Clear Fund Board Meeting 6/22/07 Attachment C: Review of Compensation

Context

I. Executive Director compensation for 3 comparable organizations

Although the Clear Fund is an unconventional organization, Holden Karnofsky, asked Jason McGill, Director of Membership at the New York Regional Association of Grantmakers, to name appropriate comparables. Their exchange is attached. Jason named four organizations, of which we were able to locate Form 990s (relevant pages attached) for three, with the stipulation that the Clear Fund's budget – and therefore appropriate compensation – is lower than that of these comparables.

- New York Women's Foundation, a small public foundation located in New York City.
 - o Total expenses: \$3,023,293.00.
 - Executive Director compensation (excluding benefits): \$129,231.00 for 40 hrs/week.
 - Program Director compensation (excluding benefits): \$87,258.00 for 40 hrs/week.
- Third Wave Foundation, a small public foundation located in New York City.
 - o Total expenses: \$657,468.00
 - o Executive Director compensation: \$51,827.00 for 40 hrs/week.
 - o Other officer compensation: N/A.
- North Star Fund, a small public foundation located in New York City.
 - o Total expenses: \$1,072,280.00
 - o Executive Director compensation: \$67,015.00 for 40 hrs/week.
 - o Other officer compensation: N/A.

II. Data from NPCCNY's salary survey

Craig Weinrich of the Nonprofit Coordinating Committee of New York, in an exchange with Holden Karnofsky (attached), disclosed the following data about salaries at nonprofits with budgets and areas of focus comparable to those of The Clear Fund.

- For nonprofits in the area of health and human services with annual budgets between \$400,000 and \$700,000, the median Executive Director salary is \$68,000 (ann.); the median Deputy Director salary is \$48,000 (ann.)
- For nonprofits in the area of public societal benefit with annual budgets between \$400,000 and \$700,000, the median Executive Director salary is **\$74,000** (ann.); Deputy Director data is not available.

III. Roles of Holden Karnofsky and Elie Hassenfeld

The Clear Fund's 2007 budget is approximately \$250,000; on an annualized basis, this translates to approximately \$500,000.

Holden Karnofsky will serve as Executive Director, and expects to work approximately 80 hours per week. Elie Hassenfeld will serve as Program Officer, and expects to work in excess of 60 hours per week.

Proposal

Holden Karnofsky, Executive Director: An annualized salary of \$68,600 (including benefits).

Elie Hassenfeld, Program Officer: An annualized salary of \$68,600 (including benefits).

These salaries are within range of the comparable salaries discussed above.

Before voting

Before voting on the proposal regarding compensation, please affirm each of the following:

- 1. I am not the person who is the subject of the compensation arrangement, or a family member of such person;
- 2. I am not in an employment relationship subject to the direction or control of the person who is the subject of the compensation arrangement;
- 3. I do not receive compensation or other payments subject to approval by the person who is the subject of the compensation arrangement;
- 4. I have no material financial interest affected by the compensation arrangement; and
- 5. I am not approving a transaction providing economic benefits to the person who is the subject of the compensation arrangement, who in turn has approved or will approve a transaction providing benefits to the board or committee member.

Exchange between Holden Karnofsky and Jason McGill of NYRAG Hi Holden:

Each of the following organizations runs a budget that is currently larger than The Clear Fund, but each is a relatively modest-sized public foundation and is therefore in the ballpark, grantmaking-wise, of what I understand to be your first grantmaking plateau goal for the Fund. I think these would make a reasonable comparison for due diligence on compensation (although you'll likely set your salary below what these folks make).

You should be able to find their 990s online. Let me know if the numbers leave you needing additional examples.

New York Women's Foundation The North Star Fund Twenty-First Century Foundation Third Wave Foundation

Yrs--

Jason

Jason McGill

Director, Member Services

NYRAG: New York Regional Association of Grantmakers

79 Fifth Avenue, Fourth Floor

New York, NY 10003

Phone: 212/714-0699 x 203

Fax: 212/239-2075

e-mail: jmcgill@nyrag.org Web: www.nyrag.org



please consider the environment before printing this e-mail

From: holden0@gmail.com] On Behalf Of Holden

Sent: Wednesday, June 20, 2007 11:59 AM

To: Jason McGill

Subject: Comparables for The Clear Fund

Hi Jason,

Thanks again for speaking with me just now. As I mentioned over the phone, we are looking for the names of nonprofit organizations that would be appropriate comparables for The Clear Fund, for the purpose of setting an appropriate level of compensation for our officers. Since you are well placed to know the landscape of grantmakers in New York, and you have a thorough understanding of The Clear Fund (its budget, its work, and its mission), I'd appreciate if you could send the names of the nonprofits you know of that are most similar to - and thus most appropriate for compensation reference for - The Clear Fund.

Thanks, Holden

Exchange between Holden Karnofsky and Craig Weinrich of NPCCNY

See answers below...

Craig Weinrich
Membership, Outreach & IT Director
Nonprofit Coordinating Committee of New York
1350 Broadway, Suite 1801 | New York, NY 10018
(212) 502-4191 x.30 | www.npccny.org

About Us | Join NPCC | Member Benefits | Government Relations | Workshops

From: holden@gmail.com [mailto:holden@gmail.com] On Behalf Of Holden

Sent: Wednesday, June 20, 2007 12:21 PM

To: Craig Weinrich
Subject: Salary data

Dear Mr. Weinrich,

Thanks for speaking with me today. I would appreciate if you could send me the following data:

Median annualized compensation for Executive Director and Chief Operating Officer positions at nonprofits in the area of health and human services, with annualized budgets between \$400,000 and \$700,000 \$68,000 for ED; \$48,000 for Deputy Director

Median annualized compensation for Executive Director and Chief Operating Officer positions at nonprofits in the area of public societal benefit, with annualized budgets between \$400,000 and \$700,000

\$74,000 for ED; No data for Deputy Director

As we are not yet officially recognized as a 501(c)(3) organization, we can't yet join NPCCNY, but we plan on doing so when the opportunity arises. I look forward to seeing your membership application!

Good luck.

Thanks, Holden Karnofsky The Clear Fund

Department of the Treasury

Return of Organization Exempt From Income Tax

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

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

OMB No. 1545-0047

In	tem	al Reven	ue Service	► The organization may	have to use a copy of t	his return	to satisf	y state reporting re	equirements.	Inspection
A	Fã	the 2	200 <u>5 calen</u>	dar year, or tax year beginnin	g		, 20	05, and ending		
В	B Check if applicable. Please C Name of organization								D Employer ide	entification number
	\neg	Address change	use IRS	THE NEW YORK WOMEN'S	FOUNDATION, II	NC.			13-34572	:87
ſ		Name cha	label or	Number and street (or P.O. bo			ddress)	Room/suite	E Telephone n	umber
Γ		instial retu		-			•		·	
Ce Ce		Final retur	See Specific	34 WEST 22ND STREET					(212) 414	1-4342
		Amended return		City or town, state or country,	and ZIP + 4				F Accounting method:	Cash X Accrua
7		Application pending	n tions.	NEW YORK, NY 10010						pecify)
~-		,		ction 501(c)(3) organizations and	4947(a)(1) nonexempt	charitabl	e	H and I are not app		
			tru	sts must attach a completed Sch	edule A (Form 990 or 9	90-EZ).		H(a) is this a group	o return for affiliate	s? Yes X N
ಾ	W	ebsite:	► www.	NYWF.ORG			i i	H(b) If "Yes," enter		
_ J				eck only one) ► X 501(c) (3) ◀	(insert no.) 4947(a)() or	527	H(c) Are all affiliate	s included?	Yes N
\supset_{K}	CI	heck her	e 🕨	If the organization's gross receipts		n \$25,00	0. The	-	n a list. See instru	rtions.)
2	or	ganızati	on need not	file a return with the IRS; but if the	e organization chooses to	file a retu		H(d) Is this a separate organization coverage.	e return med by an vered by a group rulu	ng? Yes X N
Ē	su	re to file	e a complete r	return. Some states require a complete	return.		[I Group Exemp	tion Number	
₹-								M Check	if the organi	zation is not required
<u>】</u> 上			eipts. Add lin	es 6b, 8b, 9b, and 10b to line 12		676,0	72.	to attach Sch.	B (Form 990, 996)-EZ, or 990-PF).
	art	R	evenue, E	xpenses, and Changes in Net	Assets or Fund Balar	ces (See	the ins	tructions.)		
		1	Contribution	ns, gifts, grants, and similar amoun	ts received.					
		a	Direct publi	ic support		1a		3,149,202.		
		b	Indirect pul	blic support		1b				
		С	Governmen	nt contributions (grants)		1c				
		d	Total (add lines	s 1a through 1c) (cash \$2, 9	03,015. noncash \$		2	46,187.	1d	3,149,202
				ervice revenue including governme	2	<u> </u>				
		3	Membershi	3	<u> </u>					
				savings and temporary cash investi					4	6,165
		5	Dividends a	and interest from securities		,			5	211,088
			Gross rents			6a				
				expenses		6b				
		l		ncome or (loss) (subtract line 6b fro	om line 6a)				6c	
0,100,100				stment income (describe					7	
Ì	, i			unt from sales of assets other	(A) Secunties		(B) C	Other		
٥	٤			ory STMT [A	4,161,020.					
	i			or other basis and sales expenses.	3,631,842.	-				
			•	s) (attach schedule)	529,178.			 		
				(loss) (combine line 8c, columns (A					8d	529,178
				nts and activities (attach schedule)			eck here	• •		
				nue (not including \$1, 4)				145 050		
				ns reported on line 1a)		9a 9b		145,952.		
				t expenses other than fundraising ex or (loss) from special events (subt				116,920.	9c	20 022
	Ì			of inventory, less returns and allow	,	1 1	• • • •		53	29,032
				of goods sold						
				t or (loss) from sales of inventory (from line	. 100\	10c	
				nue (from Part VII, line 103)					11	2,645
				nue (add lines 1d, 2, 3, 4, 5, 6c, 7						3,927,310.
_	一	13	Programise	rices (from three 44, column (B))	, ou, so, roc, and rry	· · · · ·			13	1,977,595.
ď	3	14	Managemer	nt and general (from tipe 44, column	· · · · · · · · · · · · · · · · · · ·				14	448,346.
200									15	597,352
Fxnenses	-	16	Payments to	(from line 44) டிபோடும்)) o affiliates (attach schedule)					16	331,332,
	'			enses (add lines 16 and 44, colum						3,023,293.
	, 1			tericity of the year (subtract line 17						904,017.
d v				or fund balances at beginning of ye					19	8,805,678
Net Assets	:			ges in net assets or fund balances						-191,092
Z				or fund balances at end of year (co						9,518,603.
Fo	r Pr			erwork Reduction Act Notice, see						Form 990 (2005)

	art II	`Functional Expenses organ				and (D) are required for s sts but optional for other		
	Do no	ot include amounts reported on line 5b, 8b, 9b, 10b, or 16 of Part I.		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising	
	/Gran (cash \$ If this	ts and allocations (attach schedule) 1,450,000. noncash \$ amount includes foreign grants.	22	1,450,000.				
23	Spec	here	23	2, 150, 500	1, 100, 000.			
24		fits paid to or for members (attach	24					
25	Com	ule)		129,231.	43,077.	43,077.	43,077.	
26		r salaries and wages	26	400,886.			117,350.	
27		ion plan contributions	27	24,269.			4,232.	
28		r employee benefits	28	59,634.	24,813.		20,994.	
29		oll taxes	29	37,859.	16,585.	10,382.	10,892.	
30	Profe	ssional fundraising fees	30	55,000.			55,000.	
31		unting fees	31					
32	Legal	fees	32					
33	Supp	lies	33	14,091.	6,379.	3,507.	4,205.	
34		hone	34	8,758.	4,391.	2,181.	2,186.	
35	Posta	age and shipping	35	4,133.	1,590.	1,016.	1,527.	
36	Occu	pancy	36	83,956.	41,953.	16,983.	25,020.	
37	Equip	ment rental and maintenance	37					
38	Printi	ng and publications	38	30,587.	_		30,587.	
39	Trave	1	39	5,064.	2,761.	780.	1,523.	
40	Confe	rences, conventions, and meetings .	40	2,756.	1,457.	268.	1,031.	
41	Intere	ciation, depletion, etc. (attach schedule)	41					
42	Depre	ciation, depletion, etc. (attach schedule)	42	31,839.		31,839.		
	Other	expenses not covered above (itemize):						
а	STMI	<u> </u>	43a	685,230.	176,065.	229,437.	279,728.	
b			43b				· · · · · · · · · · · · · · · · · · ·	
C			43c					
d			43d					
е			43e					
f			43f					
g			43g					
44	throug	functional expenses. Add lines 22 h 43 (Organizations completing as (B)-(D), carry these totals to lines	44	3,023,293.	1,977,595.	448,346.	597,352.	
Joir	nt Cost	ts. Check ▶ if you are follow	ing S					
Аге	any joir	nt costs from a combined educational	camp	aign and fundraising soli	citation reported in (B) Pro	gram services?	Yes X No	
	f "Yes," enter (i) the aggregate amount of these joint costs \$; (ii) the amount allocated to Program services \$							
(iii) t	he amo	ount allocated to Management and gen	erai \$; and (iv) the amount al	located to Fundraising \$		
							Form 990 (2005)	

JSA 5E1020 2 000

FORM 990, PART V-A - CURRENT OFFICERS, DIRECTORS, AND TRUSTEES

CONTRIBUTIONS EXPENSE ACCT TO EMPLOYEE AND OTHER BENEFIT PLANS ALLOWANCES	NONE	NONE	1,154. NONE	1,154. " NONE
TO EMPLOYEE BENEFIT PLANS	4	2	1,1	1,1
COMPENSATION	NONE	NONE	129,231.	129,231.
TITLE AND TIME DEVOTED TO POSITION	BOARD MEMBER 2 HOURS	BOARD MEMBER 2 HOURS	EXECUTIVE DIRECTOR 40 HOURS	GRAND TOTALS
NAME AND ADDRESSCONTRESS C/O THE NEW YORK WOMEN'S FOUNDATION 34 WEST 22ND STREET NEW YORK, NY 10010	DIANA TAYLOR C/O THE NEW YORK WOMEN'S FOUNDATION 34 WEST 22ND STREET NEW YORK, NY 10010	BARBARA M. VOGELSTEIN C/O THE NEW YORK WOMEN'S FOUNDATION 34 WEST 22ND STREET NEW YORK, NY 10010	HOLLIS COHEN C/O THE NEW YORK WOMEN'S FOUNDATION 34 WEST 22ND STREET NEW YORK, NY 10010	

SCHEDULE A, PART I - COMPENSATION OF THE FIVE HIGHEST PAID EMPLOYEES

EXPENSE ACCOUNT NONE	NONE	NONE
CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	7,527.	13,772.
COMPENSATION 63,644.	87,258.	150,902.
TITLE AND TIME DEVOTED TO POSITION FINANCE & ADMIN MGR	PROGRAM DIRECTOR 40 HOURS	TOTAL COMPENSATION
NAME AND ADDRESS	ANGIE WANG C/O THE NEW YORK WOMEN'S FDTN 34 WEST 22ND STREET NEW YORK, NY 10010	

Return of Organization Exempt From Income Tax

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

OMB No 1545-0047 2005

Department of the Treasury

Open to Public

_		venue service		iganization may have to use a				TICHES -			
_			gar year,	or tax year beginning	, 2005, a	and endir		<u> </u>			
В	Check	if applicable		tification Number							
	\square^{A}	ddress change	Please use IRS label or print	Third Wave Foundat: formerly Third Wave		Ca		3-3670			
	Шν	ame change	ephone nur								
		nitial return	See specific instruc-	511 West 25th Streen New York, NY 10001	oc, oce. our				575-0700		
	F	inal return	tions	10111, 11 20002			F Acc	ounting	Cash X Accrual		
	A	mended return						Other (spe	ecify) ►		
	A	pplication pending	• Section	on 501(c)(3) organizations and	4947(a)(1) nonexempt	H and	d I are not applicable to :	ection 527	organizations		
			charit (Form	table trusts must attach a com 1 990 or 990-EZ).	pleted Schedule A	Н (а) Is this a group return	for affiliates	Yes X No		
^	\&/_L	alta: > t.m.m.r	•	avefoundation.org		Н (Б) If 'Yes,' enter number	of affiliates	•		
G	wen	Site: www.	CIIII UW	averoundacion.org		—— н (с	Are all affiliates inclu	ded?	Yes No		
J		nization type ck only one)	•	X 501(c) 3 ◀ (insert no			(If 'No,' attach a list	See instruct	tions)		
<u></u>	`		f the organ	nization's gross receipts are no	······································	527 H (d) Is this a separate retu	rn filed by	an		
r.				eed not file a return with the If		n L	organization covered	by a group	ruling? Yes X No		
	choc	ses to file a re	eturn, be s	sure to file a complete return	Some states require a	"" I	Group Exemption	cemption Number			
	com	plete return.				М	Check ► If t	ne organiza	tion is not required		
L	Gross	s receipts Add	lines 6b, 8	b, 9b, and 10b to line 12	1,370,309.		to attach Schedule B	(Form 990	, 990-EZ, or 990-PF)		
Pa	rt 🔝	् Revenue	e, Expen	ses, and Changes in Ne	t Assets or Fund Ba	alances	(See Instructions)			
	1	Contributions	s, gifts, gra	ants, and similar amounts rece	eived:			1			
	а	Direct public	support			1 a	1,170,144				
	b	Indirect publi	c support			1 b					
		Government				1 c	-	7 '.			
	C	Total (add lines 1a through 1c) (c.	_{ash} \$	1,170,144. noncash	\$)		1 d	1,170,144.		
	2	Program serv	2								
	 3 Membership dues and assessments 4 Interest on savings and temporary cash investments 5 Dividends and interest from securities 								652.		
									18,579.		
	6 a	Gross rents									
	b Less rental expenses c Net rental income or (loss) (subtract line 6b from line 6a) 7 Other investment income (describe							 			
								6c			
R								7			
REVENUE	R a	Gross amour	nt from sal	les of assets other	(A) Securities		(B) Other				
E		than inventor		100 01 00000 01101	165,334.	8a] 5			
Ę	b	Less cost or	other bas	sis and sales expenses	152,781.	8b					
	c	Gain or (loss) (a	ttach schedu	le) Statement 1	12,553.	8c	· -	T			
	d	Net gain or (l	loss) (com	nbine line 8c, columns (A) and	(B))			8 d	12,553.		
	9	Special even	ts and act	ivities (attach schedule) If any	y amount is from gamin g	g, check h	nere ►				
	а	Gross revenu	ie (not inc	luding \$	of contributions		_				
		reported on I	ine 1a)			9a	14,900				
	b	Less directe	expenses	other than fundraising expense	es	9 b					
	c	Net income o	or (loss) fr	om special events (subtract lir	ne 9b from line 9a)		Statement 2	9 c	14,900.		
	10 a	Gross sales	of invento	ry, less returns and allowances	3	10 a		SE			
	b	Less. cost of	goods so	ld		10 b					
	c	Gross profit or (I	loss) from sa	ales of inventory (attach schedule) (sub	otract line 10b from line 10a)			10 c			
	11	Other revenu	e (from P	art VII, line 103)				11	700.		
	12	Total revenue	e (add line	art VII, line 103) es 1d, 2, 3, 4, 5, 6c, 7, 8d, 9d, n line 44, column (B))	T0c, and 11)			12	1,217,528.		
F	13	Program serv	vices (fron	n line 44, column (B))	_ KECFIVED	1		13	523,175.		
Ž	14	Management	and gene	eral (from line 44, column (C)		721		14	76,252.		
EXPENSES	15	Fundraising ((from line	44, column (D))	3 NOV 0 7 2006	78		15	58,041.		
Ş	16	Payments to	affiliates	(attach schedule)	1.000	, ,		16			
Š	17	Total expens	es (add li	nes 16 and 44, column (A))	OCDEM	T _S		17	657,468.		
A	18			the year (subtract line 17 from	HIPO DODEN, UT			18	560,060.		
NS	19	Net assets or	fund bala	ances at beginning of year (fro	m line 73, column (A))			19	567,038.		
N S E E T T	20			ssets or fund balances (attach		See	Statement 3	20	-1,909.		
_s	21	_		ances at end of year (combine			-	21	1,125,189.		
BA	A Fo			work Reduction Act Notice, s		ions.	TEEA0109L 02	1 - 1	Form 990 (2005)		

Form 990 (2005

TEEA0109L 02/03/06

Part II Statement of Functional Expenses All organizations must complete column (A) Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others

D	o not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising				
22	Grants and allocations (att sch)									
	(cash \$ <u>273,133.</u>					į				
	non-cash \$)									
	If this amount includes foreign grants, check here	22	273,133.	273,133.						
23	Specific assistance to individuals (att sch)	23	2/3/133.	273,133.						
24		24								
25	Compensation of officers, directors, etc	25	51,827.	38,870.	7,774.	5,183.				
26	Other salaries and wages	26	92,696.	81,796.	4,270.	6,630.				
27	Pension plan contributions	27								
28	Other employee benefits	28								
29	Payroll taxes	29	37,074.	30,771.	3,337.	2,966.				
30	Professional fundraising fees	30								
31	Accounting fees	31								
32	Legal fees	32								
33	Supplies	33								
34	Telephone	34	13,512.	8,321.	902.	4,289.				
35	Postage and shipping	35	3,507.	56.	2,576.	875.				
36	Occupancy	36	30,399.	25,231.	2,736.	2,432.				
37	Equipment rental and maintenance	37_	3,717.	3,085.	335.	297.				
38	Printing and publications	38	6,543.	442.	1,890.	4,211.				
39	Travel	39								
40	Conferences, conventions, and meetings.	40								
41	Interest	41_								
42	Depreciation, depletion, etc (attach schedule)	42	5,151.	4,275.	464.	412.				
43	Other expenses not covered above (itemize)									
á	See Statement 4	43a	139,909.	57,195.	51,968.	30,746.				
ŀ)	43b								
(43 c								
•	J	43 d								
•		43e								
f		43f								
ç]	43 g								
44	Total functional expenses. Add lines 22 through									
	Total functional expenses. Add lines 22 through 43 (Organizations completing columns (B) - (D), carry these totals to lines 13 - 15)	44	657,468.	523,175.	76,252.	58,041.				
Join	t Costs. Check If you are following	SOP								
Are a	any joint costs from a combined education	al car	npaign and fundraising :	solicitation reported in (E	B) Program services?	Yes X No				
	es,' enter (i) the aggregate amount of thes	e joint	costs \$, (ii) the a	mount allocated to Prog					
\$_	, (iii) the amount al	locate	d to Management and g	eneral \$; and (iv) the	e amount allocated				
to Fu	undraising \$		- <i></i>							
ВАА	AA Form 990 (2005)									

2005

Federal Statements

Page 3

Client THIRDWAV

Third Wave Foundation, formerly Third Wave Direct Action Corp.

13-3670260

9/18/06

11 39AM

Statement 8 (continued)	
Form 990, Part V-A	
	Trustees, and Key Employees

Name and Address	Title and Average Hours <u>Per Week Devoted</u>	Compen- sation	Contri- bution to EBP & DC	Account/
Vivien Labaton SEE FACE OF RETURN	Member 0	\$ 0.	\$ 0.	\$ 0.
Natalia Lopez SEE FACE OF RETURN	Member 0	0.	0.	0.
Rickke Mananzala SEE FACE OF RETURN	Member 0	0.	0.	0.
Masum Khona Momaya SEE FACE OF RETURN	Member 0	0.	0.	0.
Catherine Gund SEE FACE OF RETURN ,	Founder 0	0.	0.	0.
Dawn Lundy Martin SEE FACE OF RETURN	Founder 0	0.	0.	0.
Carmen Patrick SEE FACE OF RETURN	Member 0	0.	0.	0.
Amy Richards SEE FACE OF RETURN	Founder 0	0.	0.	0.
Rebecca Walker SEE FACE OF RETURN	Founder 0	0.	0.	0.
Monique Mehta SEE FACE OF RETURN ,	Executive Direc 40	51,827.	0.	0.
Dayanara Marte SEE FACE OF RETURN	Member 0	0.	0.	0.
Lisa Siegler SEE FACE OF RETURN ,	Member 0	0.	0.	0.
	Total	\$ 51,827.	<u>\$</u> 0.	\$ 0.

Return of Organization Exempt from Income Tax

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

OMB No 1545-0047

Department	of	the	Treasu
Internal Rev	en	ue S	Service

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

Open to Public Inspection

	For the	he 2004 calen	dar year,	or tax year beginning	7/01	, 2004, ;	and en	ding	6/30			2005	
В	Check	ıf applıcable				- "				D Empl	oyer ide	ntification Number	
	Ac	Idress change	Please use IRS label	NORTH STAR FUN					l	13	-295	0801	
	In Na	ame change	or print or type	305 SEVENTH AV		H FLOOR			- [E Telep	hone nu	mber	
		itial return	See specific	NEW YORK, NY 1	0001-6008					21	2-62	0-9110	
	\vdash	nal return	instruc- tions.							F Acco	unting od.	Cash X A	ccrual
	H _{Ar}	mended return									Other (sp	ecify)	
		phication pending	Section	on 501(c)(3) organization	ns and 4947(a)	(1) nonexempt	н	and Lare	not applica	able to se	ction 527	organizations	
			charit	able trusts must attach	a completed \$	chedule A	Н	(a) is i	this a group	return fo	r affiliate	s ⁷ Yes	X No
_			(Form	990 or 990-EZ).			н	(b) If "	Yes,' enter	number o	f affiliate	s ►	_
G	Web	site: ► N/A		·			—— н	(C) Are	e all affiliat	es include	ed?	Yes	No
J		nization type	_	∇ a	🗆 .			(If	'No,' attach	a list Se	ee instruc	ctions)	_
		k only one)	(46	<u>,,,</u>		1,71,7	527 H	(d) is t	his a separ	ate returr	filed by	an	
K				nization's gross receipts eed not file a return with			- 1		janization c				X No
	recei	ved a Form 9	90 Packag	e in the mail, it should	file a return wit	hout financial d	ata T	Gr	oup Exe	mption	Numb	er 🕨	
	Som	e states requi	ire a comp	lete return.			M	l Ch	neck ►	ıf the	organiz	ation is not required	
L	Gross	receipts Add	lines 6b, 8	b, 9b, and 10b to line 12	► 2,274,	347.		to	attach Sch	edule B (Form 99	0, 990-EZ, or 990-PF)	
Pa	rt I_	Revenue	e, Expen	ses, and Changes	in Net Asset	s or Fund B	alanc	es (Se	e Instruc	ctions)			
	1	Contributions	s, gifts, gra	ants, and similar amour	ts received					,			
	a	Direct public	support				1 a		85 <u>6</u> ,	852.			
	b	Indirect publ	ic support				1 b						
		Government		ons (grants)			1 c						
	d	Total (add lines 1a through 1c) (c	ash \$	<u>8</u> 56,852. no	ncash \$		_)				1 d	856,8	52.
	2	Program ser	vice reven	ue including governmer	t fees and cont	racts (from Par	t VII, lii	ne 93)			2	13,0	194.
	3	Membership	dues and	assessments							3		
	4	Interest on s	avings and	d temporary cash invest	ments						4		
	5	Dividends an	id interest	from securities		,					5	98,1	.86.
	6 a	Gross rents.					6a						
	l .	Less rental					6b			_			
	С	Net rental in	come or (l	oss) (subtract line 6b fr	om line 6a)						6с		
R	7	Other investi	ment incor	ne (describe)	7		
REVENU	8a	Gross amour	nt from sal	es of assets other		Securities		(B) Other				
N		than inventor	•			,306,215.	8a						
Ē				is and sales expenses		.,313,952.	8b						
	l .	Gain or (loss) (a		•			8c						
	d			bine line 8c columns (_	8d		<u>37.</u>
	9	Special ever	is and act	итер (attach schedule)			g , chec	k here	~ [
-	а	Gross revent		luding 0	of	contributions	اما						
3		reported on	ine (a)	2006 O other than thindraising e			9a						
							9b						
	100	1 1		om special (Ev ents (sub		m line 9a) 	اءما				9 c		
Щ	IVa			y, less returns and allo	wances		10 a						
5	ט ט		goods se	les of inventory (attach sched	ulo) (eubtraat line 1	Oh from line 10e)	10 b			-	10-		
SCANNED	1,1			art VII, line 103)	ne) (subtract line i	on moin mile roax					10 c		
Q	11			es 1d, 2 <u>, 3, 4,</u> 5, 6c, 7, 8	2d 9c 10c and	. 11\					11 12	960,3	0.5
(A)	13			n line 44, column (B))	5d, 3c, 10c, and						13	832,7	
E X P	14	•	-	ral (from line 44, colum	n (C))						14	108,8	
P	15	-	-	44, column (D))	(3))						15	130,8	
E N S	16	_		(attach schedule)							16	150,0	<u> </u>
S E S	17	-		nes 16 and 44, column	(A))						17	1,072,3	80
_	18			he year (subtract line 1							18	-111,9	
N S	19			inces at beginning of ye		3. column (A))					19	2,682,0	
N S E E T	20			ssets or fund balances			SF	E 5T	ATEME	NT 2	20	-17,4	
' T S	21	_		inces at end of year (co			٠.ـ	41			21	2,552,5	
BA				work Reduction Act No			ions.		TEEA01	07L 01/0		Form 990 (

Statement of Functional Expenses All organizations must complete column (A) Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others

D	Oo not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising			
22	Grants and allocations (att sch)								
	(cash \$ 471,000.	1 1				,			
	non-cash \$)	22	471,000.	471,000.					
23	Specific assistance to individuals (att sch)	23							
24 25	Benefits paid to or for members (att sch) Compensation of officers, directors, etc.	24 25	118,732.	71,239.	23,746.	23,747.			
26	Other salaries and wages.	26	94,446.	56,668.	18,889.	18,889.			
27	•	27	2,000.	1,200.	400.	400.			
28	Other employee benefits	28	28,075.	16,845.	5,615.	5,615.			
29	Payroll taxes	29	20,014.	12,008.	4,003.	4,003.			
30	Professional fundraising fees	30_							
31	Accounting fees	31							
32	Legal fees	32							
33	Supplies	33	·						
34	Telephone	34_	4,738.	2,842.	948.	948.			
35	Postage and shipping	35	6,969.	3,485.	1,254.	2,230.			
36	Occupancy	36	64,701.	38,821.	12,940.	12,940.			
37	Equipment rental and maintenance	37	21 012	10 607	4 202	4 202			
38	Printing and publications	38	21,013.	12,607.	4,203.	4,203.			
39	Travel	39 40	75,758.	49,565.		26,193.			
40	Conferences, conventions, and meetings	41		49,303.		20,133.			
41 42	Interest Depreciation, depletion, etc (attach schedule)	42	6,799.	4,079.	1,360.	1,360.			
	Other expenses not covered above (itemize)	-42	0,133.	4,075.	1,300.	1,300.			
	a SEE STATEMENT 3	43 a	158,135.	92,368.	35,472.	30,295.			
i	o	43 b	130,133.		33,472.	30,233.			
	~ 	43 c							
	d	43 d			- , ,	·			
•		43e							
44	Total functional expenses (add lines 22 43) Organizations completing columns (B) - (D), carry these totals to lines 13 - 15	44	1,072,380.	832,727.	108,830.	130,823.			
Join	t Costs. Check If you are following								
	any joint costs from a combined education			solicitation reported in (i	3) Program services?	► Yes X No			
lf 'Ye	es,' enter (i) the aggregate amount of thes		costs \$, (ii) the a	mount allocated to Prog	gram services			
\$_	, (iii) the amount al	located	l to Management and ge	eneral \$, and (iv) th	e amount allocated			
	undraising \$								
Par				mo golarmy oper	<u></u>	<u> </u>			
	t is the organization's primary exempt pur organizations must describe their exempt p ots served, publications issued, etc. Discus ons and 4947(a)(1) nonexempt charitable		e achievements in a clear every ever	E TO COMMTY GROU ar and concise manner neasurable (Section 50 bunt of grants & allocation	State the number of 1(c)(3) & (4) organ-	Program Service Expenses (Required for 501(c)(3) and (4) organizations and 4947(a)(1) trusts, but optional for others)			
	SEE STATEMENT 4								
			(Grants and	l allocations \$	471,000.)	832,727.			
I	b								
				allocations \$					
•	°								
			Joranis and	l allocations \$					
•	d								
	(Grants and allocations \$								
•	Other program services			l allocations \$					
1	Total of Program Service Expenses (she	ould ec	ual line 44, column (B)	, Program services)	>	832,727.			

Form	990 (2004) NORTH STAR FUND	INC.			13-29	9508	01 Page 4		
Par	Financial Statements wit per Return (See Instruction	h Revenue	Par	t IV-B Reconcilia Financial per Return	Statements with	ion of Expenses per Audited tatements with Expenses			
а	Total revenue, gains, and other support per audited financial statements.	a 960,395.	a	Total expenses and financial statements		а	1,089,854.		
b	Amounts included on line a but not on line 12, Form 990		b	Amounts included or on line 17, Form 990					
(1)	Net unrealized gains on investments \$		(1)	Donated services and use of facilities \$					
(2)	Donated services and use of facilities \$		(2)	Prior year adjust- ments reported on line 20, Form 990 \$					
` `	Recoveries of prior year grants \$		ļ	Losses reported on line 20, Form 990 \$					
(4)	Other (specify)		(4)	Other (specify) SEE STMT 8 \$	17,474.				
	Add amounts on lines (1) through (4)	b		Add amounts on lines (1)		b	17,474.		
С	Line a minus line b ▶	c 960,395.	c	Line a minus line b	•	С	1,072,380.		
d	Amounts included on line 12, Form 990 but not on line a:		d	Amounts included or Form 990 but not on	n line 17, i line a:				
(1)	Investment expenses not included on line 6b, Form 990 \$		(1)	Investment expenses not included on line					
(2)	Other (specify)		(2)	6b, Form 990 \$ Other (specify)					
				\$					
	Add amounts on lines (1) and (2)	d		Add amounts on line	es (1) and (2)	d			
e	Total revenue per line 12, Form 990 (line c plus line d)	e 960,395.	е	Total expenses per 990 (line c plus line	d) •	е	1,072,380.		
Parl	List of Officers, Directors,								
	(A) Name and address	(B) Title and average ho per week devoted to position	urs	(C) Compensation (if not paid, enter -0-)	(D) Contributions employee benefi plans and deferre compensation	ıt 📗	(E) Expense account and other allowances		
262	H HOGAN WEST 77TH STREET, #5 YYORK, NY 10024	EXECUTIVE DIR.		67,015.		0.	0.		
MIR 804	IAM_HERNANDEZ SOUTH STREET #1 KSKILL, NY 10566	ADMIN. MGR. 40		51,717.	2,00	0.	0.		
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					_				
		<u> </u>	+	· · · · · · · · · · · · · · · · · · ·	<u> </u>				
		1							
75	Did any officer, director, trustee, or ke than \$100,000 from your organization \$10,000 was provided by the related of If 'Yes,' attach schedule — see instruc	and all related organizations?	egate	compensation of more of which more than		- □ '	Yes X No		