2014.</b> If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization .....		►
<b>17a 10% -facts-and-circumstances test - 2015.</b> If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and <b>stop here.</b> Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization .....		►
<b>b 10% -facts-and-circumstances test - 2014.</b> If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and <b>stop here.</b> Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization .....		►
<b>18 Private foundation.</b> If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions .....		►

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

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ►	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .....						
<b>2</b> Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose .....						
<b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513 .....						
<b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf .....						
<b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge .....						
<b>6 Total.</b> Add lines 1 through 5 .....						
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons .....						
<b>b</b> Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year .....						
<b>c</b> Add lines 7a and 7b .....						
<b>8 Public support.</b> (Subtract line 7c from line 6.)						

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
<b>9</b> Amounts from line 6 .....						
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources .....						
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 .....						
<b>c</b> Add lines 10a and 10b .....						
<b>11</b> Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on .....						
<b>12</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) .....						
<b>13 Total support.</b> (Add lines 9, 10c, 11, and 12.)						

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

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

<b>15</b> Public support percentage for 2015 (line 8, column (f) divided by line 13, column (f)) .....	<b>15</b>	%
<b>16</b> Public support percentage from 2014 Schedule A, Part III, line 15 .....	<b>16</b>	%

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

<b>17</b> Investment income percentage for 2015 (line 10c, column (f) divided by line 13, column (f)) .....	<b>17</b>	%
<b>18</b> Investment income percentage from 2014 Schedule A, Part III, line 17 .....	<b>18</b>	%

**19a 33 1/3% support tests - 2015.** 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 - 2014.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ►

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

**Part IV Supporting Organizations**

(Complete only if you checked a box in line 11 on Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V.)

**Section A. All Supporting Organizations**

	Yes	No
<b>1</b> Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>If "No" describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.</i>		
<b>2</b> Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
<b>3a</b> Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer (b) and (c) below.</i>		
<b>b</b> Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
<b>c</b> Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
<b>4a</b> Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked 11a or 11b in Part I, answer (b) and (c) below.</i>		
<b>b</b> Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.</i>		
<b>c</b> Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? <i>If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.</i>		
<b>5a</b> Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).</i>		
<b>b Type I or Type II only.</b> Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
<b>c Substitutions only.</b> Was the substitution the result of an event beyond the organization's control?		
<b>6</b> Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>		
<b>7</b> Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
<b>8</b> Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
<b>9a</b> Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? <i>If "Yes," provide detail in Part VI.</i>		
<b>b</b> Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>		
<b>c</b> Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>		
<b>10a</b> Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If "Yes," answer 10b below.</i>		
<b>b</b> Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		



**Part IV Supporting Organizations** (continued)

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

**Section B. Type I Supporting Organizations**

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

**Section C. Type II Supporting Organizations**

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

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

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

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

<b>1</b> Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions):		
<b>a</b> The organization satisfied the Activities Test. Complete <b>line 2</b> below.		
<b>b</b> The organization is the parent of each of its supported organizations. Complete <b>line 3</b> below.		
<b>c</b> The organization supported a governmental entity. Describe in <b>Part VI</b> how you supported a government entity (see instructions).		
<b>2</b> Activities Test. Answer (a) and (b) below.		
<b>a</b> Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in <b>Part VI</b> identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.		
<b>b</b> Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in <b>Part VI</b> the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.		
<b>3</b> Parent of Supported Organizations. Answer (a) and (b) below.		
<b>a</b> Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in <b>Part VI</b> .		
<b>b</b> Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in <b>Part VI</b> the role played by the organization in this regard.		

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

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

<b>Section A - Adjusted Net Income</b>		(A) Prior Year	(B) Current Year (optional)
<b>1</b> Net short-term capital gain	<b>1</b>		
<b>2</b> Recoveries of prior-year distributions	<b>2</b>		
<b>3</b> Other gross income (see instructions)	<b>3</b>		
<b>4</b> Add lines 1 through 3	<b>4</b>		
<b>5</b> Depreciation and depletion	<b>5</b>		
<b>6</b> Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	<b>6</b>		
<b>7</b> Other expenses (see instructions)	<b>7</b>		
<b>8 Adjusted Net Income</b> (subtract lines 5, 6 and 7 from line 4)	<b>8</b>		

<b>Section B - Minimum Asset Amount</b>		(A) Prior Year	(B) Current Year (optional)
<b>1</b> Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
<b>a</b> Average monthly value of securities	<b>1a</b>		
<b>b</b> Average monthly cash balances	<b>1b</b>		
<b>c</b> Fair market value of other non-exempt-use assets	<b>1c</b>		
<b>d Total</b> (add lines 1a, 1b, and 1c)	<b>1d</b>		
<b>e Discount</b> claimed for blockage or other factors (explain in detail in <b>Part VI</b> ):			
<b>2</b> Acquisition indebtedness applicable to non-exempt-use assets	<b>2</b>		
<b>3</b> Subtract line 2 from line 1d	<b>3</b>		
<b>4</b> Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	<b>4</b>		
<b>5</b> Net value of non-exempt-use assets (subtract line 4 from line 3)	<b>5</b>		
<b>6</b> Multiply line 5 by .035	<b>6</b>		
<b>7</b> Recoveries of prior-year distributions	<b>7</b>		
<b>8 Minimum Asset Amount</b> (add line 7 to line 6)	<b>8</b>		

<b>Section C - Distributable Amount</b>			Current Year
<b>1</b> Adjusted net income for prior year (from Section A, line 8, Column A)	<b>1</b>		
<b>2</b> Enter 85% of line 1	<b>2</b>		
<b>3</b> Minimum asset amount for prior year (from Section B, line 8, Column A)	<b>3</b>		
<b>4</b> Enter greater of line 2 or line 3	<b>4</b>		
<b>5</b> Income tax imposed in prior year	<b>5</b>		
<b>6 Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	<b>6</b>		
<b>7</b> Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions).			

Schedule A (Form 990 or 990-EZ) 2015

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

Section D - Distributions	Current Year
<b>1</b> Amounts paid to supported organizations to accomplish exempt purposes	
<b>2</b> Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
<b>3</b> Administrative expenses paid to accomplish exempt purposes of supported organizations	
<b>4</b> Amounts paid to acquire exempt-use assets	
<b>5</b> Qualified set-aside amounts (prior IRS approval required)	
<b>6</b> Other distributions (describe in <b>Part VI</b> ). See instructions.	
<b>7 Total annual distributions.</b> Add lines 1 through 6.	
<b>8</b> Distributions to attentive supported organizations to which the organization is responsive (provide details in <b>Part VI</b> ). See instructions.	
<b>9</b> Distributable amount for 2015 from Section C, line 6	
<b>10</b> Line 8 amount divided by Line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2015	(iii) Distributable Amount for 2015
<b>1</b> Distributable amount for 2015 from Section C, line 6			
<b>2</b> Underdistributions, if any, for years prior to 2015 (reasonable cause required-see instructions)			
<b>3</b> Excess distributions carryover, if any, to 2015:			
<b>a</b>			
<b>b</b>			
<b>c</b>			
<b>d</b> From 2013			
<b>e</b> From 2014			
<b>f Total</b> of lines 3a through e			
<b>g</b> Applied to underdistributions of prior years			
<b>h</b> Applied to 2015 distributable amount			
<b>i</b> Carryover from 2010 not applied (see instructions)			
<b>j</b> Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
<b>4</b> Distributions for 2015 from Section D, line 7: \$			
<b>a</b> Applied to underdistributions of prior years			
<b>b</b> Applied to 2015 distributable amount			
<b>c</b> Remainder. Subtract lines 4a and 4b from 4.			
<b>5</b> Remaining underdistributions for years prior to 2015, if any. Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions).			
<b>6</b> Remaining underdistributions for 2015. Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions).			
<b>7 Excess distributions carryover to 2016.</b> Add lines 3j and 4c.			
<b>8</b> Breakdown of line 7:			
<b>a</b>			
<b>b</b>			
<b>c</b> Excess from 2013			
<b>d</b> Excess from 2014			
<b>e</b> Excess from 2015			



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

**Political Campaign and Lobbying Activities**

OMB No. 1545-0047

**2015**

Open to Public Inspection

Department of the Treasury  
Internal Revenue Service

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.**
- ▶ **Information about Schedule C (Form 990 or 990-EZ) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).**

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

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

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

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

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

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

Name of organization <b>NEW HAMPSHIRE COMMUNITY LOAN FUND, INC.</b>	Employer identification number <b>22-2524015</b>
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**Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.**

- 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV.
- 2 Political 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? ..... **Yes** **No**
- 4a Was a correction made? ..... **Yes** **No**
- b If "Yes," describe in Part IV.

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

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ..... ▶ \$ \_\_\_\_\_
- 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ..... ▶ \$ \_\_\_\_\_
- 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b ..... ▶ \$ \_\_\_\_\_
- 4 Did the filing organization file **Form 1120-POL** for this year? ..... **Yes** **No**
- 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

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

**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.

<b>Limits on Lobbying Expenditures</b> (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals												
<b>1a</b>	Total lobbying expenditures to influence public opinion (grass roots lobbying) .....	0.													
<b>b</b>	Total lobbying expenditures to influence a legislative body (direct lobbying) .....	0.													
<b>c</b>	Total lobbying expenditures (add lines 1a and 1b) .....	0.													
<b>d</b>	Other exempt purpose expenditures .....	10,847,712.													
<b>e</b>	Total exempt purpose expenditures (add lines 1c and 1d) .....	10,847,712.													
<b>f</b>	Lobbying nontaxable amount. Enter the amount from the following table in both columns.	692,386.													
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 50%; text-align: left;">If the amount on line 1e, column (a) or (b) is:</th> <th style="width: 50%; text-align: left;">The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </tbody> </table>		If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e.	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.	Over \$17,000,000	\$1,000,000.		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:														
Not over \$500,000	20% of the amount on line 1e.														
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.														
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.														
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.														
Over \$17,000,000	\$1,000,000.														
<b>g</b>	Grassroots nontaxable amount (enter 25% of line 1f) .....	173,097.													
<b>h</b>	Subtract line 1g from line 1a. If zero or less, enter -0- .....	0.													
<b>i</b>	Subtract line 1f from line 1c. If zero or less, enter -0- .....	0.													
<b>j</b>	If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? .....	Yes	No												

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

<b>Lobbying Expenditures During 4-Year Averaging Period</b>					
Calendar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) Total
<b>2a</b> Lobbying nontaxable amount	640,849.	614,320.	648,764.	692,386.	2,596,319.
<b>b</b> Lobbying ceiling amount (150% of line 2a, column(e))					3,894,479.
<b>c</b> Total lobbying expenditures	6,041.	7,716.	0.	0.	13,757.
<b>d</b> Grassroots nontaxable amount	160,212.	153,580.	162,191.	173,097.	649,080.
<b>e</b> Grassroots ceiling amount (150% of line 2d, column (e))					973,620.
<b>f</b> Grassroots lobbying expenditures	932.	13.	0.	0.	945.

**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
<i>For each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.</i>			
<b>1</b> 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:			
<b>a</b> Volunteers? .....			
<b>b</b> Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? ..			
<b>c</b> Media advertisements? .....			
<b>d</b> Mailings to members, legislators, or the public? .....			
<b>e</b> Publications, or published or broadcast statements? .....			
<b>f</b> Grants to other organizations for lobbying purposes? .....			
<b>g</b> Direct contact with legislators, their staffs, government officials, or a legislative body? .....			
<b>h</b> Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? .....			
<b>i</b> Other activities? .....			
<b>j</b> Total. Add lines 1c through 1i .....			
<b>2a</b> Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? .....			
<b>b</b> If "Yes," enter the amount of any tax incurred under section 4912 .....			
<b>c</b> If "Yes," enter the amount of any tax incurred by organization managers under section 4912 .....			
<b>d</b> 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
<b>1</b> Were substantially all (90% or more) dues received nondeductible by members? .....	<b>1</b>	
<b>2</b> Did the organization make only in-house lobbying expenditures of \$2,000 or less? .....	<b>2</b>	
<b>3</b> Did the organization agree to carry over lobbying and political expenditures from the prior year? .....	<b>3</b>	

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

<b>1</b> Dues, assessments and similar amounts from members .....	<b>1</b>	
<b>2</b> Section 162(e) nondeductible lobbying and political expenditures ( <b>do not include amounts of political expenses for which the section 527(f) tax was paid</b> ).		
<b>a</b> Current year .....	<b>2a</b>	
<b>b</b> Carryover from last year .....	<b>2b</b>	
<b>c</b> Total .....	<b>2c</b>	
<b>3</b> Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues .....	<b>3</b>	
<b>4</b> 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? .....	<b>4</b>	
<b>5</b> Taxable amount of lobbying and political expenditures (see instructions) .....	<b>5</b>	

**Part IV Supplemental Information**

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (see instructions); and Part II-B, line 1. Also, complete this part for any additional information.

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

Department of the Treasury  
Internal Revenue Service

**Supplemental Financial Statements**

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

▶ **Information about Schedule D (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).**

OMB No. 1545-0047

**2015**

**Open to Public Inspection**

**Name of the organization** NEW HAMPSHIRE COMMUNITY LOAN FUND, INC. **Employer identification number** 22-2524015

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

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year .....		
2 Aggregate value of contributions to (during year) .....		
3 Aggregate value of grants from (during year) .....		
4 Aggregate value at end of year .....		
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? .....	<b>Yes</b>	<b>No</b>
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? .....	<b>Yes</b>	<b>No</b>

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

1 Purpose(s) of conservation easements held by the organization (check all that apply).

Preservation of land for public use (e.g., recreation or education)	Preservation of a historically important land area
Protection of natural habitat	Preservation of a certified historic structure
Preservation of open space	

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

	Held at the End of the Tax Year
a Total number of conservation easements .....	2a
b Total acreage restricted by conservation easements .....	2b
c Number of conservation easements on a certified historic structure included in (a) .....	2c
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register .....	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ \_\_\_\_\_

4 Number of states where property subject to conservation easement is located ▶ \_\_\_\_\_

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? .....

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ \_\_\_\_\_

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ \$ \_\_\_\_\_

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

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

**Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenue included on Form 990, Part VIII, line 1 .....	▶ \$ _____
(ii) Assets included in Form 990, Part X .....	▶ \$ _____

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

a Revenue included on Form 990, Part VIII, line 1 .....	▶ \$ _____
b Assets included in Form 990, Part X .....	▶ \$ _____



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

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

- a Public exhibition
- b Scholarly research
- c Preservation for future generations
- d Loan or exchange programs
- e Other \_\_\_\_\_

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

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes  No

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

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes  No

b If "Yes," explain the arrangement in Part XIII and complete the following table:

	Amount
c Beginning balance	1c
d Additions during the year	1d
e Distributions during the year	1e
f Ending balance	1f

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes  No

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

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

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

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

- a Board designated or quasi-endowment  \_\_\_\_\_ %
- b Permanent endowment  \_\_\_\_\_ %
- c Temporarily restricted endowment  \_\_\_\_\_ %

The percentages on lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

	Yes	No
(i) unrelated organizations	3a(i)	
(ii) related organizations	3a(ii)	
b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?	3b	

4 Describe in Part XIII the intended uses of the organization's endowment funds.

**Part VI Land, Buildings, and Equipment.**

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		321,461.		321,461.
b Buildings		4,761,503.	1,064,775.	3,696,728.
c Leasehold improvements				
d Equipment		586,184.	452,494.	133,690.
e Other				
<b>Total.</b> Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				<b>4,151,879.</b>

**Part VII Investments - Other Securities.**

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

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

**Part VIII Investments - Program Related.**

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

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) <b>LOANS RECEIVABLE</b>	<b>92,053,947.</b>	<b>END-OF-YEAR MARKET VALUE</b>
(2) <b>ROC USA</b>	<b>2,097,768.</b>	<b>END-OF-YEAR MARKET VALUE</b>
(3) <b>OTHER PROGRAM-RELATED</b>		
(4) <b>EQUITY INVESTMENTS</b>	<b>872,687.</b>	<b>END-OF-YEAR MARKET VALUE</b>
(5)		
(6)		
(7)		
(8)		
(9)		
<b>Total.</b> (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶	<b>95,024,402.</b>	

**Part IX Other Assets.**

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

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

**Part X Other Liabilities.**

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) <b>EQUITY EQUIVALENTS PAYABLE</b>	<b>8,600,000.</b>
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	<b>8,600,000.</b>

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

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

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

1	Total revenue, gains, and other support per audited financial statements		1	8,347,174.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
a	Net unrealized gains (losses) on investments	2a	242,743.	
b	Donated services and use of facilities	2b		
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d	-3,523,912.	
e	Add lines 2a through 2d	2e		-3,281,169.
3	Subtract line 2e from line 1	3		11,628,343.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
c	Add lines 4a and 4b	4c		0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5		11,628,343.

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

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

1	Total expenses and losses per audited financial statements		1	6,011,661.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
a	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII.)	2d		
e	Add lines 2a through 2d	2e		0.
3	Subtract line 2e from line 1	3		6,011,661.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b	4,834,521.	
c	Add lines 4a and 4b	4c		4,834,521.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5		10,846,182.

**Part XIII Supplemental Information.**

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

**PART X, LINE 2:**

THE COMMUNITY LOAN FUND ACCOUNTS FOR UNCERTAINTY IN INCOME TAXES IN ACCORDANCE WITH ASC TOPIC, INCOME TAXES. THIS STANDARD CLARIFIES THE ACCOUNTING FOR UNCERTAINTY IN TAX POSITIONS AND PRESCRIBES A RECOGNITION THRESHOLD AND MEASUREMENT ATTRIBUTE FOR THE FINANCIAL STATEMENTS REGARDING A TAX POSITION TAKEN OR EXPECTED TO BE TAKEN IN A TAX RETURN. THE COMMUNITY LOAN FUND HAS DETERMINED THAT THERE ARE NO UNCERTAIN TAX POSITIONS WHICH QUALIFY FOR EITHER RECOGNITION OR DISCLOSURE IN THE ACCOMPANYING FINANCIAL STATEMENTS AT JUNE 30, 2016. THE COMMUNITY LOAN FUND'S INFORMATION RETURNS ARE SUBJECT TO EXAMINATION BY THE FEDERAL AND STATE JURISDICTIONS AND GENERALLY REMAIN OPEN FOR THE MOST RECENT THREE YEARS.

**Part XIII** Supplemental Information (continued)

PART XI, LINE 2D - OTHER ADJUSTMENTS:

INTEREST EXPENSE	-2,931,850.
PASS THROUGH GRANTS TO OTHERS	-595,612.
NET LOAN LOSS RESERVE	
IN KIND	3,550.
TOTAL TO SCHEDULE D, PART XI, LINE 2D	-3,523,912.

PART XII, LINE 4B - OTHER ADJUSTMENTS:

INTEREST EXPENSE	2,931,850.
PASS THROUGH GRANTS TO OTHERS	595,612.
NET LOAN LOSS RESERVE	1,310,609.
IN KIND	-3,550.
TOTAL TO SCHEDULE D, PART XII, LINE 4B	4,834,521.

**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" on Form 990, Part IV, line 21 or 22.

▶ Attach to Form 990.

▶ Information about Schedule I (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No. 1545-0047

**2015**

Open to Public  
Inspection

Name of the organization **NEW HAMPSHIRE COMMUNITY LOAN FUND, INC.** Employer identification number **22-2524015**

**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 Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

<b>1 (a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
BROOKFORD FARM 250 WEST RD CANTERBURY, NH 03224	26-4475628		29,008.	0.	CASH		BUSINESS EDUCATION
PROSPECT FARM 398 B PLAINS ROAD LIBSON, NH 03585	00-2829420		14,107.	0.	CASH		BUSINESS EDUCATION
THROWBACK BREWERY 121 LAFAYETTE RD, UNIT #3 NORTH HAMPTON, NH 03862	27-2829383		5,500.	0.	CASH		BUSINESS EDUCATION

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

**3** Enter total number of other organizations listed in the line 1 table **3**

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

Schedule I (Form 990) (2015)

**Part III Grants and Other Assistance to Domestic Individuals.** Complete if the organization answered "Yes" on Form 990, Part IV, line 22.  
Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
IDA MATCHED SAVINGS GRANTS	134	0.	461,988.	CASH	

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

PART I, LINE 2:

PROGRAM MANAGERS OVERSEE GRANT PROGRAMS AND MONITOR THE USE OF FUNDS BY GRANTEES THROUGH A VARIETY OF MEANS INCLUDING PERFORMANCE REPORTS, FINANCIAL REPORTS, INVOICES, PHOTOGRAPHY AND OTHER FORMS OF SUBSTANTIATING DOCUMENTATION.

**SCHEDULE J  
(Form 990)**

**Compensation Information**

OMB No. 1545-0047

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

**2015**

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

▶ Attach to Form 990.

Open to Public Inspection

Department of the Treasury  
Internal Revenue Service

▶ Information about Schedule J (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

Name of the organization **NEW HAMPSHIRE COMMUNITY LOAN FUND, INC.** Employer identification number **22-2524015**

**Part I Questions Regarding Compensation**

	Yes	No								
<b>1a</b> Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.										
<table border="0"> <tr> <td>First-class or charter travel</td> <td>Housing allowance or residence for personal use</td> </tr> <tr> <td>Travel for companions</td> <td>Payments for business use of personal residence</td> </tr> <tr> <td>Tax indemnification and gross-up payments</td> <td>Health or social club dues or initiation fees</td> </tr> <tr> <td>Discretionary spending account</td> <td>Personal services (e.g., maid, chauffeur, chef)</td> </tr> </table>	First-class or charter travel	Housing allowance or residence for personal use	Travel for companions	Payments for business use of personal residence	Tax indemnification and gross-up payments	Health or social club dues or initiation fees	Discretionary spending account	Personal services (e.g., maid, chauffeur, chef)		
First-class or charter travel	Housing allowance or residence for personal use									
Travel for companions	Payments for business use of personal residence									
Tax indemnification and gross-up payments	Health or social club dues or initiation fees									
Discretionary spending account	Personal services (e.g., maid, chauffeur, chef)									
<b>b</b> If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain .....	<b>1b</b>									
<b>2</b> Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked in line 1a? .....	<b>2</b>									
<b>3</b> Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.										
<table border="0"> <tr> <td><input checked="" type="checkbox"/> Compensation committee</td> <td>Written employment contract</td> </tr> <tr> <td>Independent compensation consultant</td> <td><input checked="" type="checkbox"/> Compensation survey or study</td> </tr> <tr> <td><input checked="" type="checkbox"/> Form 990 of other organizations</td> <td><input checked="" type="checkbox"/> Approval by the board or compensation committee</td> </tr> </table>	<input checked="" type="checkbox"/> Compensation committee	Written employment contract	Independent compensation consultant	<input checked="" type="checkbox"/> Compensation survey or study	<input checked="" type="checkbox"/> Form 990 of other organizations	<input checked="" type="checkbox"/> Approval by the board or compensation committee				
<input checked="" type="checkbox"/> Compensation committee	Written employment contract									
Independent compensation consultant	<input checked="" type="checkbox"/> Compensation survey or study									
<input checked="" type="checkbox"/> Form 990 of other organizations	<input checked="" type="checkbox"/> Approval by the board or compensation committee									
<b>4</b> During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:										
<b>a</b> Receive a severance payment or change-of-control payment? .....	<b>4a</b>	<input checked="" type="checkbox"/>								
<b>b</b> Participate in, or receive payment from, a supplemental nonqualified retirement plan? .....	<b>4b</b>	<input checked="" type="checkbox"/>								
<b>c</b> Participate in, or receive payment from, an equity-based compensation arrangement? .....	<b>4c</b>	<input checked="" type="checkbox"/>								
If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.										
<b>Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.</b>										
<b>5</b> For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:										
<b>a</b> The organization? .....	<b>5a</b>	<input checked="" type="checkbox"/>								
<b>b</b> Any related organization? .....	<b>5b</b>	<input checked="" type="checkbox"/>								
If "Yes" to line 5a or 5b, describe in Part III.										
<b>6</b> For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:										
<b>a</b> The organization? .....	<b>6a</b>	<input checked="" type="checkbox"/>								
<b>b</b> Any related organization? .....	<b>6b</b>	<input checked="" type="checkbox"/>								
If "Yes" on line 6a or 6b, describe in Part III.										
<b>7</b> For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described on lines 5 and 6? If "Yes," describe in Part III .....	<b>7</b>	<input checked="" type="checkbox"/>								
<b>8</b> Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III .....	<b>8</b>	<input checked="" type="checkbox"/>								
<b>9</b> If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)? .....	<b>9</b>									

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

Schedule J (Form 990) 2015

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

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

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) JULIANA EADES PRESIDENT	(i)	148,030.	0.	0.	0.	11,979.	160,009.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							





**SCHEDULE M  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Noncash Contributions**

OMB No. 1545-0047

**2015**

Open To Public  
Inspection

- ▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
- ▶ Attach to Form 990.
- ▶ Information about Schedule M (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

Name of the organization **NEW HAMPSHIRE COMMUNITY LOAN FUND, INC.** Employer identification number **22-2524015**

**Part I Types of Property**

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art - Works of art				
2 Art - Historical treasures				
3 Art - Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities - Publicly traded	X	5	35,305.	FAIR MARKET VALUE
10 Securities - Closely held stock				
11 Securities - Partnership, LLC, or trust interests				
12 Securities - Miscellaneous				
13 Qualified conservation contribution - Historic structures				
14 Qualified conservation contribution - Other				
15 Real estate - Residential				
16 Real estate - Commercial				
17 Real estate - Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other (NON-CASH GRAN)	X	5	58,645.	FAIR MARKET VALUE
26 Other ( )				
27 Other ( )				
28 Other ( )				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement **29**

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?		X
b If "Yes," describe the arrangement in Part II.		
31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?	X	
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?		X
b If "Yes," describe in Part II.		
33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.		

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

Schedule M (Form 990) (2015)



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

Department of the Treasury  
Internal Revenue Service

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

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

▶ Attach to Form 990 or 990-EZ.

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No. 1545-0047

**2015**

Open to Public  
Inspection

Name of the organization

NEW HAMPSHIRE COMMUNITY LOAN FUND, INC.

Employer identification number

22-2524015

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

TO SERVE AS A CATALYST, LEVERAGING FINANCIAL, HUMAN AND CIVIC RESOURCES  
TO ENABLE TRADITIONALLY UNDERSERVED PEOPLE TO ATTAIN AFFORDABLE HOMES,  
QUALITY JOBS AND CHILD CARE, AND BECOME FINANCIALLY INDEPENDENT. WE DO  
THIS BY PROVIDING LOANS, CAPITAL AND TECHNICAL ASSISTANCE;  
COMPLEMENTING AND EXTENDING THE REACH OF CONVENTIONAL LENDERS AND  
PUBLIC INSTITUTIONS; AND BRINGING PEOPLE AND INSTITUTIONS TOGETHER TO  
SOLVE PROBLEMS.

ESTABLISHED IN 1983, THE COMMUNITY LOAN FUND WAS ONE OF THE FIRST  
COMMUNITY DEVELOPMENT FINANCIAL INSTITUTIONS IN THE NATION, AND IS  
RECOGNIZED AS A NATIONAL LEADER FOR ITS INNOVATION, SOCIAL IMPACT,  
FINANCIAL STRENGTH AND PERFORMANCE. THE COMMUNITY LOAN FUND WAS THE  
2009 RECIPIENT OF THE NEXT AWARD FOR OPPORTUNITY FINANCE, THE HIGHEST  
HONOR IN OUR FIELD.

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

TO SERVE AS A CATALYST, LEVERAGING FINANCIAL, HUMAN AND CIVIC RESOURCES  
TO ENABLE TRADITIONALLY UNDERSERVED PEOPLE TO ATTAIN AFFORDABLE HOMES,  
QUALITY JOBS AND CHILD CARE, AND BECOME FINANCIALLY INDEPENDENT. WE DO  
THIS BY PROVIDING LOANS, CAPITAL AND TECHNICAL ASSISTANCE;  
COMPLEMENTING AND EXTENDING THE REACH OF CONVENTIONAL LENDERS AND  
PUBLIC INSTITUTIONS; AND BRINGING PEOPLE AND INSTITUTIONS TOGETHER TO  
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ESTABLISHED IN 1983, THE COMMUNITY LOAN FUND WAS ONE OF THE FIRST

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COMMUNITY DEVELOPMENT FINANCIAL INSTITUTIONS IN THE NATION, AND IS RECOGNIZED AS A NATIONAL LEADER FOR ITS INNOVATION, SOCIAL IMPACT, AND FINANCIAL STRENGTH AND PERFORMANCE. THE COMMUNITY LOAN FUND WAS THE 2009 RECIPIENT OF THE NEXT AWARD FOR OPPORTUNITY FINANCE, THE HIGHEST HONOR IN OUR FIELD.

FORM 990, PT. III, LINE 4A

FOUR COMMUNITY LOAN FUND PROGRAMS ADDRESS N.H.'S NEED FOR HOUSING FOR WORKING FAMILIES AND FOR FAMILIES WITH LOW INCOMES.

1. ROC-NH PROVIDES LOANS, ALONG WITH EDUCATIONAL AND TECHNICAL ASSISTANCE, TO BUILD LONG-TERM VALUE AND SECURITY FOR RESIDENTS OF N.H.'S MANUFACTURED-HOME COMMUNITIES.

SINCE 1984, ROC-NH HAS PROVIDED TECHNICAL ASSISTANCE AND FINANCING FOR COMMUNITY PURCHASE AND IMPROVEMENT TO HELP HOMEOWNERS PURCHASE, MANAGE AND IMPROVE THEIR COMMUNITIES AS COOPERATIVE CORPORATIONS.

AS OF JUNE 30, 2016, 120 RESIDENT-OWNED COMMUNITIES IN N.H. WERE HOME TO 6,772 (PRIMARYLY LOW-INCOME) HOUSEHOLDS. DURING FISCAL YEAR 2016, THE COMMUNITY LOAN FUND MADE 22 LOANS TOTALING \$11,144,825. IN DOING SO, IT PRESERVED 332 HOUSING UNITS AND PROVIDED 21,610 HOURS OF TECHNICAL ASSISTANCE TO RESIDENT-OWNED COMMUNITIES.

IN EARLY APRIL OF 2015, A CALL CAME INTO ROC-NH FROM A RESIDENT OF BOB'S MOBILE HOME PARK IN MILAN, A SMALL TOWN IN NORTHERN N.H. THE CALLER HAD JUST FOUND OUT THAT THE PARK WAS TO BE SOLD AT A FORECLOSURE AUCTION IN TWO WEEKS. COULD ROC-NH HELP?

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A FEW DAYS LATER, ROC-NH STAFF MET WITH 10 OF THE PARK'S 18 FAMILIES AND LEARNED ABOUT THEIR PRECARIOUS SITUATION. WORD WAS THAT OTHER POTENTIAL BIDDERS AT AUCTION WERE UNLIKELY TO KEEP THE PARK OPEN. THE PARK'S LAND ADJOINS AN ALL-TERRAIN VEHICLE TRAIL AND IS NEAR AN AIRPORT, MAKING IT VALUABLE LAND IN THE NORTH COUNTRY.

IF THE NEW OWNER CLOSED THE PARK, THE FAMILIES WOULD LIKELY LOSE THEIR HOMES. THERE IS LITTLE OTHER AFFORDABLE HOUSING IN THEIR EXTREMELY RURAL PART OF THE STATE.

THE RESIDENTS VOTED TO INCORPORATE AS DEER ESTATES COOPERATIVE, INC., AND TRY TO BUY THE PARK THEMSELVES. THE ROC-NH TEAM ALSO CONTACTED THE PARK'S OWNERS, WHO WERE MORE THAN WILLING TO WORK WITH THE COOPERATIVE.

ON THE MORNING OF APRIL 21, WITH A LOAN FROM THE COMMUNITY LOAN FUND, THE CO-OP CLOSED ON THE SALE. THEY SIGNED THE PAPERS AROUND THE OWNERS' KITCHEN TABLE, AND BECAME N.H.'S 113TH RESIDENT-OWNED COMMUNITY.

DEER ISLAND PRESIDENT KURT GUERIN SAID HE WAS "A LITTLE STUNNED AT HOW GOOD YOUR GUYS (ROC-NH) ARE AND HOW QUICK IT ALL HAPPENED."

"I AM REALLY EXCITED FOR THE POSITIVE FUTURE THE PARK CAN HAVE WITH THIS OPPORTUNITY," HE SAID.

2. BECAUSE THEY ARE RELATIVELY AFFORDABLE AND AVAILABLE IN RURAL COMMUNITIES, MANUFACTURED HOMES ARE, FOR SOME N.H. FAMILIES, THE HOUSING OPTION OF LAST RESORT. THEY ALSO PROVIDE AN AFFORDABLE OPTION

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FOR OLDER COUPLES WHO ARE DOWNSIZING AND YOUNG COUPLES BEGINNING FAMILIES.

THE COMMUNITY LOAN FUND'S WELCOME HOME LOANS PROVIDE REAL FIXED-RATE MORTGAGE PRODUCTS FOR A GROUP OF HOMEOWNERS THAT DOESN'T OTHERWISE HAVE ACCESS TO SUCH LOANS. MOST BUYERS OF MANUFACTURED HOMES HAVE TO USE PERSONAL PROPERTY LOANS, EVEN WHEN THEY OWN THE LAND THE HOUSE WILL OCCUPY, OR WHEN THEY HAVE SECURED THE LAND THROUGH COOPERATIVE OWNERSHIP.

IN MAKING MORE THAN \$47 MILLION IN LOANS SINCE 2002, WELCOME HOME LOANS HAVE SHOWN THESE BORROWERS TO BE BETTER-THAN-AVERAGE RISKS, WITH A CUMULATIVE LOSS RATE OF JUST 2.24 PERCENT. DURING FY 16, WELCOME HOME LOANS PROVIDED \$5.62 MILLION IN FINANCING TO 100 HOMEOWNERS.

IN 2009, OUR WELCOME (THEN CALLED COOPERATIVE) HOME LOANS EARNED THE COMMUNITY LOAN FUND THE HIGHEST HONOR GIVEN TO COMMUNITY DEVELOPMENT FINANCIAL INSTITUTIONS: THE NEXT AWARD FOR OPPORTUNITY FINANCE. THE PROGRAM'S STRONG PERFORMANCE HAS ALSO ATTRACTED OTHER CONVENTIONAL RESIDENTIAL LENDERS, INCLUDING USDA, NH HOUSING FINANCE AUTHORITY AND FANNIE MAE, TO THIS EMERGING MARKET.

WELCOME HOME LOANS PROVIDE A SECOND CHANCE FOR PEOPLE LIKE WANITA AND KEVIN ORDWAY. THE ORDWAYS HAD LOST THEIR HOME WHEN A COMBINATION OF IDENTITY THEFT, DISABILITY AND ILLNESS PUSHED THEM INTO BANKRUPTCY. THEY THOUGHT THEY MIGHT NEVER OWN A HOME AGAIN.

ONE DAY, AS THEY WERE OUT SCOUTING RENTAL HONES IN RURAL N.H., THE

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ORDWAYS DROVE PAST A DOUBLE-WIDE MANUFACTURED HOME FOR SALE ON A COUPLE ACRES. IT LACKED THE GARAGE OR WORKSHOP THAT HANDYMAN KEVIN HOPED FOR, BUT HE THOUGHT, "I COULD PLAY WITH IT."

THEY APPLIED FOR A WELCOME HOME LOAN AND, DESPITE THEIR PREVIOUS PROBLEMS, DEMONSTRATED THAT THEY COULD MAKE THE PAYMENTS. THEY GOT THE LOAN AND THE HOUSE. THEIR MONTHLY MORTGAGE, INSURANCE AND TAXES COMBINED WERE \$535 LESS THAN THEY HAD PAID TO RENT.

3. THE COMMUNITY HOUSING PROGRAM EXPANDS N.H.'S SUPPLY OF INCREASINGLY SCARCE AFFORDABLE HOUSING WITH THE GOAL OF KEEPING IT PERMANENTLY AFFORDABLE BY PROVIDING LOANS AND TECHNICAL ASSISTANCE TO NONPROFIT HOUSING DEVELOPMENT ORGANIZATIONS. SINCE 1989 THE COMMUNITY LOAN FUND HAS MADE OVER \$25 MILLION IN LOANS, RESULTING IN THE CREATION OF OVER 1,486 AFFORDABLE APARTMENTS VALUED AT MORE THAN \$200 MILLION.

COMMUNITY HOUSING HAS ALSO HELPED CREATE AND NURTURE A NOW-MATURE NETWORK OF NONPROFIT DEVELOPERS, WHILE ASSISTING COMMUNITY GROUPS TACKLING THEIR FIRST PROJECTS, TO CREATE CAPACITY IN ONE OF THE LEAST-AFFORDABLE STATES IN THE NATION.

THE GILE HILL HOUSING DEVELOPMENT WAS ONE OF THE MOST AMBITIOUS AND COMPLEX IN NEW HAMPSHIRE. IT WAS CALLED "THE MOST IMPORTANT AFFORDABLE HOUSING PROJECT IN NEW ENGLAND."

LOCATED IN HANOVER, WHERE RENTAL APARTMENTS ARE BOTH SCARCE AND PRICEY, THE PROJECT WAS ALSO MUCH NEEDED. THE TWIN PINES HOUSING TRUST'S PLAN WAS THAT HALF OF THE PROJECT'S 120 RENTALS AND CONDOMINIUMS WOULD BE



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AFFORDABLE FOR WORKING FAMILIES.

THEN THE RECESSION HIT. CONDO SALES SLOWED TO A CRAWL AND PRICES  
DIPPED. A MAJOR FINANCING PARTNER THREATENED TO FORECLOSE.

KNOWING THE IMPORTANCE OF THE PROJECT, AND OF TWIN PINES' WORK IN THE  
REGION, THE COMMUNITY LOAN FUND REVISED ITS LOAN AGREEMENTS, DELAYED  
REPAYMENT AND EXTENDED FLEXIBLE CAPITAL TO KEEP THE PROJECT AFLOAT.

THE COMMUNITY LOAN FUND'S PATIENCE, TECHNICAL ASSISTANCE, PARTNERSHIP  
AND MORAL SUPPORT WERE CRITICAL, SAID TWIN PINES EXECUTIVE DIRECTOR  
ANDREW WINTER. "TWIN PINES COULD NOT HAVE COMPLETED THIS EXCEEDINGLY  
COMPLEX AND CHALLENGING PROJECT WITHOUT THE COMMUNITY LOAN FUND BESIDE  
US EVERY STEP OF THE WAY."

WITH THE RECOVERY OF THE HOUSING MARKET, THE GILE PROJECT PROVIDES  
AFFORDABLE APARTMENTS AND CONDOS WITHIN WALKING DISTANCE TO GOOD JOBS,  
AND A HIGH-FUNCTIONING NONPROFIT PROVIDING AFFORDABLE HOUSING IN A  
MARKET THAT WOULD NOT OTHERWISE HAVE IT.

4. INDIVIDUAL DEVELOPMENT ACCOUNTS (IDA) PROVIDE MATCHED SAVINGS AND  
FINANCIAL TRAINING FOR PEOPLE WITH LOW INCOMES WHO WANT TO SAVE FOR  
HOMEOWNERSHIP OR POST-SECONDARY EDUCATION.

SINCE 2001, THE N.H. IDA PROGRAM HAS PROVIDED MORE THAN \$4.4 MILLION TO  
MATCH THE SAVINGS OF PROGRAM PARTICIPANTS, INCLUDING MORE THAN \$2.5  
MILLION TO HELP 531 PEOPLE PURCHASE HOMES.

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GAHUNGU SIMON GREW UP IN A REFUGEE CAMP IN TANZANIA.

FOR THE NEXT 11 YEARS, THE REFUGEE CAMP WAS HOME TO GAHUNGU, HIS MOTHER, AND SIX SIBLINGS. WHEN THEY WERE RESETTLED IN N.H., HE WAS A HIGH SCHOOL FRESHMAN WHO SPOKE AND READ NO ENGLISH. BUT HE WAS A SERIOUS STUDENT, EARNING HIGH GRADES, AND HELD AFTER-SCHOOL JOBS AT A GROCERY STORE AND A HOTEL.

HE DREAMT OF BEING A HUMANITARIAN AID WORKER, LIKE THOSE IN THE CAMPS WHO PROVIDED FOOD, WATER, SHELTER, LIFE ITSELF. REACHING THAT DREAM MEANT HE'D NEED A COLLEGE DEGREE.

ONE DAY A VISITOR TO THE SCHOOL TOLD HIM THAT AN IDA ACCOUNT COULD HELP PAY FOR COLLEGE IF GAHUNGU COULD SAVE \$25 A MONTH AND TAKE FINANCIAL LITERACY CLASSES ONLINE.

HE OPENED AN IDA, MET HIS SAVINGS GOAL, AND USED THE MATCH, ALONG WITH SCHOLARSHIPS AND OTHER AID, TO ATTEND PLYMOUTH STATE UNIVERSITY, WHERE HE GRADUATED WITH A DEGREE IN POLITICAL SCIENCE.

HE PLANS TO PURSUE A MASTER'S DEGREE IN FOREIGN AFFAIRS, THEN TO BECOME A DIPLOMAT. HE WANTS TO TRAVEL AND TO MAKE A DIFFERENCE IN PEOPLE'S LIVES, THE WAY THE AID WORKERS MADE A DIFFERENCE IN HIS.

FORM 990, PT. III, LINE 4B

THE COMMUNITY LOAN FUND IS ROOTED IN TWO BELIEFS:

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SOME FINANCIAL OBSTACLES PEOPLE FACE ARE NOT DUE SOLELY TO LOW INCOMES,  
BUT ALSO TO LACK OF CREDIT.

MANY PEOPLE WITH CAPITAL WILL INVEST IN BASIC HUMAN NEEDS IF THERE IS A  
WAY TO DO SO.

THE PHILANTHROPY PROGRAM WORKS ON THE SECOND PART OF THAT EQUATION. IT  
SEEKS TO MAKE THE COMMUNITY LOAN FUND A CONDUIT THROUGH WHICH PEOPLE,  
ORGANIZATIONS, FOUNDATIONS AND CORPORATIONS SAFELY AND SECURELY INVEST  
IN N.H.'S PEOPLE AND COMMUNITIES.

THE COMMUNITY LOAN FUND IS NEARLY ALONE AMONG COMMUNITY DEVELOPMENT  
FINANCIAL INSTITUTIONS IN ACCEPTING INVESTMENTS IN THE FORM OF UNSECURED  
LOANS FROM PRIVATE INDIVIDUALS, AS WELL AS FROM INSTITUTIONS LARGE AND  
SMALL. INVESTMENTS ARRIVE FROM RETIREES AND COMMUNITY CHURCH GROUPS,  
ALL THE WAY UP TO NATIONAL FOUNDATIONS.

A ROBUST EQUITY POOL HELPS THE COMMUNITY LOAN FUND MAINTAIN A 100%  
REPAYMENT RECORD TO ITS INVESTORS. IT'S THE "SHOCK ABSORBER" THAT  
CUSHIONS THEIR MONEY AGAINST THE RARE LOAN THAT ISN'T REPAYED.

SEACOAST PHILANTHROPIST TOM HAAS HAD LONG SUPPORTED THE COMMUNITY LOAN  
FUND. HIS THOMAS W. HAAS FOUNDATION MAKES GIFTS TO NUMEROUS  
ENVIRONMENTAL AND EDUCATIONAL CAUSES, INCLUDING GIFTS OF FOOD, FUEL AND  
SHELTER.

HE SEES THE COMMUNITY LOAN FUND AS COMPLEMENTING THOSE CRISIS SERVICES  
BY PROVIDING OPPORTUNITY.

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"ONCE PEOPLE'S EMERGENCIES ARE TAKEN CARE OF, HOW DO YOU PUT THEM ON A PATH?" HE ASKED. "THE COMMUNITY LOAN FUND HELPS PEOPLE TO HELP THEMSELVES, TO NOT ONLY STABILIZE THEIR LIVES BUT TO BECOME EMPOWERED WITHIN THEIR COMMUNITIES."

TO ENSURE THAT THE COMMUNITY LOAN FUND CONTINUES TO MEET THOSE NEEDS, TOM MADE A DIFFERENT TYPE OF GIFT IN 2015. HE DONATED A MILLION DOLLARS FOR EQUITY. BECAUSE THE COMMUNITY LOAN FUND LEVERAGES EQUITY GIFTS FOUR TIMES OVER, TOM IS A CATALYST NOT ONLY FOR OTHERS WHO WANT TO INVEST IN N.H.'S COMMUNITIES, BUT ALSO FOR DONORS SEEKING THE SAME KIND OF IMPACT.

INVESTMENTS IN THE COMMUNITY LOAN FUND RANGE FROM \$1,000 TO \$5 MILLION. THE PHILANTHROPY PROGRAM BROUGHT IN \$9.87 MILLION FROM 121 NEW INVESTMENTS IN FY 16, PUSHING THE TOTAL NUMBER OF CURRENT INVESTORS TO 607.

FORM 990, PT. III, LINE 4C

THE COMMUNITY LOAN FUND OFFERS FINANCING FOR ESTABLISHED BUSINESSES RANGING FROM SELF-EMPLOYED TRADESMEN TO HIGH-GROWTH, HIGH-MARGIN COMPANIES.

SINCE 1984, BUSINESS BUILDER LOANS HAVE PROVIDED LOANS AND BUSINESS EDUCATION TO SUPPORT THE GROWTH AND RESILIENCE OF SMALL BUSINESSES AND THEIR ABILITY TO PROVIDE QUALITY JOBS.

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SINCE 2002, VESTED FOR GROWTH INVESTMENTS HAVE PROVIDED INVESTMENTS AND BUSINESS EDUCATION TO HELP OWNERS GROW THEIR BUSINESSES BY ENGAGING THEIR PEOPLE AND ADDING VALUE FOR THEIR CUSTOMERS.

VESTED FOR GROWTH'S RISK-TOLERANT CAPITAL AND PEER-LEARNING OPPORTUNITIES ALSO HELP OWNERS OF ESTABLISHED BUSINESSES INCREASE PROFITS AND CREATE HIGHER-QUALITY JOBS.

IN FY 16, OUR BUSINESS FINANCE TEAM MADE 12 INVESTMENTS TOTALING \$2.26 MILLION, CREATING OR PRESERVING 242 JOBS. TWELVE BUSINESS OWNERS PARTICIPATED IN CEO PEERLINK, A GROUP IN WHICH CEOS MEET MONTHLY TO SHARE BEST PRACTICES, PROVIDE SUPPORT AND SOLVE BUSINESS PROBLEMS.

IN THE EARLY 2000S, THE MAJOR WIRELESS COMPANIES LOOKED AT HOTELS, MALLS, WORKPLACES AND CONFERENCES AND SAW MILLIONS OF CONSUMERS TO WHOM THEY COULD SELL INDIVIDUAL MOBILE DATA PLANS. BOB GOLDSTEIN AND STEVE SINGLAR SAW SOMETHING DIFFERENT: THOUSANDS OF VENUES THAT COULD ENHANCE THE CUSTOMER EXPERIENCE BY OFFERING WI-FI SERVICE AND SUPPORT.

FROM THAT VISION, THEY LAUNCHED SINGLE DIGITS, A COMPANY THAT, BY 2015, CONNECTED MORE THAN 100 MILLION SUBSCRIBERS WITH THE INTERNET AT 3,000 LOCATIONS.

WHEN SINGLE DIGITS ADDED SEVERAL MAJOR CLIENTS AND NEEDED GROWTH CAPITAL, A VESTED FOR GROWTH INVESTMENT ENABLED THE COMPANY TO FILL SOME KEY POSITIONS, MOVE TO LARGER QUARTERS AND WITHIN 18 MONTHS, GROW FROM 60 TO MORE THAN 100 EMPLOYEES. BY 2015, IT EMPLOYED 210.

RAPID BUSINESS GROWTH RARELY HAPPENS WITHOUT GROWING PAINS, AND BOB

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APPRECIATES THAT "THE COMMUNITY LOAN FUND PROVIDES A UNIQUE DISPOSITION THAT IS ALWAYS POSITIVE."

"WE'VE HAD FINANCIAL BLIPS ALONG THE WAY," BOB SAYS, AND THE COMMUNITY LOAN FUND'S ATTITUDE HAS BEEN, "LET'S WORK ON THESE PROBLEMS TOGETHER, DO WHAT'S BEST FOR THE BUSINESS, AND FOCUS ON GROWING PROFITS AND JOBS FOR THE LONG TERM."

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

IN FY 16, THE COMMUNITY LOAN FUND MADE ONE COMMUNITY FACILITIES LOAN TOTALING \$108,000. THAT LOAN SUPPORTED THE REFINANCE OF A 6,100-SQUARE-FOOT CHILD CARE FACILITY SERVING 112 CHILDREN, 22 STAFF AND THE NEEDS OF WORKING PARENTS. WE ALSO PROVIDED 373 HOURS OF TECHNICAL ASSISTANCE.

SINCE 1984, OUR COMMUNITY FACILITIES FINANCING HAS SUPPORTED ESSENTIAL SERVICES, INCLUDING NONPROFIT AND HOME-BASED CHILD DEVELOPMENT SERVICES, BY HELPING NONPROFIT ORGANIZATIONS BUY, RENOVATE, OR BUILD FACILITIES.

WHEN ITS LEASE WITH THE SCHOOL DISTRICT EXPIRED, THE GREAT BAY KIDS' COMPANY EARLY EDUCATION CENTER NEEDED TO FIND A NEW HOME FOR ITS EXETER PROGRAM. ITS BOARD STARTED PLANNING TO BUILD A SCHOOL THAT WOULD SERVE UP TO 125 CHILDREN, INCLUDING THOSE UNDER AGE 2, AND TO DO IT IN A WAY THAT KEPT TUITION COSTS DOWN AND THE QUALITY OF CARE AND EDUCATION HIGH.

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IN FALL OF 2014, LENDERS AT THE SCHOOL'S BANK CONTACTED THE COMMUNITY LOAN FUND. GREAT BAY KIDS NEEDED MORE REAL ESTATE AND CONSTRUCTION FUNDING THAN THE BANK COULD PROVIDE AND HAD BARELY TWO MONTHS TO FILL THE GAP.

THE COMMUNITY LOAN FUND CAME THROUGH NOT ONLY WITH THE NEEDED FINANCING, BUT WORKED WITH ADMINISTRATORS TO FIND GRANTS FOR CLASSROOM SUPPLIES AND EQUIPMENT SO COSTS COULD BE KEPT LOW.

THE RESULT: WHEN CHILDREN ARRIVED AT THE BRAND-NEW GREAT BAY KIDS' COMPANY SCHOOL THE DAY AFTER LABOR DAY IN 2015, PRESCHOOLERS TOTED THE USUAL BASEBALL CAPS AND BACKPACKS, BUT SOME TINY FINGERS CLUTCHED BOTTLES AND BLANKETS.

PARENTS WHO JUST A YEAR EARLIER HAD TO DRIVE THEIR INFANT TO ONE CHILD CARE CENTER AND THEIR PRESCHOOLER TO ANOTHER, IN DIFFERENT TOWNS, BREATHED SIGHS OF RELIEF.

EXPENSES \$ 188,114. INCLUDING GRANTS OF \$ 21,214. REVENUE \$ 17,176.

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

THE FORM 990 IS PREPARED BY STAFF AND THE AUDIT FIRM. A DRAFT OF THE COMPLETED FORM 990 IS REVIEWED BY THE FINANCE COMMITTEE WITH QUESTIONS ADDRESSED AND RESOLVED BY THE AUDIT FIRM. THE FINANCE COMMITTEE VOTES TO RECOMMEND FOR ACCEPTANCE TO THE FULL BOARD, AND MINUTES OF THE COMMITTEE MEETING ARE PRODUCED TO DOCUMENT THE REVIEW AND THE VOTE. A COPY OF THE FORM 990 IS PROVIDED TO THE FULL BOARD OF DIRECTORS. THE BOARD VOTES TO ACCEPT THE FORM 990 BEFORE IT IS FILED WITH THE IRS.

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

THE ORGANIZATION REQUIRES EMPLOYEES AND BOARD MEMBERS TO COMPLETE ANNUAL CONFLICT OF INTEREST SURVEYS.

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

COMPENSATION DATA REGARDING THE TWO TOP EXECUTIVE POSITIONS WAS GATHERED NATIONALLY, REGIONALLY AND LOCALLY. AN EXECUTIVE COMPENSATION COMMITTEE WAS APPOINTED BY THE BOARD OF DIRECTORS AND CONSISTED OF THREE BOARD MEMBERS, WITH ASSISTANCE FROM THE HUMAN RESOURCES DIRECTOR. AFTER A REVIEW OF THE DATA AND DISCUSSION BY THE ECC, IT WAS DETERMINED THAT BOTH POSITIONS ARE IN A REASONABLE RANGE WITH THE DATA REVIEWED AND THAT THE COMPENSATION FOR THE TWO POSITIONS IS APPROPRIATE. COPIES OF COMPARABILITY DATA ANALYSIS ARE ON FILE, AND RECORDS OF THE ECC ARE DOCUMENTED.

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

THE COMMUNITY LOAN FUND'S FORM 990, YEAR-END AUDITED FINANCIAL STATEMENTS AND ANNUAL REPORTS ARE MADE AVAILABLE TO THE PUBLIC UPON REQUEST AND ARE POSTED ON THE ORGANIZATION'S WEBSITE FOR PUBLIC INSPECTION. BYLAWS AND CONFLICT OF INTEREST POLICIES ARE ALSO AVAILABLE TO THE PUBLIC UPON REQUEST. THIS IS STATED ON THE ORGANIZATION'S WEBSITE.

FORM 990 PART XII, LINE 2C

COMMUNITY LOAN FUND HAS A COMMITTEE THAT ASSUMES RESPONSIBILITY FOR THE OVERSIGHT OF THE AUDIT OF ITS FINANCIAL STATEMENTS AND SELECTION OF INDEPENDENT ACCOUNTANT, THE PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR.



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PT IV, LINE 26 AND PT VI-A, LINE 1B

THE COMMUNITY LOAN FUND'S BYLAWS REQUIRE THE BOARD OF DIRECTORS TO INCLUDE REPRESENTATIVES OF BORROWER ORGANIZATIONS AND INVESTORS AMONG ITS MEMBERSHIP. DONATIONS AND INVESTMENTS ARE ACCEPTED FROM EMPLOYEES, FROM INDIVIDUAL BOARD MEMBERS, OR FROM ORGANIZATIONS OF WHICH CURRENT AND FORMER MEMBERS ARE SIGNIFICANT EMPLOYEES OR BOARD MEMBERS. ALL TRANSACTION DECISIONS FOLLOW STANDARD POLICIES AND PROCEDURES INCLUDING THOSE COVERING CONFLICT OF INTEREST. THREE MEMBERS OF THE BOARD OF DIRECTORS HAVE PROVIDED LOANS TOTALING \$115,426 TO THE COMMUNITY LOAN FUND. TWELVE EMPLOYEES HAVE PROVIDED LOANS TOTALING \$388,910 TO THE COMMUNITY LOAN FUND. ALL BOARD MEMBERS AND STAFF ARE TYPICALLY DONORS TO THE COMMUNITY LOAN FUND. THE TRANSACTIONS ARE PART OF THE COMMUNITY LOAN FUND'S NORMAL COURSE OF BUSINESS AND ARE OPEN TO THE PUBLIC AT LARGE.