

** PUBLIC DISCLOSURE COPY **

Return of Organization Exempt From Income Tax

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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

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

<u>A</u>	For the	e 2021 calendar year, or tax year beginning and	ending		
В	Check if applicable	C Name of organization		D Employer identifi	cation number
	Addre	ss NORTH FUND			
F	Name			83-40115	47
	Initial return		Room/suite	E Telephone numbe	er
	Final	1101 CONNECUTCIO AVENUE	450	(202) 97	
	termir ated			G Gross receipts \$	42,926,545.
	Amen return	WASHINGTON, DC 20030		H(a) Is this a group r	eturn
	Applic	F Name and address of principal officer: UIM GERSIEIN		for subordinates	? Yes X No
	pendi	¹⁹ SAME AS C ABOVE		H(b) Are all subordinates in	ncluded? Yes No
		empt status: 501(c)(3)X 501(c)(4) ◀ (insert no.) 4947(a)(1) c	or 527	If "No," attach a	list. See instructions
		te: > WWW.NORTHFUND.ORG		H(c) Group exemption	
		forganization: X Corporation Trust Association Other	L Year	of formation: 2018 I	M State of legal domicile; DC
P	art I	Summary	~~		
φ	1	Briefly describe the organization's mission or most significant activities: \underline{SEE}	SCHEDU.	LE O	
anc					
Governance	2	Check this box if the organization discontinued its operations or dispos		1	1
90	3			3	3 3
		Number of independent voting members of the governing body (Part VI, line 1b) . Total number of individuals employed in calendar year 2021 (Part V, line 2a)			0
Activities &	5	Total number of volunteers (estimate if necessary)			8
	72	Total unrelated business revenue from Part VIII, column (C), line 12		7a	
Ą	h h	Net unrelated business taxable income from Form 990-T, Part I, line 11			0.
	<u> </u>	The difference business taxable mount from Form 600 1, Fact, mile FF		Prior Year	Current Year
_	8	Contributions and grants (Part VIII, line 1h)		66,341,124.	42,712,036.
nue	9	Program service revenue (Part VIII, line 2g)		0.	0.
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		14,065.	0.
ĕ	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		253,785.	214,509.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		66,608,974.	42,926,545.
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		34,186,410.	10,896,593.
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
S	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		1,058,561.	1,874,619.
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.
X	b	Total fundraising expenses (Part IX, column (D), line 25) 144,92			
Ш	''	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		13,535,539.	
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		48,780,510.	33,387,269.
		Revenue less expenses. Subtract line 18 from line 12		17,828,464.	
Net Assets or		T. I. (D. IV.); (40)		ginning of Current Year 26,507,967.	End of Year 43,517,343.
SSe	20	Total assets (Part X, line 16)		1,190,615.	8,660,715.
let /	21 22	Total liabilities (Part X, line 26) Net assets or fund balances. Subtract line 21 from line 20		25,317,352.	34,856,628.
	art II	Signature Block		25,511,5526	34,030,020
		alties of perjury, I declare that I have examined this return, including accompanying schedules	and stateme	ents, and to the best of my	v knowledge and belief, it is
		ct, and complete. Declaration of preparer (other than officer) is based on all information of wh			, momoago ana bonon, it io
	,				
Sig	ın	Signature of officer		Date	
Hei		JIM GERSTEIN, PRESIDENT			
		Type or print name and title			
		Print/Type preparer's name Preparer's signature		Date Check Check	PTIN
Pai	d	MICHAEL LUMSDEN MICHAEL LUMSDEN	1	1/06/22 self-emplo	p01262236
Pre	parer	Firm's name ► MOSS ADAMS LLP		Firm's EIN	91-0189318
Use	Only	Firm's address 101 SECOND STREET SUITE 900			
		SAN FRANCISCO, CA 94105		Phone no. 41	5-956-1500
Ma	y the II	RS discuss this return with the preparer shown above? See instructions			X Yes No

Pa	rt III Statement of Program Se	rvice Accomplishments		
	Check if Schedule O contains a re	esponse or note to any line in this Part III		X
1	Briefly describe the organization's missi	ion:		
	SEE SCHEDULE O			
2	Did the organization undertake any sign	nificant program services during the year which	h were not listed on the	
_	, ,			Yes X No
	If "Yes," describe these new services or			1C31NO
3	,		ato, any program conjugac?	X Yes No
3		or make significant changes in how it conduct	its, any program services?	ZZ TeS INU
	If "Yes," describe these changes on Sci			
4		rvice accomplishments for each of its three lar		
		ations are required to report the amount of gra	nts and allocations to others, the total e	expenses, and
	revenue, if any, for each program service		006 503	
4a		, 157 , 665. including grants of \$10		0.)
		ACTION, AND ADVOCACY:		
		ADVOCACY PROGRAMS SUPPOR		
		AND EXPANDING ACCESS T		
		IRONMENT FOR FUTURE GEN	IERATIONS, AND ADVOC	ATING FOR
	LGBTQIA+ AND HUMAN R	IGHTS.		
	(0.1	including grants of \$) (0	١
4b	(Code:) (Expenses \$	including grants of \$) (Revenue \$)
4c	(Code:) (Expenses \$	including grants of \$) (Revenue \$)
	,, , , ,			·
4d	Other program services (Describe on So	chedule O.)		
	(Expenses \$	including grants of \$) (Revenue \$)
4e	Total program service expenses	32,157,665.		
				Form 990 (2021)

11451106 146892 806745

83-4011547 Page **3**

Form 990 (2021) NORTH FUND Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1_		_X_
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3	Х	
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
_	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	<u> </u>		
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes," <i>complete</i>	<u> </u>		
Ü	Schedule D, Part III	8		x
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for	-		
9				
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?	_		x
40	If "Yes," complete Schedule D, Part IV	9		
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			₹.
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X,			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a		<u> </u>
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		<u> X</u>
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
10	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	'0		
"	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		x
10	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	-''-		
18		40		x
40	1c and 8a? If "Yes," complete Schedule G, Part II	18		
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	ا مد ا		- v
	complete Schedule G, Part III	19		X
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or		77	
	domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I, Parts I and II	21	X	

132003 12-09-21

Form 990 (2021) NORTH FUND

Part IV Checklist of Required Schedules (continued)

22 Living the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part X, column (A), line 27 if Y "reg." complete Schedule I. Part I and III. 23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organizations current and former officers, directors, rustees, key employees, and highest compensation of the organization schedule of the part I was a teasewant 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? If "Yes," answer lines 240 through 24d and complete Schedule I, "If "No." go to live 35s. 44b Did the organization inverted any proceeds of tax-exempt bonds beyond a temporary period exception? 50 Did the organization market and a secone account other than a refunding secrow at any time during the year to defease any tax-exempt bonds? 45c Did the organization market are in engaged an excess bredit transaction with a disqualished person during the year? 51 Did the organization aware that in engaged an excess bredit transaction with a disqualished person during the year? 52 Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess bredit transaction with a disqualished person during the year? 52 Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations by the organization engage in an excess bredit transaction with a disqualished person during the year? 52 Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations by the organization engage in an excess bredit transaction with a disqualished person in a prior year, and that the transaction and was that in engaged an excess bredit transaction with a disqualished person in a prior year, complete Schedule L, Part II . 52 Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations prior Fermi 900 or 90-90-22? If "Yes," complete Schedule L, Part II . 52 Did the organization provide a grant or other assistance to any current or		·		Yes	No
23 Did the organization answer: "Yes" to Part WI, Section A, line 3. 4, or 5, about compensation of the organization's current and former officers, directors, trustess, key employees, and highest compensated employees? If "Yes," complete Schedule J. 24 Did the organization have a tax exempt bond issue with an outstanding principal amount of more than \$100,000 as of the list day of the year, that was issued after Discretible 3. 2002? If "Yes," crasseer lines 24th through 24d and complete Schedule K. If "No," to to line 25a 25b Did the organization marks and you proceeds of tax-exempt bonds beyond a temporary period exception? 26c Did the organization marks and an excretion are refunding secretic at any tax-exempt bonds? 26d Did the organization and an an orbital foil issues for bonds outstanding at any time during the year? 26d Did the organization and an orbital foil issues for bonds outstanding at any time during the year? 26d Did the organization and an orbital foil issues for bonds outstanding at any time during the year? 26d Did the organization and an orbital foil issues for bonds outstanding at any time during the year? 26d Did the organization and an orbital foil issues for bonds outstanding at any time during the year? 26d Did the organization and an orbital foil issues for bonds outstanding at any time during the year? 26d Did the organization and an orbital for language in an excess benefit transaction what a disqualled person uning the year? If "Yes," complete Schedule L, Part I I I I I I I I I I I I I I I I I I I	22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
23 Did the organization answer Yes* to Part VII, Section A, line 3, 4, or 5, about compensated employees? If Yes,* complete Schedule I, Part IV		Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Х
Schedule / Late to 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? // "Yes," answer lines 24b through 24d and complete Schedule K. If "No." go to fine 25a. b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? d Did the organization area at an "on behalf of" issuer for bonds outstanding at any time during the year? 24d	23				
Schedule / Late to 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? // "Yes," answer lines 24b through 24d and complete Schedule K. If "No." go to fine 25a. b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? d Did the organization area at an "on behalf of" issuer for bonds outstanding at any time during the year? 24d		and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
24a Did the organization have a tax exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was slowed after December 31,2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No." got to line 25a Complete Schedule K. If "No." got to line 25a Complete Schedule K. If "No." got to line 25a Complete Schedule K. If "No." got to line 25a Complete Schedule K. If "No." got to line 25a Complete Schedule K. If "No." got to line 25a Complete Schedule L. Part I V. School (14) and 161 (16) (26) organizations. Did the organization enable the standard organization aware that it engaged in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L. Part I V. School (16) (27) (27) (27) (27) (27) (27) (27) (27		, ,	23		X
Schedule K. If "No." go to line 25a. \$\frac{24a}{24b}\$ \frac{X}{24b}\$ \$\frac{1}{2}\$ bil the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax exempt bonds? \$\frac{2}{2}\$ bill the organization acids as an "on behalf of" issuer for bonds outstanding at any time during the year to defease any tax exempt bonds? \$\frac{2}{2}\$ bill the organization acids as an "on behalf of" issuer for bonds outstanding at any time during the year? \$\frac{2}{2}\$ bill the organization acids as an "on behalf of" issuer for bonds outstanding at any time during the year? \$\frac{2}{2}\$ bill the organization acids as an "on behalf of" issuer for bonds outstanding at any time during the year? \$\frac{2}{2}\$ bill the organization acids as an "on behalf of" issuer for bonds outstanding at any time during the year? \$\frac{2}{2}\$ bill the organization acids as an "on behalf of" issuer for bonds outstanding at any time during the year? \$\frac{2}{2}\$ bill the organization acids as an "on behalf of" issuer for bonds outstanding at any time during the year? \$\frac{2}{2}\$ bill the organization acids an excess benefit transaction with a disqualified person in a prior year, and that the transaction with a disqualified person in a prior year, and that the transaction was an excess benefit transaction with a disqualified person in a prior year, and that the transaction with a disqualified person in a prior year, and that the transaction with a disqualified person in a prior year, and that the transaction with a disqualified person in a prior year, and that the transaction with a disqualified person in a prior year, and that the transaction with a disqualified person in a prior year, and that the transaction acids and that the transaction organization and year, and that the transaction acids and that the transaction organization acids and the organization organization aparty to a business transaction with one of the following parties (see the Schedule I, Part II) \$\frac{2}{2}\$ b	24a				
Schedule K. If "No." go to line 25a. \$\frac{24a}{24b}\$ \frac{X}{24b}\$ \$\frac{1}{2}\$ bil the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax exempt bonds? \$\frac{2}{2}\$ bill the organization acids as an "on behalf of" issuer for bonds outstanding at any time during the year to defease any tax exempt bonds? \$\frac{2}{2}\$ bill the organization acids as an "on behalf of" issuer for bonds outstanding at any time during the year? \$\frac{2}{2}\$ bill the organization acids as an "on behalf of" issuer for bonds outstanding at any time during the year? \$\frac{2}{2}\$ bill the organization acids as an "on behalf of" issuer for bonds outstanding at any time during the year? \$\frac{2}{2}\$ bill the organization acids as an "on behalf of" issuer for bonds outstanding at any time during the year? \$\frac{2}{2}\$ bill the organization acids as an "on behalf of" issuer for bonds outstanding at any time during the year? \$\frac{2}{2}\$ bill the organization acids as an "on behalf of" issuer for bonds outstanding at any time during the year? \$\frac{2}{2}\$ bill the organization acids an excess benefit transaction with a disqualified person in a prior year, and that the transaction with a disqualified person in a prior year, and that the transaction was an excess benefit transaction with a disqualified person in a prior year, and that the transaction with a disqualified person in a prior year, and that the transaction with a disqualified person in a prior year, and that the transaction with a disqualified person in a prior year, and that the transaction with a disqualified person in a prior year, and that the transaction with a disqualified person in a prior year, and that the transaction acids and that the transaction organization and year, and that the transaction acids and that the transaction organization acids and the organization organization aparty to a business transaction with one of the following parties (see the Schedule I, Part II) \$\frac{2}{2}\$ b		last day of the year, that was issued after December 31, 2002? If "Yes." answer lines 24b through 24d and complete			
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 28b Comparization marked and some process of the proc			24a		X
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax exempt bonds? d Did the organization and as an 'on behalf of' issuer for bonds outstanding at any time during the year? 22a Section 501(c/3), 501(c/4), and 501(c/20) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? if 'Yes, 'complete Schedule I, Part I is the organization aware that it engaged in an excess benefit transaction with a disqualified person during the year? if 'Yes, 'complete Schedule I, Part I is the organization sware 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 organizations prior Forms 990 or 990 E2? if 'Yes, 'complete Schedule I, Part I is the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 39% controlled entity (including an employee thereof or family member of any of these persons? if 'Yes,' complete Schedule I, Part II is 1. 25b	b		24b		
d Did the organization act as an *on behalf of *issuer for bonds outstanding at any time during the year? 256 Section 50f(28), 50f(46), 4an 50f(40)29 organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? *if **yes, *complete Schedule L, Part I** 25 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 spinor forms 900 or 906-27 if *Yes,* *complete Schedule L, Part I** 25 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity frontially member of any of these persons? *If *Yes,* *complete Schedule L, Part II** 26 Was the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a \$3% controlled entity (including an employee thereof) of agrini ymember of any of these persons? *If *Yes,* complete Schedule L, Part II** 27 X 28 Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV** 28 Yes,* complete Schedule L, Part IV** 29 Did the organization receive more than \$25,000 in non-eash contributions? If *Yes,* complete Schedule L, Part IV** 29 Did the organization receive more than \$25,000 in non-eash contributions? If *Yes,* complete Schedule L, Part IV** 29 Did the organization sell, exchange, dispose of, or transfer more than \$25% of its net assets? If *Yes,* complete Schedule I** 30 Did the organization have a controlled entity within the meaning of section \$12(b)(13)? If *Yes,* complete Schedule R, Part II, III, or IV, and Part V, Iine 1 30 Did the organization have a controlled entity within the meaning of section \$12(b)(13)? If *Yes,* com					
d Did the organization act as an *on behalf of *issuer for bonds outstanding at any time during the year? 256 Section 50f(28), 50f(46), 4an 50f(40)29 organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? *if **yes, *complete Schedule L, Part I** 25 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 spinor forms 900 or 906-27 if *Yes,* *complete Schedule L, Part I** 25 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity frontially member of any of these persons? *If *Yes,* *complete Schedule L, Part II** 26 Was the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a \$3% controlled entity (including an employee thereof) of agrini ymember of any of these persons? *If *Yes,* complete Schedule L, Part II** 27 X 28 Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV** 28 Yes,* complete Schedule L, Part IV** 29 Did the organization receive more than \$25,000 in non-eash contributions? If *Yes,* complete Schedule L, Part IV** 29 Did the organization receive more than \$25,000 in non-eash contributions? If *Yes,* complete Schedule L, Part IV** 29 Did the organization sell, exchange, dispose of, or transfer more than \$25% of its net assets? If *Yes,* complete Schedule I** 30 Did the organization have a controlled entity within the meaning of section \$12(b)(13)? If *Yes,* complete Schedule R, Part II, III, or IV, and Part V, Iine 1 30 Did the organization have a controlled entity within the meaning of section \$12(b)(13)? If *Yes,* com		any tax-exempt bonds?	24c		
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 organizations propriated present in a prior year, and that the transaction has not been reported on any of the organization propriated propriated in the transaction has not been reported on any of the organization propriated propriated propriated in the transaction has not been reported on any of these persons 990 eroses 990 erose 990 ero 990 ero 27 (if Yes, 'complete Schedule L, Part II' 25b	d		24d		
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 cF2? if "Yes," complete Schedule L, Part I yes," complete Schedule L, Part I, use Legy employee, creator or former officer, director, trustee, key employee, creator or former officer, director, trustee, key employee, creator or founder, substantial contribution, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II yes," complete Schedule L, Part III yes," complete Schedule R, Part II yes," complete Schedule R, Part II yes," complete Sche	25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
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? #"Yes," complete Schedule 1, Part I 25b X 25b			25a		Х
that the transaction has not been reported on any of the organization's prior Forms 990 or 990-E27 If "Yes," complete Schedule L, Part I 25b X 26 Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity of family member of any of these persons? If "Yes," complete Schedule L, Part II 25 X 27 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity forduliding an employee thereof or family member of any of these persons? If "Yes," complete Schedule L, Part III 27 X 28 Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part III 27 X 28 Was the organization aparty to a business transaction with one of the following parties (see the Schedule L, Part III 27 X 28 Was the organization aparty to a business transaction with one of the following parties (see the Schedule L, Part III 27 X 28 Was the organization aparty to a business transaction with one of the following parties (see the Schedule L, Part IV 28b X X 29 Did the organization definity of one or more individuals and/or organizations described in line 28a or 28b? If "Yes," complete Schedule L, Part IV 28b X 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 X 20 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule N, Part I 30 X 30 Did the organization iliquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I 30 X 31 Did the organization on 100% of an entity disregarded as separate from the organization under Regula	b	, , ,			
Schedule L, Part I Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II					
26 Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II 27 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III. 28 Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV. 28 A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV. 28 D A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV. 28 D A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV. 28 D Id the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M. 29 D Id the organization receive wore than \$25,000 in non-cash contributions? If "Yes," complete Schedule N, Part I 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule N, Part II. 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part I 31 Did the organization or loude, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part II, III, or IV, and Part V, line 1 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II, III, or IV, an			25b		X
controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II 27 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III. 28 Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV, instructions for applicable filling thresholds, conditions, and exceptions): a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV. 28 A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV. 28 A 53% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If "Yes," complete Schedule L, Part IV. 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule II. Part IV. 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule II. Part IV. 30 Did the organization individual elevations of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule II. Part IV. 30 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II. 31 Did the organization on 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701.2 and 301.7701.3? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1 32 Did the organization have a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 33 Did the organization on the activation make any transf	26	,			
controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II 27 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III. 28 Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV, instructions for applicable filling thresholds, conditions, and exceptions): a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV. 28 A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV. 28 A 53% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If "Yes," complete Schedule L, Part IV. 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule II. Part IV. 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule II. Part IV. 30 Did the organization individual elevations of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule II. Part IV. 30 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II. 31 Did the organization on 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701.2 and 301.7701.3? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1 32 Did the organization have a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 33 Did the organization on the activation make any transf					
Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof) or family member of any of these persons? if "Yes," complete Schedule L, Part II, and the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions): a A current of former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV. b A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV. 28a X c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If "Yes," complete Schedule L, Part IV. 28b IX 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M. 29 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I. 30 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I. 31 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-37 If "Yes," complete Schedule R, Part II. 31 A X 32 Did the organization over 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-37 If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1 33 Did the organization over 100% of an entity disregarded as separate from the organization under Regulations within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1 34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 2 35 Did the organization organization receive any payment from or			26		X
creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III. 27 28 Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV. a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV. b A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV. 28b X c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If "Yes," complete Schedule L, Part IV. 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M. 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule N, Part I. 31 Did the organization individuals, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part I. 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part I. 32 X 33 Did the organization on 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, Iline 1 34 Was the organization have a controlled entity within the meaning of section 512(b)(13)? b If "Yes," complete Schedule R, Part V, Iline 2 35 Section 501(c)(3) organizations apartments for federal income tax purposes? If "Yes," complete Schedule R, Part IV, Iline 1 36 Section 501(c)(3) organizations apartments for federal income tax purposes? If "Yes," complete Schedule R, Part IV, Iline 1 37 Statements Regarding Other IRS Flitings and Tax Compliance	27	, , ,			
entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III					
Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions): a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV. 28a X b A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV. 28b X c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If "Yes," complete Schedule L, Part IV. 28c X 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M. 29 Lid the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M. 30 Lid the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I. 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II. 32 Lid the organization one one of the organization receive any payment from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I, III, or IV, and Part V, Iine 1 34 Was the organization have a controlled entity within the meaning of section 512(b)(13)? 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35b Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, Iine 2 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? 36 In the organization conduct more than 5% of its activities t		the state of the s	27		Х
instructions for applicable filing thresholds, conditions, and exceptions): a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? ## 1/48, **Complete Schedule L, Part IV	28				
a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? "Yes," complete Schedule L, Part IV 28a X 28b X c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? "Yes," complete Schedule L, Part IV 28c X 29 Did the organization receive more than \$25,000 in non-cash contributions? "Yes," complete Schedule L, Part IV 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? 10 If "Yes," complete Schedule L, Part IV 29 Did the organization injudicate, terminate, or dissolve and cease operations? 29 Did the organization injudicate, terminate, or dissolve and cease operations? 20 Did the organization injudicate, terminate, or dissolve and cease operations? 21 Did the organization on sell, exchange, dispose of, or transfer more than 25% of its net assets? 22 Schedule N, Part I 23 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? 23 If "Yes," complete Schedule R, Part I 34					
*Yes," complete Schedule L, Part IV b A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If "Yes," complete Schedule L, Part IV 28c X 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 X 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M 30 X 31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I 31 X 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II 31 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part II 33 X 34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1 35 Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a X 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2 37 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11 band 19? Note: All Form 990 filers are required to complete Schedule O Check if Schedule O contains a response or note to any line in this Part V 10 Did the organization organization organization are sponse or note to any line in this Part V 11 Did the organization organized organized on line 1a. Enter 0- if not app	а				
b A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If "Yes," complete Schedule L, Part IV 28c X 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M 30			28a		X
c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If "Yes," complete Schedule L, Part IV 28c X 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 X 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M 30 X 31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II 32 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I 33 Did the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1 34 Was the organization have a controlled entity within the meaning of section 512(b)(13)? 35 Did the organization have a controlled entity within the meaning of section 512(b)(13)? 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization? If "Yes, "complete Schedule R, Part V lines 11b and 19? Yes, "complete Schedule R, Part V lines 11b and 19? Yes, "complete Schedule R, Part V lines 11b and 19? Yes, "complete Schedule R, Part V lines	b		28b		Х
"Yes," complete Schedule L, Part IV Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 X 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M 30 X 31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I 31 X 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part I 32 X 32 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I 33 X 34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part III, III, or IV, and Part V, Iine 1 34 X 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a X 35b 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)? If "Yes," complete Schedule R, Part V, Iine 2 35b					
Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M. Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M. Part I. 30 X. 31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I. 31 X. 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II. 32 X. 32 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I. 33 X. 34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, Iine 1 34 X. 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a X. 35a X. 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, Iine 2 35b Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, Iine 2 36b Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, Iine 2 36b Section 501(c)(3) 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? If "Yes," complete Schedule R, Part V, Iine S 10 Identification of the organization complete Schedule O and provide explanations on Schedule O for Part VI, Iines 11b and 19? Note: All Form 990 filers are required to complete Schedule O for Part VI, Iines 11b and 19? Note: All Form 990 filers are response or note to any line in this Part V			28c		Х
Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M 30	29		29		Х
contributions? If "Yes," complete Schedule M Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1 Section 501(c)(3) organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2 To 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? If "Yes," complete Schedule R, Part VI To the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O The Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable C Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	30				
Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I			30		X
Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II 32	31		31		X
Schedule N, Part II 32 X 33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part II 34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part III, III, or IV, and Part V, Iine 1 35 Did the organization have a controlled entity within the meaning of section 512(b)(13)? 36 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)? If "Yes," complete Schedule R, Part V, Iine 2 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, Iine 2 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part V IInes 11b and 19? Note: All Form 990 filers are required to complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O 28 X 29 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 20 In Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 20 In	32				
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I 33 X 34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1 34 X 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a J X 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)? If "Yes," complete Schedule R, Part V, line 2 35b		, ,	32		X
Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1 34 X 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a 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)? If "Yes," complete Schedule R, Part V, line 2 35b Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2 36 Jid 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? If "Yes," complete Schedule R, Part V in the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? 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 \$\frac{\text{Yes}}{\text{In}} \frac{\text{11}}{\text{10}} \text	33				
Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, Iine 1 34 X 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a X 35a X 35b Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2 36 J 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 38 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O 28 X Part V Statements Regarding Other IRS Fillings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V 5 Statements Regarding Other IRS Fillings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V 5 Statements Regarding Other IRS Fillings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V 5 Statements Regarding Other IRS Fillings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V 5 Statements Regarding Other IRS Fillings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V 5 Statements Regarding Other IRS Fillings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V 5 Statements Regarding Other IRS Fillings and Tax Complete Schedule O the Institute of the Institute of			33		X
Part V, line 1 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 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)? If "Yes," complete Schedule R, Part V, line 2 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part V and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part V and that is treated organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O Note: All Form 990 filers are required to complete Schedule O Check if Schedule O contains a response or note to any line in this 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 1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 1c X	34				
Did the organization have a controlled entity within the meaning of section 512(b)(13)? 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)? If "Yes," complete Schedule R, Part V, line 2 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part V 37 X 38 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O 38 X 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 X 1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 110 1b 0 b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b 0 c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?			34		X
within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 35b Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2 36 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 38 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V 1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	35a		35a		X
within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 35b Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2 36 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 38 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V 1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?					
Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2 36 36 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 38 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O Check if Schedule O contains a response or note to any line in this Part V 10 11 Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable C Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 12 36 36 27 38 X X X Yes No 12 13 10 15 16 X 16 X		within the meaning of section 512(b)(13)? If "Yes." complete Schedule R, Part V, line 2	35b		
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? If "Yes," complete Schedule R, Part VI 37 X 38 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? 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 10 In Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 10 In	36	· · · · · · · · · · · · · · · · · · ·			
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? If "Yes," complete Schedule R, Part VI 37 X 38 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? 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 10 In Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 10 In		If "Yes," complete Schedule R, Part V, line 2	36		
Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V The schedule O contains a response or note to any line in this Part V Yes No 1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 1c X	37				
Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V The statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V The statements Regarding Other IRS Filings and Tax Compliance The statements Regardi		and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
Part V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V Yes No 1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 1c X	38				
Check if Schedule O contains a response or note to any line in this Part V Yes No 1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 1c X		Note: All Form 990 filers are required to complete Schedule O	38	X	
Ta Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? Yes No 110 120 130 140 150 160 160 170 180 180 180 180 180 180 18	Pai	t V Statements Regarding Other IRS Filings and Tax Compliance			
1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 110 b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b 0 c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 1c X		Check if Schedule O contains a response or note to any line in this Part V			X
b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 1c X				Yes	No
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 1c X					
(gambling) winnings to prize winners?		Enter the manner of Fermi W Za meladed on the fat. Enter of the dependance			
	С				
	-	(gambling) winnings to prize winners?	1c		(2.5.5.1

132004 12-09-21

Form 990 (2021) NORTH FUND

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

			Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return 2a 0			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. See instructions.			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За		Х
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		Х
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5с		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
	any contributions that were not tax deductible as charitable contributions?	6a	X	
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b	Х	
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
_	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
10	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? Section 501(c)(7) organizations. Enter:	9b		
10 a	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter:			
	Gross income from members or shareholders			
	Gross income from other sources. (Do not net amounts due or paid to other sources against			
	amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note: See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which the			
	organization is licensed to issue qualified health plans			
	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			,,
	excess parachute payment(s) during the year?	15		X
46	If "Yes," see the instructions and file Form 4720, Schedule N.			v
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		X
47	If "Yes," complete Form 4720, Schedule O.			
17	Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in any	47		
	activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17		

Form 990 (2021) NORTH FUND 83-4011547 Page 6

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 on Schedule O. See instructions.

	Check if Schedule O contains a response or note to any line in this Part VI		<u></u>	<u></u>		X
Sec	tion A. Governing Body and Management					
					Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	3	3		
	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 on Schedule O.					
b	Enter the number of voting members included on line 1a, above, who are independent	1b] 3	3]		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	with a	any other			
	officer, director, trustee, or key employee?			2		X
3	Did the organization delegate control over management duties customarily performed by or under the	e direc	t supervision			
				3	X	
4	Did the organization make any significant changes to its governing documents since the prior Form 9			4		X
5	Did the organization become aware during the year of a significant diversion of the organization's ass	ets?		5		X
6	Did the organization have members or stockholders?			6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or approximately appr					
	more members of the governing body?			7a		<u> </u>
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, st		·			
	persons other than the governing body?			7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year	,	•		7.7	
а	The governing body?			8a	X	37
b	Each committee with authority to act on behalf of the governing body?			8b		X
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be read					\ .
800	organization's mailing address? If "Yes," provide the names and addresses on Schedule O			9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Re	venue	Code.)			г
40-	Did the constitution have been been been been as officered.			40-	Yes	No X
	Did the organization have local chapters, branches, or affiliates?			10a		
D	If "Yes," did the organization have written policies and procedures governing the activities of such ch	•		401-		
44.			o filing the form?	10b	Х	_
	Has the organization provided a complete copy of this Form 990 to all members of its governing body	y belor	e illing the form?	11a	Λ	
b 120	Describe on Schedule O the process, if any, used by the organization to review this Form 990.			12a	Х	
12a	Did the organization have a written conflict of interest policy? <i>If</i> "No," go to line 13			12b	X	
b	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "\]			120	25	
С		,		12c	х	
13	on Schedule O how this was done Did the organization have a written whistleblower policy?			13	X	<u> </u>
14				14	X	<u> </u>
15	Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approva			17		
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		асрепасти			
a	The organization's CEO, Executive Director, or top management official			15a		х
	Other officers or key employees of the organization			15b		X
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			.05		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangen	nent w	ith a			
.54	taxable entity during the year?			16a		х
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate			.50		
_	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organ	-	· ·			
	exempt status with respect to such arrangements?			16b		
Sec	tion C. Disclosure					
17	List the states with which a copy of this Form 990 is required to be filed ▶AL , AR , CA , CT , D	C,F	L,GA,HI,ID	,IL	,KS,	KY
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, ar					
	for public inspection. Indicate how you made these available. Check all that apply.			,,		
	X Own website Another's website X Upon request Other (explain	on Sc	hedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, co		,	d finan	cial	
	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 boo	oks and	d records			
	ARABELLA ADVISORS - (202) 595-1020					
	1828 L STREET, NW, SUITE 300, WASHINGTON, DC 20036	5				
132006	SEE SCHEDULE O FOR FULL LIST OF STATES			Forn	990	(2021)

Form 990 (2021) NORTH FUND 83-4011547 Page 7

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

X

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 the 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, Form 1099-MISC, and/or box 1 of Form 1099-NEC) 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.

See the instructions for the order in which to list the persons above.

(A) Name and title	(B) Average hours per week	box	not c , unle:	Pos heck ss per	more rson i	than o s both or/trus	n an	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC/ 1099-NEC)	organizations (W-2/1099-MISC/ 1099-NEC)	compensatior from the organization and related organizations
(1) JESSE LEHRICH	32.00	1				l		100 400	•	0 000
PROJECT ADVISOR	14 00					Х		138,483.	0.	9,876
(2) MEGAN LEWIS	14.00	-				3,		110 004	0	4 115
PROJECT DIRECTOR (3) SAURABH GUPTA	1 00					X		118,804.	0.	4,117
GENERAL COUNSEL	1.00	1		х				19,895.	0.	(
(4) JIM GERSTEIN	1.00							15,055.	0.	
PRESIDENT AND CHAIR	1.00	x		Х				0.	0.	(
(5) CRISTINA URIBE	1.00									
TREASURER		Х		х				0.	0.	(
(6) MELANIE BELLER	1.00									
SECRETARY		Х		Х				0.	0.	(
_										
		-								

Form 990 (2021) NORTH FUND 83-4011547 Page 8

Part VII Section A. Officers, Directors, Trus	tees, Key Emp	oloye	ees,	and	l Hig	ghes	t C	ompensated Employee	s (continued)			
(A)	(B)			(0	C)			(D)	(E)		(F)	
Name and title	Average	(do		Pos		l than d	one	Reportable	Reportable	Es	timate	ed
	hours per	box,	, unles	ss per	rson is	s both	n an	compensation	compensation	an	nount	of
	week	offic	cer an	id a di	irecto	r/trus	tee)	from	from related		other	
	(list any	ector						the	organizations	ı	pensa	
	hours for related	or dir	e e			ated		organization	(W-2/1099-MISC/	l	om th	
	organizations	ustee	trust		gu.	bens		(W-2/1099-MISC/	1099-NEC)		anizat	
	below	ual tr	ional		ploye	t con	١.	1099-NEC)		l	d relat anizati	
	line)	ndividual trustee or director	nstitutional trustee	Officer	Key employee	Highest compensated employee	Former			l	ai iizatii	JI 15
		=	=	0		Τ 0	ш.					
								055 100			2 2	
1b Subtotal								277,182.	0.	1	3,9	
c Total from continuation sheets to Part VI								0.	0.			0.
d Total (add lines 1b and 1c)							<u> </u>	277,182.	0.	1	3,9	<u>93.</u>
2 Total number of individuals (including but n	ot limited to th	ose	liste	d ab	ove) wh	o re	eceived more than \$100,	000 of reportable			0
compensation from the organization											Yes	0 No
3 Did the organization list any former officer,	director tructs	00 1		mnl	01/0	۰ ۵۲	hia	hoot componented ampl	0,400 00		163	140
,										3		Х
line 1a? If "Yes," complete Schedule J for so 4 For any individual listed on line 1a, is the su								ner compensation from the		3		-22
and related organizations greater than \$150	•							•	•	4		Х
5 Did any person listed on line 1a receive or a												
rendered to the organization? If "Yes." com	plete Schedule	e J fo	or su	ıch <u>ı</u>	oers	on .				5		Х
Section B. Independent Contractors												
1 Complete this table for your five highest co	mpensated ind	lepe	nder	nt co	ontra	actor	rs th	nat received more than \$	100,000 of compensa	tion fro	om	
the organization. Report compensation for	the calendar ye	ear e	ndin	ng w	ith c	or wi	thiņ	the organization's tax y	ear.			

and organization: Hoport dempendation for the datendar year charing with or with	Truno organization o tax your.	
(A)	(B)	(C)
Name and business address	Description of services	Compensation
PERKINS COIE LLP		
PO BOX 24643, SEATTLE, WA 98124	LEGAL SERVICES	1,872,846.
ELIAS LAW GROUP LLC		
10 G ST NE SUITE 600, WASHINGTON, DC 20002	LEGAL SERVICES	738,698.
TARGETED PLATFORM MEDIA LLC	MEDIA, ADVERTISING &	
651 MAID MARION RD, ANNAPOLIS, MD 21405	DESIGN SERVICES	622,305.
ARABELLA ADVISORS, 1828 L ST NW SUITE 300,	ADMIN., OPERATIONS &	
WASHINGTON, DC 20036	MANAGEMENT SERVICES	551,809.
SPECTOR ROH STRATEGIES, 316 W WASHINGTON		
AVE #675, MADISON, WI 53703	PROJECT MANAGEMENT	513,000.
2 Total number of independent contractors (including but not limited to those listed	d above) who received more than	
\$100,000 of compensation from the organization		
<u> </u>		- 000

Page 9 83-4011547

· u	1 L V	•••		or note to any line	e in this Part VIII			
			Check if Schedule O contains a response	or note to any line	(A) Total revenue	Related or exempt	(C) Unrelated business revenue	Revenue excluded
Contributions, Gifts, Grants and Other Similar Amounts	1:	b c d e f	Federated campaigns	42,712,036.	42,712,036.			
0 0		<u>''</u>	Total. Add lines 1a-11	Business Code	12,722,000.			
Program Service Revenue	2 6	b c d						
ш			All other program service revenue					
	3	g	Total. Add lines 2a-2f Investment income (including dividends, intere other similar amounts) Income from investment of tax-exempt bond p	est, and				
	5		Royalties	T T				
	6 a	b	Gross rents 6a 6b Rental income or (loss) (i) Real 6b 6c	(ii) Personal				
			Net rental income or (loss)					
ne	İ	b	Gross amount from sales of assets other than inventory Less: cost or other basis and sales expenses 7b (i) Securities 7a	(ii) Other				
Revenue			Gain or (loss) 7c					
Other R			Net gain or (loss) Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18 8a					
	ı	b	Less: direct expenses 8b					
			Net income or (loss) from fundraising events	>				
	9 :	а	Gross income from gaming activities. See					
			Part IV, line 19 9a Less: direct expenses 9b Net income or (loss) from gaming activities	1				
			Gross sales of inventory, less returns and allowances 10a Less: cost of goods sold 10b	1				
	(С	Net income or (loss) from sales of inventory	>				
Miscellaneous Revenue	11 :	-	GENERAL ADMIN RETAINER	Business Code 541900	200,909.			200,909.
llan		b	OTHER REVENUE	910099	13,600.			13,600.
Sce		ч С	All other revenue					
Ξ			Total. Add lines 11a-11d		214,509.			
_	12	_	Total revenue. See instructions	>	42,926,545.	0.	0.	214,509.
					·	•		5 000 (000 t)

132009 12-09-21

Form 990 (2021) NORTH FUND Part IX Statement of Functional Expenses

Sect	ion 501(c)(3) and 501(c)(4) organizations must comp	olete all columns. All othe	er organizations must con	nplete column (A).	
	Check if Schedule O contains a respon				
	not include amounts reported on lines 6b, 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	10 896 593.	10,896,593.		
2	Grants and other assistance to domestic	10,030,3331	10,030,3331		
2	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
3	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
4 5	Compensation of current officers, directors,				
3	trustees, and key employees	19,895.	1,990.	17,905.	
6	Compensation not included above to disqualified	13,033.	1,3300	17,505.	
U	persons (as defined under section 4958(f)(1)) and				
	4050(-)(0)(D)				
7		1,534,360.	1,527,607.	6,753.	
7 8	Other salaries and wages Pension plan accruals and contributions (include	1,331,300.	1,521,001•	0,133.	
0	section 401(k) and 403(b) employer contributions)	31,450.	30,951.	499.	
9	Other employee benefits	170,871.	168,160.	2,711.	
10		118,043.	116,170.	1,873.	
10	Payroll taxes Fees for services (nonemployees):	110,043.	110,170	1,015•	
		882,440.		882,440.	
a b	Management	2,886,409.	2,875,366.	11,043.	
0	Legal Accounting	35,200.	2,073,300.	35,200.	
d		739,193.	739,193.	33,2001	
e	Professional fundraising services. See Part IV, line 17	73372331	73371331		
f	Investment management fees				
g g	Other. (If line 11g amount exceeds 10% of line 25,				
9	column (A), amount, list line 11g expenses on Sch O.)	2.547.469.	2,345,896.	56,650.	144,923.
12	Advertising and promotion	12,559,957.	12,559,957.		
13	Office expenses	59,622.		14,821.	
14	Information technology	184,081.		19,570.	
15	Royalties	,	, ,	- , -	
16	Occupancy	113,876.	112,623.	1,253.	
17	Travel	35,190.	35,190.	,	
18	Payments of travel or entertainment expenses	•	,		
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	519,101.	519,101.		
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance	32,123.		32,123.	
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A),				
_	amount, list line 24e expenses on Schedule 0.) DUES AND SUBSCRIPTIONS	15,688.	15,685.	3.	
a	LICENSES AND FEES	3,308.	3,267.	41.	
b	TAXES	2,400.	604.	1,796.	
c d	1111110	2,400.	004•	1,1500	
u e	All other expenses				
<u>25</u>	Total functional expenses. Add lines 1 through 24e	33,387,269.	32,157,665.	1,084,681.	144,923.
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				
					Form 990 (202)

83-4011547 Page **11** Form 990 (2021)
Part X | Balance Sheet NORTH FUND

tΧ	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
1			
2			36,017,276
3			7,450,000
4	Accounts receivable, net	4	
5	Loans and other receivables from any current or former officer, director,		
	trustee, key employee, creator or founder, substantial contributor, or 35% $$		
	controlled entity or family member of any of these persons	5	
6	Loans and other receivables from other disqualified persons (as defined		
	under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)	6	
7			
8	Inventories for sale or use	8	11 000
9	Prepaid expenses and deferred charges	24,991. 9	41,808
10a			
b		10c	
11			
12			
13		I I I I I I I I I I I I I I I I I I I	
14			0.050
15		50,968. 15	8,259
16			43,517,343
		100 000	2,570,215
			6,090,500
22			
25			
	(0.1.1.1.5)	05	
26			8,660,715
20		1,130,013. 20	0,000,713
27		-17 893 27	-19,225
		25 225 245	34,875,853
20		23/333/2131 23	31/0/0/000
29	•	20	
32	Total net assets or fund balances	05 045 050	34,856,628
	Total fiet addets of furid balarious	26,507,967. 33	43,517,343
	1 2 3 4 5 6 7 8 9 10 a b 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31	Check if Schedule O contains a response or note to any line in this Part X 1 Cash - non-interest-bearing 2 Savings and temporary cash investments 3 Pledges and grants receivable, net 4 Accounts receivable, net 5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) 7 Notes and loans receivable, net 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 11 Investments - publicly traded securities 12 Investments - other securities. See Part IV, line 11 13 Investments - program-related. See Part IV, line 11 14 Intangible assets 15 Other assets. See Part IV, line 11 16 Total assets. Add lines 1 through 15 (must equal line 33) 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability. Complete Part IV of Schedule D 22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D 26 Total liabilities. Add lines 17 through 25 Organizations that follow FASB ASC 958, check here 27 Tat and complete lines 27, 28, 32, and 33. Net assets with donor restrictions Organizations that do not follow FASB ASC 958, check here and complete lines 27 through 33. Capital stock or trust principal, or curren	Check if Schedule O contains a response or note to any line in this Part X A Beginning of year

83-4011547 Page **12**

Ра	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	42,9		
2	Total expenses (must equal Part IX, column (A), line 25)	2	33,3		
3	Revenue less expenses. Subtract line 2 from line 1	3	9,5	39,2	<u> 276.</u>
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	25,3	<u>17,3</u>	352.
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	34,8	56,6	<u>528.</u>
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	Ο.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2	а	X
	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	Were the organization's financial statements audited by an independent accountant?		2	b X	
	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:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
С	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?		2	С	X
	If the organization changed either its oversight process or selection process during the tax year, explain on Scho	edule O.			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin	gle Audit			
	Act and OMB Circular A-133?		3	а	X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required				
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3	_	
		<u>-</u>	Fo	_{rm} 990	(2021)

Schedule B

(Form 990)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

► Attach to Form 990 or Form 990-PF.

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

OMB No. 1545-0047

2021

Name of the organization Employer identification number 83-4011547

Organization type (cne	ck one):
Filers of:	Section:
Form 990 or 990-EZ	X 501(c)(4) (enter number) organization
	4947(a)(1) nonexempt charitable trust not treated as a private foundation
	527 political organization
Form 990-PF	501(c)(3) exempt private foundation
	4947(a)(1) nonexempt charitable trust treated as a private foundation
	501(c)(3) taxable private foundation
Note: Only a section 50	on is covered by the General Rule or a Special Rule . 11(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.
General Rule	
	ation filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.
Special Rules	
sections 509(a contributor, du	ation described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under l)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one uring the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; D-EZ, line 1. Complete Parts I and II.
contributor, du literary, or edu	ation described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one uring the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, cational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering on (b) instead of the contributor name and address), II, and III.
year, contribut is checked, en purpose. Don't	ation described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the ions <i>exclusively</i> for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box ter here the total contributions that were received during the year for an <i>exclusively</i> religious, charitable, etc., tomplete any of the parts unless the General Rule applies to this organization because it received <i>nonexclusively</i> table, etc., contributions totaling \$5,000 or more during the year
answer "No" on Part IV,	on that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it must line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify filing requirements of Schedule B (Form 990).

 $\ \ \, \text{LHA} \ \ \, \text{For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.}$

Schedule B (Form 990) (2021)

Name of organization

Employer identification number

83-4011547

Part I	Contributors (see instructions). Use duplicate copies of Part I if a	dditional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$ 12,870,870.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$ 5,000,000.	Person X Payroll
(a)	(b)	(c)	(d)
No. 4	Name, address, and ZIP + 4	* 4,300,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5		\$\$\$\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6		\$\$\$	Person X Payroll

Name of organization Employer identification number

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7		\$ 1,500,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
8		\$ <u>1,136,250</u> .	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
9		\$ <u>1,000,000</u> .	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
10		\$ 732,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
11		\$500,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
12		\$500,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)

NORTH FUND

83-4011547

Name of organization Employer identification number

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	al space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
13		\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
14		\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
15		\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
16		\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
17		\$ <u>250,000</u> .	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
18		\$ <u>250,000.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)

NORTH FUND

83-4011547

Name of organization Employer identification number 83-4011547

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
19		\$ 237,500.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
20		\$ <u>223,716.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
21		\$ 200,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
22		\$ 200,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
23		\$ 200,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
24		\$ 200,000.	Person X Payroll

NORTH FUND

Name of organization Employer identification number NORTH FUND

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
25		\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
26		\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
27		\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
28		\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
29		\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
30		\$\$	Person X Payroll

83-4011547

Name of organization Employer identification number

NORTH FUND 83-4011547

Part I	Contributors (see instructions). Use duplicate copies of Part I if addit	tional space is needed.
(a) No.	(b) Name, address, and ZIP + 4	(c) (d) Total contributions Type of contribution
31		Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) (d) Total contributions Type of contribution
32		Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) (d) Total contributions Type of contribution
33		Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c) (d)
No. 34	Name, address, and ZIP + 4	Total contributions Type of contribution Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) (d) Total contributions Type of contribution
35		Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) (d) Total contributions Type of contribution
36		Person X Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization Employer identification number

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
37		\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
38		\$ 25,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
39		\$ 25,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
40	Name, address, and ZIF + 4	\$ 25,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
41		\$ 25,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
42		\$15,000.	Person X Payroll

Name of organization

Employer identification number

83-4011547

Part I	Contributors (see instructions). Use duplicate copies of Part I if	additional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
43		\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c) Total contributions	(d)
No.	Name, address, and ZIP + 4	\$	Person Payroll Complete Part II for noncash contributions.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions \$	Person Payroll Complete Part II for noncash contributions.
(a)	(b) Name, address, and ZIP + 4	(c) Total contributions	(d)
No.	INGING, AUGI 655, AND ZIF + 4	\$	Person Payroll Complete Part II for noncash contributions.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
140.	Hame, audiess, and ZIF + +	\$	Person Payroll Noncash Complete Part II for noncash contributions.)

Page 3

Name of organization Employer identification number

NORTH FUND

83-4011547

Part II	Noncash Property (see instructions). Use duplicate copies of Pa	art II if additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		 \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	Schedule B (Form 990) (

Page 4

Name of organization **Employer identification number** NORTH FUND 83-4011547 Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) Use duplicate copies of Part III if additional space is needed. (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

SCHEDULE C (Form 990)

Political Campaign and Lobbying Activities

OMB No. 1545-0047

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.

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

- 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.

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 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 NORTH F			Empl	oyer identification number $83-4011547$							
Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.											
 Provide a description of the organiz Political campaign activity expendit Volunteer hours for political campai 	ures			3,707,601.							
Part I-B Complete if the org	janization is exempt unde	. , , , ,									
 Enter the amount of any excise tax Enter the amount of any excise tax If the organization incurred a section Was a correction made? If "Yes," describe in Part IV. 	incurred by organization manage n 4955 tax, did it file Form 4720 t	ers under section 4955 for this year?	▶ \$	Yes No							
·	janization is exempt unde										
 Enter the amount directly expended Enter the amount of the filing organ exempt function activities Total exempt function expenditures line 17b 	ization's funds contributed to oth	ner organizations for sect and on Form 1120-POL,	tion 527 ► \$	3,555,000.							
 Did the filing organization file Form Enter the names, addresses and en made payments. For each organiza contributions received that were prepolitical action committee (PAC). If 	1120-POL for this year?	I) of all section 527 politi I from the filing organizat separate political organ	cal organizations to which ion's funds. Also enter the ization, such as a separate	Yes X No the filing organization amount of political							
(a) Name	(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									
EMERGE NEW MEXICO	ALBUQUERQUE, NM 87102	90-0783311	50,000.	0.							
NEW MEXICO SENATE DEMOCRATS	ALBUQUERQUE, NM 87123	82-1045511	25,000.	0.							

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

SEE PART IV FOR CONTINUATION

Schedule C (Form 990) 2021

LHA

Schedule C (Form 990) 2021 NORTH FUND 83-4011547 Page 2 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. (a) Filing (b) Affiliated group Limits on Lobbying Expenditures organization's totals (The term "expenditures" means amounts paid or incurred.) totals **1a** Total lobbying expenditures to influence public opinion (grassroots lobbying) **b** Total lobbying expenditures to influence a legislative body (direct lobbying) c Total lobbying expenditures (add lines 1a and 1b) d Other exempt purpose expenditures e Total exempt purpose expenditures (add lines 1c and 1d) Lobbying nontaxable amount. Enter the amount from the following table in both columns. 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. \$175,000 plus 10% of the excess over \$1,000,000. Over \$1,000,000 but not over \$1,500,000 \$225,000 plus 5% of the excess over \$1,500,000. Over \$1,500,000 but not over \$17,000,000 Over \$17,000,000 \$1,000,000. g Grassroots nontaxable amount (enter 25% of line 1f) h Subtract line 1g from line 1a. If zero or less, enter -0i Subtract line 1f from line 1c. If zero or less, enter -0i 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 4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.) **Lobbying Expenditures During 4-Year Averaging Period** Calendar year (a) 2018 (b) 2019 (c) 2020(d) 2021 (e) Total (or fiscal year beginning in) 2a Lobbying nontaxable amount **b** Lobbying ceiling amount (150% of line 2a, column(e)) c Total lobbying expenditures

Schedule C (Form 990) 2021

 d Grassroots nontaxable amount
 e Grassroots ceiling amount (150% of line 2d, column (e))

f Grassroots lobbying expenditures

Schedule C (Form 990) 2021 NORTH FUND 83-4011547 Page 3

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)).

or each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description	(a)	(b)
f the lobbying activity.	Yes	No	Amo	unt
During the year, did the filing organization attempt to influence foreign, national, state, or				
local legislation, including any attempt to influence public opinion on a legislative matter				
or referendum, through the use of:				
a Volunteers?				
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
c Media advertisements?				
d Mailings to members, legislators, or the public?				
e Publications, or published or broadcast statements?				
f Grants to other organizations for lobbying purposes?				
g Direct contact with legislators, their staffs, government officials, or a legislative body?				
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
i Other activities?				
j Total. Add lines 1c through 1i				
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
b If "Yes," enter the amount of any tax incurred under section 4912				
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	- FO4/a\/E		4:	
, , , , , , , , , , , , , , , , , , , ,	n 501(c)(5	o), or sec	tion	
501(c)(6).			V	N.
			Yes	No
Were substantially all (90% or more) dues received nondeductible by members?				
Did the organization make only in-house lobbying expenditures of \$2,000 or less?				
Did the organization agree to carry over lobbying and political campaign activity expenditures from the art III-B Complete if the organization is exempt under section 501(c)(4), section			tion	
answered "Yes." 1 Dues, assessments and similar amounts from members		1		
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenditures)				
expenses for which the section 527(f) tax was paid).	Jui			
a Current year		2a		
b Carryover from last year				
c Total				
If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exc				
does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and p				
and the second second second	Olitical	4		
expenditure next year? Taxable amount of lobbying and political expenditures. See instructions		5		
art IV Supplemental Information		3	1	
ovide 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	A. lines 1 a	nd 2 (See	
structions); and Part II-B, line 1. Also, complete this part for any additional information.	,,	,	`	
ART I-A, LINE 1:				
·				
UNDS EXPENDED TO FURTHER SOCIAL WELFARE.				
ART I-C CONTINUATION FOR INCOMPLETE NAME/ADDRESS INFO	RMATIO)N:		
MERGE NEW MEXICO				
00 MARQUETTE AVE NW ALBUQUERQUE, NM 87102				

Schedule C (Form 990) 2021

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

► Attach to Form 990.

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

OMB No. 1545-0047

Inspection

Name of the organization

Employer identification number 83-4011547 NORTH FUND

Par	t I Organizations Maintaining Donor Advised organization answered "Yes" on Form 990, Part IV, line		r Accounts. Complete if the
		(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 w	riting that the assets held in donor advised	funds
•	are the organization's property, subject to the organization's e	_	
6	Did the organization inform all grantees, donors, and donor ad		
•	for charitable purposes and not for the benefit of the donor or		
Par			
1	Purpose(s) of conservation easements held by the organization		,
	Preservation of land for public use (for example, recreating	`	historically important land area
	Protection of natural habitat	· —	certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualifie	ed 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
а	-		2a
b			
c	Number of conservation easements on a certified historic stru-		
d	Number of conservation easements included in (c) acquired af		
u	listed in the National Register	•	2d
3	Number of conservation easements modified, transferred, rele		
Ū	year	acca, extinguished, or terminated by the or	gamzation daming the tax
4	Number of states where property subject to conservation ease	ement is located	
5	Does the organization have a written policy regarding the period	· · · · · · · · · · · · · · · · · · ·	
J	violations, and enforcement of the conservation easements it		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, h		
Ū	Land voluntees means devoted to morntoning, inspecting, i	idinaling of violations, and emoroting conser	vacion oddernonto daring the year
7	Amount of expenses incurred in monitoring, inspecting, handli	ing of violations, and enforcing conservation	n easements during the year
•	S	ing of violations, and emoroting conservation	in easements during the year
8	Does each conservation easement reported on line 2(d) above	e satisfy the requirements of section 170/h)/	(4)(B)(i)
Ü	and section 170(h)(4)(B)(ii)?		
9	In Part XIII, describe how the organization reports conservatio		
3	balance sheet, and include, if applicable, the text of the footnot	•	
	organization's accounting for conservation easements.	ote to the organization's infancial statement	to that describes the
Pai	t III Organizations Maintaining Collections of	Art. Historical Treasures, or Other	er Similar Assets.
	Complete if the organization answered "Yes" on Form		
	If the organization elected, as permitted under FASB ASC 958		I halance sheet works
	of art, historical treasures, or other similar assets held for publ	•	
	service, provide in Part XIII the text of the footnote to its finance	, ,	ioranoe or public
b	If the organization elected, as permitted under FASB ASC 958		ance sheet works of
-	art, historical treasures, or other similar assets held for public		
	provide the following amounts relating to these items:	o.aon, education, or research in fulfiller	and of public off vice,
			▶ ¢
	(i) Revenue included on Form 990, Part VIII, line 1		
0		sures or other similar assets for financial a	
2	If the organization received or held works of art, historical trea		airi, provide
_	the following amounts required to be reported under FASB AS	-	• •
a	Revenue included on Form 990, Part VIII, line 1		
<u> D</u>	Assets included in Form 990, Part X		> \$

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

Schedule D (Form 990) 2021

Schedule D (Form 990) 2021

(d) Book value

(c) Accumulated

depreciation

e Other

(a) Cost or other

basis (investment)

Description of property

c Leasehold improvementsd Equipment

Total. Add lines 1a through 1e. (Column (d) must equal Form 990. Part X. column (B), line 10c.)

(b) Cost or other

basis (other)

Part VIII Investments - Other Securities.	un Form 000 Dout IV line	11h Con Form 000 Port V line 10	1011017 Tage
Complete if the organization answered "Yes" of		(c) Method of valuation: Cost or end-o	f voor market value
(a) Description of Security or category (including name of security)	(b) Book value	(c) Method of Valuation: Cost or end-o	r-year market value
(1) Financial derivatives		+	
(2) Closely held equity interests			
3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ▶ Part VIII Investments - Program Related.			
	F 000 D+ N/ 15	44 - O Farm 000 Back V Pro 40	
Complete if the organization answered "Yes" of			f
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-o	r-year market value
(1)		1	
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶ Part IX Other Assets. Complete if the organization answered "Yes" of the complete if the organization and the complete if the complete if the organization and the complete if the complet		11d. See Form 990, Part X, line 15.	(h) De aleccales
	Description		(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line	15.)	>	
Part X Other Liabilities.			
Complete if the organization answered "Yes" of	on Form 990, Part IV, line	11e or 11f. See Form 990, Part X, line 25.	
1. (a) Description of liability			(b) Book value
(1) Federal income taxes			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
	05.)		
Total. (Column (b) must equal Form 990. Part X. col. (B) line	∠ਹ.៸		

organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII ... X

Schedule D (Form 990) 2021

Schedule D (Form 990) 2021

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.

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

2021
Open to Public

Inspection

Schedule I (Form 990) 2021

OMB No. 1545-0047

Employer identification number Name of the organization 83-4011547 NORTH FUND Part I **General Information on Grants and Assistance** 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 1 X Yes criteria used to award the grants or assistance? 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. (f) Method of 1 (a) Name and address of organization (b) EIN (c) IRC section (d) Amount of (e) Amount of (g) Description of (h) Purpose of grant valuation (book, or government (if applicable) cash grant noncash noncash assistance or assistance FMV, appraisal, assistance other) 9TO5 NATIONAL ASSOCIATION OF WORKING WOMEN - 207 E BUFFALO CIVIL RIGHTS, SOCIAL 52-1201710 501(C)(5) STREET - MILWAUKEE, WI 53202 0 ACTION, ADVOCACY 150,000. ARIZONA COALITION FOR CHANGE 1241 E WASHINGTON ST SUITE 103 CIVIL RIGHTS, SOCIAL PHOENIX, AZ 85034 82-2534431 501(C)(3) ACTION, ADVOCACY 10,000 0. AVOW INC PO BOX 9883 CIVIL RIGHTS, SOCIAL AUSTIN, TX 78766 74-2007519 501(C)(4) 300,000 0. ACTION, ADVOCACY BLACK MALE VOTER PROJECT 384 NORTHYARDS BLVD NW, BUILDING 10 CIVIL RIGHTS, SOCIAL ACTION ADVOCACY ATLANTA GA 30313 84-3530186 501(C)(4) 10 000 0. BLACK VOTERS MATTER FUND INC 4751 BEST RD. CIVIL RIGHTS, SOCIAL 81-3625061 501(C)(4) ACTION ADVOCACY EAST POINT, GA 30337 50 000 0. CARE IN ACTION 45 BROADWAY CIVIL RIGHTS, SOCIAL NEW YORK, NY 10006 46-4605470 501(C)(4) 150 000 0 ACTION ADVOCACY 14. 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 43. Enter total number of other organizations listed in the line 1 table

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

Part II Continuation of Grants and Other	Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)								
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
CASE ACTION FUND 1021 S 7TH AVE, SUITE 202 PHOENIX, AZ 85007	45-4874128	501(C)(4)	10,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY		
CATHOLIC BISHOP OF CHICAGO ST SABINA DBA ST SABINA - 1210 W 78TH PL - CHICAGO, IL 60620	36-2171123	501(C)(3)	20,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY		
CENTER FOR CIVIC ACTION 625 SILVER AVE SW ALBUQUERQUE, NM 87102	02-0779812	501(C)(4)	51,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY		
CITIZEN ACTION OF WISCONSIN INC 2797 S KINNICKINNIC AVE MILWAUKEE, WI 53207	39-1424314	501(C)(4)	250,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY		
COLORADO CEASEFIRE LEGISLATIVE ACTION - PO BOX 7501 - DENVER, CO 80207	47-0865736	501(C)(4)	20,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY		
COMMON CAUSE 805 15TH STREET NW WASHINGTON, DC 20005	52-6078441	501(C)(4)	300,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY		
COMMON DEFENSE CIVIC ENGAGEMENT 251 W 30TH ST NEW YORK, NY 10001	83-3156982	501(C)(4)	140,250.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY		
EL CENTRO PODER Y ACCION 714 4TH ST SW ALBUQUERQUE, NM 87102	85-3020297	501(C)(4)	75,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY		
EMERGE NEW MEXICO 500 MARQUETTE AVE NW ALBUQUERQUE, NM 87102	90-0783311	527	50,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY		

Part II Continuation of Grants and Other	Assistance to Do	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	,5 1011517 F
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FAMILY FRIENDLY ACTION FUND							
114 NORTH MAIN STREET							CIVIL RIGHTS, SOCIAL
CONCORD, NH 03301	83-1806898	501(C)(4)	140,000.	0.			ACTION, ADVOCACY
,							
FOR WEST VIRGINIAS FUTURE							
PO BOX 132							CIVIL RIGHTS, SOCIAL
ONA, WV 25545	82-4058689	501(C)(4)	25,000.	0.			ACTION, ADVOCACY
FORWARD TOGETHER							
300 FRANK H OGAWA PLAZA							CIVIL RIGHTS, SOCIAL
OAKLAND, CA 94612	84-3565059	501(C)(4)	75,000.	0.			ACTION, ADVOCACY
MONGROW IN AGREON							
HOUSTON IN ACTION							GIVIT DIGUES SOCIAL
515 POST OAK BLVD	02 0040004	501/61/21	60.000				CIVIL RIGHTS, SOCIAL
HOUSTON, TX 77027	83-0940984	501(C)(3)	60,000.	0.			ACTION, ADVOCACY
LUBBOCK COALITION FOR HEALTHCARE							
ACCESS - 3716 22ND PL - LUBBOCK,							CIVIL RIGHTS, SOCIAL
TX 79410	86-2231967	501(C)(4)	75,000.	0.			ACTION, ADVOCACY
	00 2202507	001(0)(1)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	•			1011011, 1121001101
MARYLANDERS TO PREVENT GUN							
VIOLENCE - 2600 SAINT PAUL ST -							CIVIL RIGHTS, SOCIAL
BALTIMORE, MD 21218	46-2756378	501(C)(3)	50,000.	0.			ACTION, ADVOCACY
MICHIGAN CIVIC ACTION FUND							
28342 DARTMOUTH ST							CIVIL RIGHTS, SOCIAL
MADISON HEIGHTS, MI 48071	82-3995979	501(C)(4)	205,000.	0.			ACTION, ADVOCACY
MISSOURI WIN							
4818 WASHINGTON BLVD							CIVIL RIGHTS, SOCIAL
SAINT LOUIS, MO 63108	82-4375006	501(C)(4)	60,000.	0.			ACTION, ADVOCACY
MOTHERING JUSTICE ACTION FUND							
17320 LIVERNOIS AVE							CIVIL RIGHTS, SOCIAL
DETROIT, MI 48221	82-2828323	501(C)(A)	75,000.	0.			ACTION, ADVOCACY
DHIROTI, MI 40221	1 02 2020323	DOT (C) (I)	13,000.	<u>. </u>			ELETION, ADVOCACI

Schedule I (Form 990) NORTH FUN	D					8	33-4011547 Pag
Part II Continuation of Grants and Other A	Assistance to Do	mestic Organizations I	and Domestic Go	vernments (Sche	edule I (Form 990), Pa F	ırt II.) T	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NARAL PRO CHOICE OHIO							
11811 SHAKER BLVD							CIVIL RIGHTS, SOCIAL
CLEVELAND, OH 44120	31-0963461	501(C)(4)	500,000.	0.			ACTION, ADVOCACY
NATIONAL ALLIANCE FOR CAREGIVING							
1730 RHODE ISLAND AVENUE NW	FO 10212FF	501 (6) (2)	50.000	•			CIVIL RIGHTS, SOCIAL
WASHINGTON, DC 20036	52-1931357	501(C)(3)	50,000.	0.			ACTION, ADVOCACY
NEO PHILANTHROPY INC							
45 W 36TH STREET							CIVIL RIGHTS, SOCIAL
NEW YORK, NY 10018	13-3191113	501(C)(3)	165,000.	0.			ACTION, ADVOCACY
							,
NEW AMERICA FOUNDATION							
740 15TH ST NW							CIVIL RIGHTS, SOCIAL
WASHINGTON, DC 20005	52-2096845	501(C)(3)	80,000.	0.			ACTION, ADVOCACY
NEW MEXICO SENATE DEMOCRATS							
313 MOON ST NE							CIVIL RIGHTS, SOCIAL
ALBUQUERQUE, NM 87123	82-1045511	527	25,000.	0.			ACTION, ADVOCACY
NEW YORK STATE IMMIGRANT ACTION							
FUND - 131 WEST 33RD STREET - NEW	61 1613185	501 (6) (4)	05.000	•			CIVIL RIGHTS, SOCIAL
YORK, NY 10001	61-1613175	501(C)(4)	25,000.	0.			ACTION, ADVOCACY
NEW YORKERS AGAINST GUN VIOLENCE							
INC - 675 THIRD AVE - NEW YORK, NY							CIVIL RIGHTS, SOCIAL
10017	13-3808186	501/01/31	25,000.	0.			ACTION, ADVOCACY
10017	13-3000100	501(0)(3)	23,000.	0.			ACTION, ADVOCACT
NORTH CAROLINIANS AGAINST GUN							
VIOLENCE ACTION FUND - PO BOX							CIVIL RIGHTS, SOCIAL
52425 - DURHAM, NC 27717	83-1339571	501(C)(3)	100,000.	0.			ACTION, ADVOCACY
,		, , . ,	= 1 1 7 1 1 1 1				.,
OHIO PROGRESSIVE COLLABORATIVE							
341 SOUTH THIRD STREET							CIVIL RIGHTS, SOCIAL
COLUMBUS, OH 43215	82-2146860	501(C)(4)	325,000.	0.			ACTION, ADVOCACY

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
OUR VOICE OUR VOTE ARIZONA							
1241 E. WASHINGTON ST							CIVIL RIGHTS, SOCIAL
LAVEEN, AZ 85034	82-3222019	501(C)(4)	221,600.	0.			ACTION, ADVOCACY
,			,				,
PA ALLIANCE ACTION							
2034 S COLORADO ST							CIVIL RIGHTS, SOCIAL
PHILADELPHIA, PA 19145	82-3537729	501(C)(4)	250,000.	0.			ACTION, ADVOCACY
PLANNED PARENTHOOD ADVOCATES OF MI							
PO BOX 15104							CIVIL RIGHTS, SOCIAL
LANSING, MI 48901	38-2765858	501(C)(4)	100,000.	0.			ACTION, ADVOCACY
PLANNED PARENTHOOD TEXAS VOTES							
201 E BEN WHITE BLVD	46 5205206	F01/G)/A)					CIVIL RIGHTS, SOCIAL
AUSTIN, TX 78704	46-5305326	501(C)(4)	75,000.	0.			ACTION, ADVOCACY
POWER COALITION FOR ELECTORAL							
JUSTICE - 4930 WASHINGTON AVE -							CIVIL RIGHTS, SOCIAL
NEW ORLEANS, LA 70125	84-3880115	501(C)(3)	100,000.	0.			ACTION, ADVOCACY
, 211 ,0120	01 0000110		200,000.	-			11011011, 1121001101
PRODIGAL CHILD PROJECT							
403 W POWELL ST							CIVIL RIGHTS, SOCIAL
DOTHAN, AL 36303	02-0803494	501(C)(4)	50,000.	0.			ACTION, ADVOCACY
PROGRESS NORTH CAROLINA ACTION							
2912 HIGHWOODS BLVD							CIVIL RIGHTS, SOCIAL
RALEIGH, NC 27604	45-2862217	501(C)(4)	125,000.	0.			ACTION, ADVOCACY
PROGRESSNOW NEW MEXICO							
625 SILVER AVE SW				_			CIVIL RIGHTS, SOCIAL
ALBUQUERQUE, NM 87102	45-4130072	501(C)(4)	105,000.	0.			ACTION, ADVOCACY
PUBLIC PRIVATE STRATEGIES							
INSTITUTE - 700 PENNSYLVANIA							CIVIL RIGHTS, SOCIAL
AVENUE SE - WASHINGTON, DC 20003	84-3330258	501(C)(3)	100,000.	0.			ACTION, ADVOCACY
AVENUE DE - WASHINGTON, DC 20003	04-3330236	201/6/(2)	100,000.	0.			ACTION, ADVOCACT

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
RIVER PHOENIX CENTER FOR PEACE							
2603 NW 13 STREET							CIVIL RIGHTS, SOCIAL
GAINESVILLE, FL 32609	59-3179952	501(C)(3)	10,000.	0.			ACTION, ADVOCACY
RUN FOR SOMETHING ACTION FUND							
1900 L ST NW							CIVIL RIGHTS, SOCIAL
WASHINGTON, DC 20036	81-4761176	501(C)(4)	1,000,000.	0.			ACTION, ADVOCACY
SECURE DEMOCRACY							
611 PENNSYLVANIA AVE SE							CIVIL RIGHTS, SOCIAL
WASHINGTON, DC 20003	82-3846342	501 (C) (A)	1,000,000.	0.			ACTION, ADVOCACY
WASHINGTON, DC 20003	02-3040342	301(0)(4)	1,000,000.	0.			ACTION, ADVOCACT
SIX ACTION							
PO BOX 260230							CIVIL RIGHTS, SOCIAL
MADISON, WI 53726	20-3169871	501(C)(4)	20,000.	0.			ACTION, ADVOCACY
SIXTEEN THIRTY FUND							
1201 CONNECTICUT AVE NW							CIVIL RIGHTS, SOCIAL
WASHINGTON, DC 20036	26-4486735	501(C)(4)	1,900,000.	0.			ACTION, ADVOCACY
GUND I GE MOVEMENT							
SUNRISE MOVEMENT							CTVII DICUMC COCINI
50 F ST. NW SUITE 700	02 1222167	E01(C)(A)	10 000	0.			CIVIL RIGHTS, SOCIAL
WASHINGTON, DC 20001	82-1232167	501(C)(4)	10,000.	0.			ACTION, ADVOCACY
TEXAS FREEDOM NETWORK							
PO BOX 1626							CIVIL RIGHTS, SOCIAL
AUSTIN, TX 78767	74-2736849	501(C)(4)	600,000.	0.			ACTION, ADVOCACY
			<u> </u>				, , , , , , , , , , , , , , , , , , ,
TEXAS ORGANIZING PROJECT							
PO BOX 120296							CIVIL RIGHTS, SOCIAL
SAN ANTONIO, TX 78212	27-1482075	501(C)(4)	125,000.	0.			ACTION, ADVOCACY
THE URBAN INSTITUTE							
500 L'ENFANT PLAZA SW	50 0000075	F01 (@) (3)	127.622	•			CIVIL RIGHTS, SOCIAL
WASHINGTON, DC 20024	52-0880375	DUT(C)(3)	137,993.	0.			ACTION, ADVOCACY

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)								
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	
TIDES FOUNDATION 1014 TORNEY AVE SAN FRANCISCO, CA 94129	51-0198509	501(C)(3)	20,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY	
UNIDOSUS ACTION FUND INC 1126 16TH STREET NW WASHINGTON, DC 20005	45-5341145	501(C)(4)	100,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY	
USAGAINSTALZHEIMER'S ACTION PO BOX 34565 WASHINGTON DC, DC 20043	27-1538205	501(C)(4)	104,500.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY	
VOTERS NOT POLITICIANS PO BOX 16180 LANSING, MI 48901	82-1389940	501(C)(4)	25,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY	
WESTERN CONSERVATION ACTION 1675 LARIMER STREET, UNIT 420 DENVER, CO 80202	20-8091495	501(C)(4)	50,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY	
WORKMONEY INC 790 N. MILWAUKEE ST MILWAUKEE, WI 53202	85-0604101	501(C)(4)	1,000,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY	

Schedule I (Form 990) 2021 NORTH FUND 83-4011547

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

(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 noncash assistance					
Part IV Supplemental Information. Provide the information rec	บ puired in Part I, lin	e 2; Part III, column	ו ו (b); and any other ac	l Iditional information.						
PART I, LINE 2:										
THE NORTH FUND MAKES GRANTS TO MUL	TIPLE ORG	ANIZATIONS	S AND COMMI	TTED						
COMMUNITY LEADERS. THE FUND REQUI	RES GRANT	EES TO SIG	GN GRANT AG	REEMENTS						
CERTIFYING THAT ALL ACTIVITIES ARE	CONSISTE	NT WITH AI	LLOWABLE SO	CIAL WELFARE						
WORK CONSISTENT WITH THE NORTH FUND'S MISSION AND PURPOSE. THE NORTH FUND										
REQUIRES THAT GRANTEES SUBMIT INTE	RIM AND P	OST-GRANT	REPORTS TO	HELP ENSURE						
THAT ALL FUNDS ARE PROPERLY MANAGED AND EXPENDED, AND THE NORTH FUND										
REQUIRES THAT FUNDS BE RETURNED IF REPORTS ARE NOT PROPERLY FILED OR IF										
-X0-11-12 -11-1 -01-20 DD 11-11-01-10 -11-11-01-12 11-12-11-11-11-11-11-11-11-11-11-11-11-1										

Page 2

FUNDS ARE NOT SPENT.

SCHEDULE O (Form 990)

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 Form 990-EZ.

2021 Open to Public Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

Employer identification number 83-4011547

Name of the organization NORTH FUND

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

THE NORTH FUND PARTNERS WITH COMMITTED COMMUNITY LEADERS TO HELP MAKE

OUR COUNTRY A MORE JUST, FAIR, AND EQUITABLE PLACE TO LIVE, WORK, AND

RAISE FAMILIES. IT FOCUSES ON SUPPORTING INNOVATIVE SOCIAL

ENTREPRENEURSHIP, EDUCATIONAL INITIATIVES, AND ADVOCACY CAMPAIGNS THAT

LIFT UP COMMUNITIES AND CREATE REAL AND LASTING CHANGE.

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

THE NORTH FUND PARTNERS WITH COMMITTED COMMUNITY LEADERS TO HELP MAKE

OUR COUNTRY A MORE JUST, FAIR, AND EQUITABLE PLACE TO LIVE, WORK, AND

RAISE FAMILIES. IT FOCUSES ON SUPPORTING INNOVATIVE SOCIAL

ENTREPRENEURSHIP, EDUCATIONAL INITIATIVES, AND ADVOCACY CAMPAIGNS THAT

LIFT UP COMMUNITIES AND CREATE REAL AND LASTING CHANGE.

FORM 990, PART III, LINE 3, CHANGES IN PROGRAM SERVICES:

DURING THE 2021 TAX YEAR, NORTH FUND DID NOT CONDUCT ANY "CAPACITY

BUILDING" PROGRAM ACTIVITY.

FORM 990, PART VI, SECTION A, LINE 3:

THE NORTH FUND CONTRACTS WITH ARABELLA ADVISORS, A COMPANY WITH EXPERTISE

IN PHILANTHROPY AND NONPROFIT MANAGEMENT, TO PROVIDE ADMINISTRATIVE

SUPPORT, ACCOUNTING SERVICES, AND LEGAL GUIDANCE RELATED TO THE FUND'S

GRANTMAKING AND OPERATIONS.

FORM 990, PART VI, SECTION A, LINE 8B:

THE ORGANIZATION DID NOT HAVE SEPARATE COMMITTEES IN 2021. ACCORDINGLY,

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule O (Form 990) 2021

Schedule O (Form 990) 2021 Page 2

Name of the organization NORTH FUND

Employer identification number 83-4011547

FORM 990, PART VI, SECTION A, LINE 8B HAS BEEN ANSWERED "NO".

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

THE FORM 990 IS PREPARED BY AN INDEPENDENT TAX ACCOUNTANT AND REVIEWED BY

THE ORGANIZATION'S LEGAL COUNSEL AND BOARD OF DIRECTORS PRIOR TO FILING

WITH THE INTERNAL REVENUE SERVICE.

FORM 990, PART V, LINE 2A / FORM 990, PART VII, SECTION A:

NEW VENTURE FUND (AN UNAFFILIATED ORGANIZATION EXEMPT FROM TAX UNDER

IRC SECTION 501(C)(3)) IS A PAYROLL REPORTING AGENT FOR NORTH FUND

UNDER THE IRS COMMON PAYMASTER RULES. UNDER THE ARRANGEMENT, NORTH

FUND REIMBURSES NEW VENTURE FUND FOR ITS ALLOCATED SHARE OF SALARIES

AND BENEFITS.

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

ALL BOARD MEMBERS ARE REQUIRED TO DISCLOSE CONFLICTS OF INTEREST. THE

POLICY IS MONITORED AT THE BOARD LEVEL. COVERED INDIVIDUALS CANNOT VOTE ON

MATTERS BEFORE THE BOARD WHEN THEY HAVE A CONFLICT IN THE MATTER.

DISINTERESTED MEMBERS MUST DETERMINE WHETHER OR NOT THERE ARE ANY SUITABLE

ALTERNATIVES TO POTENTIAL TRANSACTIONS THAT CAUSE CONFLICT. IF A COVERED

PERSON IS FOUND IN VIOLATION OF THIS POLICY, IT MAY BE CAUSE FOR REMOVAL

FROM THE BOARD OF DIRECTORS.

FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990:

AL, AR, CA, CT, DC, FL, GA, HI, ID, IL, KS, KY, MA, MD, ME, MI, MN, MS, NC, ND, NH, NJ, NM, NY, OK

OR, PA, RI, SC, TN, UT, VA, WI, WV

Schedule O (Form 990) 2021	Page 2
Name of the organization NORTH FUND	Employer identification number 83-4011547
FORM 990, PART VI, SECTION C, LINE 19:	
THE ORGANIZATION'S GOVERNING DOCUMENTS, CONFLICT OF INTERE	ST POLICY, AND
FINANCIAL STATEMENTS ARE CURRENTLY NOT MADE AVAILABLE TO T	HE PUBLIC.