Form **990**

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

benefit trust or private foundation)

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

OMB No. 1545-0047

2012

Open to Public Inspection

AF	or the	e 2012 calendar year, or tax year beginning an	ia enaing		
B (Check if applicable	C Name of organization		D Employer identifi	cation number
X	Addres	THE CLEAR FUND			
	Name change	Doing Business As GIVEWELL		20-8	625442
	Initial return	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite		
	Termir ated	102 HOWARD SIREEI	#208	646-	233-2035
	Amend	City, town, or post office, state, and ZIP code		G Gross receipts \$	2,569,398.
	Applic tion pendir	SAN FRANCISCO, CA 94105		H(a) Is this a group re	
	perion	F Name and address of principal officer: HOLDEN KARNOFSKY		for affiliates?	Yes X No
		182 HOWARD STREET #208, SAN FRANCISCO		H(b) Are all affiliates inc	cluded? Yes No
		empt status: X 501(c)(3) 501(c) ()	1) or 527	⊣ ′	list. (see instructions)
		e: WWW.GIVEWELL.ORG		H(c) Group exemptio	
		organization: X Corporation Trust Association Other	∟ Year	of formation: 2007	State of legal domicile: NY
Pa	art I	Summary	21 E 1 D		
9	1	Briefly describe the organization's mission or most significant activities: THE	CLEAR	FUND (AKA G	TARMETT)
Activities & Governance	1 .	FINDS OUTSTANDING GIVING OPPORTUNITIES			
er		Check this box if the organization discontinued its operations or disp			
9				3	7
∞ ∞		Number of independent voting members of the governing body (Part VI, line 1b			10
ţį		Total number of individuals employed in calendar year 2012 (Part V, line 2a)		_	0
ξį	1	Total number of volunteers (estimate if necessary)			0.
Ä	1	Total unrelated business revenue from Part VIII, column (C), line 12			0.
	b	Net unrelated business taxable income from Form 990-T, line 34		Prior Year	Current Year
	8	Contributions and grants (Part VIII, line 1h)		1,348,341.	2,496,559.
Revenue		Program service revenue (Part VIII, line 2g)		0.	0.
š		Investment income (Part VIII, column (A), lines 3, 4, and 7d)		2,498.	I .
æ	1	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		-4,555.	
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		1,346,284.	
	_	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		659,188.	1,740,316.
	1	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
ý		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10		289,142.	461,711.
Expenses		Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.
ф	b	Total fundraising expenses (Part IX, column (D), line 25)	448.		
ш	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		81,105.	
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		1,029,435.	2,300,254.
		Revenue less expenses. Subtract line 18 from line 12		316,849.	198,594.
ces			В	eginning of Current Year	End of Year
Net Assets or Fund Balances	20	Total assets (Part X, line 16)		1,434,214.	2,371,475.
t As	21	Total liabilities (Part X, line 26)		595,332.	1,333,687.
		Net assets or fund balances. Subtract line 21 from line 20		838,882.	1,037,788.
	art II	Signature Block			
	-	lties of perjury, I declare that I have examined this return, including accompanying schedu			y knowledge and belief, it is
true	, correc	t, and complete. Declaration of preparer (other than officer) is based on all information of	which prepare	r has any knowledge.	
		Signature of officer		 Date	
Sig			mon.	Date	
Her	е	HOLDEN KARNOFSKY, CO-EXECUTIVE DIRECTIVE Type or print name and title	TOR		
				Date Check	PTIN
De:	d	Print/Type preparer's name Preparer's signature GUS SALIBA GUS SALIBA		OHOOK L	
Paid				07/09/13 if self-employ	P01243493 06-1671819
-	parer Only			Firm's EIN	00-10/1019
USE	Unity	Firm's address 156 WEST 56TH STREET STE 1804 NEW YORK, NY 10019		Dhone no 2	12-957-3600
N/-:	, th = !"			Phone no. 2	
ivia	y me il	RS discuss this return with the preparer shown above? (see instructions)			Yes I No

Pa	rt III Statement of Program Service Accomplishments	
	Check if Schedule O contains a response to any question in this Part III	<u></u>
1	Briefly describe the organization's mission:	TENTER
	THE CLEAR FUND (AKA GIVEWELL) FINDS OUTSTANDING GIVING OPPORTUNAND PUBLISHES THE FULL DETAILS OF OUR ANALYSIS TO HELP DONORS I	
	WHERE TO GIVE.	ECIDE
	WHERE TO GIVE:	
2	Did the organization undertake any significant program services during the year which were not listed on	
_	the prior Form 990 or 990-EZ?	Yes X No
	If "Yes." describe these new services on Schedule O.	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	Yes X No
	If "Yes," describe these changes on Schedule O.	
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by	expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total ex	
	revenue, if any, for each program service reported.	
4a	(Code:) (Expenses \$2, 159, 637. including grants of \$1, 740, 316.) (Revenue \$2,	496,559.)
	PUBLISHED UPDATES ON TOP CHARITIES AND FURTHER INVESTIGATED THE	
	PROGRAMS THEY WORK ON. CONDUCTED IN-DEPTH REVIEW OF GIVEDIRECTI	
	ADDED IT TO TOP CHARITIES. EXPANDED RESEARCH ON INTERNATIONAL A	
	PARTICULARLY IMMUNIZATION, CASH TRANSFERS, AND NUTRITION. BEGAN	
	NEW CAUSE AREAS BY INVESTIGATING THE CAUSE OF META-RESEARCH AND WITH GOOD VENTURES TO CO-FUND A PROJECT WITH THE GATES FOUNDATI	
	TRACKED OVER \$9.5 MILLION IN DONATIONS TO TOP CHARITIES MADE AS	
	RESULT OF OUR RESEARCH.	, A
	REBULL OF OUR REPRINCES.	
4b	(Code:) (Expenses \$ including grants of \$) (Revenue \$	
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$	
	, (a.total	
	Other presumes any inco (Decaribe in Cabadula C.)	
4d	Other program services (Describe in Schedule O.)	1
40	(Expenses \$\frac{\text{including grants of \$\text{\$}}{\text{\$}}}{\text{\$}}) (Revenue \$\text{\$}} Total program service expenses \$\text{\$}\$ 2,159,637.	<u>)</u>
- 10	1000 pt agrain out the experience - 1 - 2 - 1 - 2 - 1	Form 990 (2012)

232002 12-10-12

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	х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
Ū	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		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		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		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		Х
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		Х
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		Х
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		Х
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		Х
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	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete		v	
	Schedule D, Parts XI and XII	12a	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?	461		Х
40	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
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		
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			
	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 assistance to any organization	140		
	or entity located outside the United States? 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 assistance to individuals	.,		
. •	located outside the United States? 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,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			v
00	complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Part IV Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the			
	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	X	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? <i>If</i> "Yes," <i>complete Schedule J</i>	23		Х
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No", go to line 25	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a			
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
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? If "Yes," complete			7.7
	Schedule L, Part I	25b		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified			v
07	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV	21		
20	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		Х
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		Х
	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		Х
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		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations?			V
	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		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			37
	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		Х
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
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	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			7,7
	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			v
00	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 in Schedule O for Part VI, lines 11b and 19?	38	х	
	Note. All Form 990 filers are required to complete Schedule O	JÖ	47	

Form 990 (40	0023442	Page
Part V	Statements Regarding Other IRS Filings and Tax Compliance			

	Check if Schedule O contains a response to any question in this Part V				
				Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	2			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b	0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable ga	ming			
	(gambling) winnings to prize winners?		1c	Х	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,	Г			
	filed for the calendar year ending with or within the year covered by this return 2a	10			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?		2b	Х	
	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?	<u></u>	3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O		3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over	er, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	<u>_</u>	4a		Х
b	If "Yes," enter the name of the foreign country: ►				
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.				
5а	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	<u></u>	5a		Х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	<u></u>	5b		X
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	<u></u>	5с		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization	on solicit			
	any contributions that were not tax deductible as charitable contributions?		6a		Х
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts				
	were not tax deductible?		6b		
7	Organizations that may receive deductible contributions under section 170(c).				
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provide	-	7a		X
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?		7с		Х
d	If "Yes," indicate the number of Forms 8282 filed during the year	-			77
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		7e		X
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		7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Fo		7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization are advised fund maintained by a proporting organization, have expended the desired of the supporting organization.				
•	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during	ig the year?	8		
9	Sponsoring organizations maintaining donor advised funds.		00		
a	Did the organization make any taxable distributions under section 4966? Did the organization make a distribution to a donor, donor advisor, or related person?		9a oh		
10	Section 501(c)(7) organizations. Enter:		9b		
а	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				
b	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	1			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.				
	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				
С	Enter the amount of reserves on hand 13c				
14a	Did the organization receive any payments for indoor tanning services during the tax year?		14a		Х
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O		14b		
			Form	aan	(2012)

	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.			
	Check if Schedule O contains a response to any question in this Part VI	<u></u>		X
sec	tion A. Governing Body and Management			·
4.			Yes	No
ıa	Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing	4		
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent	;		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other	1		
2	officer, director, trustee, or key employee?	2		Х
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
3	of officers, directors, or trustees, or key employees to a management company or other person?	3		х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	Х	
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6	Did the organization have members or stockholders?	6		Х
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or	<u> </u>		
	more members of the governing body?	7a		х
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
-	persons other than the governing body?	7b		х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
	The governing body?	8a	Х	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		Х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	in Schedule O how this was done	12c	X	
13	Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?	14	Х	
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
	The organization's CEO, Executive Director, or top management official	15a	X	
b	Other officers or key employees of the organization	15b	Х	
46	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			3,7
	taxable entity during the year?	16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
200	exempt status with respect to such arrangements?	16b		
	tion C. Disclosure			
17 10	List the states with which a copy of this Form 990 is required to be filed NY Section 6104 requires an experiention to make its Forms 1003 (or 1004 if applicable) 2000 and 200 T (Section 501(a)(2)a applicable)	0.40!1-1	ula.	
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) for public inspection, Indicate how you made these available. Check all that apply	avallat	ие	
	for public inspection. Indicate how you made these available. Check all that apply. X Own website X Upon request Other (explain in Schedule O)			
10		d fine:	ooic!	
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, are statements available to the public during the tax year.	iu iinal	icial	
20	statements available to the public during the tax year. State the name, physical address, and telephone number of the person who possesses the books and records of the organization.	tion:		
20	NATALIE STONE CRISPIN - 646-233-2035	LIOII.		
	182 HOWARD STREET, #208, SAN FRANCISCO, CA 94105			

Form **990** (2012)

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

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

Check this box if neither the organization n		orga					nsat			
(A)	(B)			(C Pos	C)			(D)	(E)	(F)
Name and Title	Average		not c	heck	more	than		Reportable	Reportable	Estimated
	hours per	box offi	, unle cer an	ss pe	rson irecto	is bot or/trus	h an	compensation	compensation	amount of
	week		T				, 	from the	from related	other
	(list any hours for	or director				_		organization	organizations (W-2/1099-MISC)	compensation from the
	related	3e or (stee			nsate		(W-2/1099-MISC)	(** 2) 1000 (***100)	organization
	organizations	Individual trustee	Institutional trustee		yee	Highest compensated employee		(** = / ********************************		and related
	below	idual	ution	in 1	Key employee	est co oyee	ъ			organizations
	line)	Indiv	Instii	Officer	Key	High	Former			
(1) HOLDEN KARNOFSKY	60.00									
CO-EXECUTIVE DIRECTOR AND BOARD SECR		Х		Х				82,500.	0.	4,755.
(2) ELIE HASSENFELD	60.00							00 500		0 111
CO-EXECUTIVE DIRECTOR AND BOARD MEMB	0.50	Х		Х				82,500.	0.	2,114.
(3) GREG JENSEN	0.50								•	•
BOARD MEMBER	1 00	Х						0.	0.	0.
(4) TIM OGDEN	1.00	,,		,,					0	0
BOARD VICE-CHAIR	1 00	Х		Х				0.	0.	0.
(5) TOM RUTLEDGE	1.00	٦,		٦,					0	0
BOARD CHAIR	1 00	Х		Х				0.	0.	0.
(6) CARI TUNA	1.00	٦,		7,7					0	0
BOARD TREASURER	0 50	Х		Х		<u> </u>		0.	0.	0.
(7) PHIL STEINMEYER	0.50	x							0	0
BOARD MEMBER		_						0.	0.	0.
					_					

Part VII Section A. Officers, Directors, Tru	(B)	pioy	ees	, and (C		упе	si C					/E\	
(A) Name and title	Average			Pos	itior	1		(D) Reportable	(E) Reportable			(F) timate	Ч
Name and title	hours per		not c	heck	more	than		compensation	compensatio			nount o	
	week					or/trus		from	from related			other	
	(list any	ctor						the	organization	s	com	pensat	tion
	hours for	or director				ted		organization	(W-2/1099-MIS	SC)	fr	om the	÷
	related	stee c	ruste			pensa		(W-2/1099-MISC)			_	anizati	
	organizations below	ıal tru	onalt		employee	co m						d relate	
	line)	Individual trustee	Institutional trustee	Officer	y emp	Highest compensated employee	Former				orga	anizatio	ns
		드	드	j0	Key	포 등	윤						
					_								
h. Cub Askal						Ļ		165,000.		0.		6,80	<u>. a</u>
b Sub-total c Total from continuation sheets to Part \								0.		0.		0,0	0.
d Total (add lines 1b and 1c)								165,000.		0.		6,80	•
Total number of individuals (including but							no r		.000 of reportab	_		-,-	
compensation from the organization						,		·	, ,			v	(
Did the organization list any former office	director or tr	ıcto	o ko	or	mple		٥٢	highest compensated o	mplayoo on			Yes	No
line 1a? If "Yes," complete Schedule J for											3		Х
For any individual listed on line 1a, is the s								har componentian from	the ergonization		3		
and related organizations greater than \$15	•							•	the organization		4		Х
Did any person listed on line 1a receive or									dual for services		4		
rendered to the organization? If "Yes," con	•				-			_			5		Х
ction B. Independent Contractors				,								ı	
Complete this table for your five highest c										npens	ation f	rom	
the organization. Report compensation fo	r the calendar y	ear	endi	ng v	vith	or w	ithir I		/ear.		10	*1	
(A) Name and busines	s address	NO	ONE	3				(B) Description of s	ervices	C	Ompe	/) nsatior	1
							\dashv						
Total number of independent contractors \$100,000 of compensation from the organ		ot li	mite	d to		se li: 0	stec	d above) who received m	ore than				
											Form	990 (2	012

232008 12-10-12

Par	ιV	1111	Statement of Reven Check if Schedule O conta		to any question	in this Part VIII			
			GRISON II GGRISONIO G GOTINO	anis a response	to any quostion	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512, 513, or 514
nts	1	а	Federated campaigns	1a					
<u>8</u> =		b	Membership dues	1b					
Am (Fundraising events						
틀림			Related organizations						
i,ŭ			Government grants (contribution						
is Si		f	All other contributions, gifts, grants	s, and					
			similar amounts not included abov	re 1f 2,	496,559.				
a de la			Noncash contributions included in lines	1a-1f: \$	496,559. 73,170.				
Contributions, Gifts, Grants and Other Similar Amounts		h	Total. Add lines 1a-1f			2,496,559.			
					Business Code				
<u>و</u>	2	а		Ĭ					
Program Service Revenue		b		-					
S ă		С							
e a l		d		_					
P. S.		е							
<u>,</u>			All other program service rever	nue					
			Total. Add lines 2a-2f		•				
	3		Investment income (including of						
	_		other similar amounts)	,		1,970.			1,970.
	4		Income from investment of tax			, -			,
	5		Royalties		-				
	Ŭ		Tioyanico	(i) Real	(ii) Personal				
	6	2	Gross rents	(i) Ficul	(ii) i crooriai				
			Gross rents Less: rental expenses						
			Rental income or (loss)						
			Net rental income or (loss)						
			The state of the s						
	′	а	Gross amount from sales of	(i) Securities 70,569.	(ii) Other				
		L-	assets other than inventory	10,303.					
		D	Less: cost or other basis	70,550.					
		_	and sales expenses						
			Gain or (loss)			19.	19.		
			Net gain or (loss)			19.	19.		
e l	8	а	Gross income from fundraising						
e l			including \$						
Other Revenue			contributions reported on line	-					
ē			Part IV, line 18						
₹∣			Less: direct expenses						
			Net income or (loss) from fund	-					
	9	а	Gross income from gaming act						
			Part IV, line 19						
			Less: direct expenses						
			Net income or (loss) from gami	_					
	10	а	Gross sales of inventory, less r						
			and allowances						
			Less: cost of goods sold						
F		С	Net income or (loss) from sales						
F			Miscellaneous Revenue	Э	Business Code	200			200
			OTHER INCOME		900099	300.			300.
		b							-
- 1		С							-
		d	All other revenue			200			
		d	All other revenue Total. Add lines 11a-11d Total revenue. See instructions.			300. 2,498,848.	19.	0 .	2,270.

Part IX | Statement of Functional Expenses

Check if Schedule O contains a response to any question in the Part IX Check Schedule O contains and response in first 65 Total Appenses Program service Management and properties Program service Program ser		ion 501(c)(3) and 501(c)(4) organizations must comp		er organizations must co	molete column (A)	
Do not include amounts reported on lines 6, Total expenses Programs service Menagement and general expensions Programs service Programs service Menagement and general expensions Programs service Programs	Jecil				mpiete columni (A).	
1,693,297. 1,6			se to any question in thi	(B)	(C)	(D)
Grants and other assistance to powerments and organizations in the limited States. See Part IV, line 22 1,693,297. 1		, , , , , , , , , , , , , , , , , , , ,	Total expenses	Program service	Managèment and	Fundraising
organizations in the United States. See Part IV, line 21 Clarants and other assistance to individuals in the United States. See Part IV, line 22 Clarants and other assistance to individuals in the United States. See Part IV, line 22 Construction, and individuals outside the United States. See Part IV, line 15 and 16 Compensation of current officers, directors, trustees, and key employees Compensation of current officers, directors, trustees, and key employees Compensation of current officers, directors, trustees, and key employees Compensation of included above, to disqualitied pressors (as defined under section 4958(x)3)(8) Persons described in section 4958(x)3)(8) Person described in 4958(x)3)(8) Person de				ехрепзез	general expenses	ехрепзез
2 Grants and other assistance to individuals in the United States. See Part IV, line 22 Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, line 17 Grants and the section 458(R) (1) and persons described in section 458(R) (3) employer contributions) 7 Other enablese and wages 8 Pession plan acruals and contributions (include section 401(R) and 403(R) employer contributions) 9 Other employee benefits 1 Fess for services (non-employees): 9 All the provided of the section 401(R) and 403(R) employer contributions) 1 Cancounting 1 Legal 1 Cancounting 1 Ca	'	_	1 693 297	1 693 297		
the United States. See Part IV, line 22 Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees Compensation of united states, to designate the persons (as Seeffeed under section 4956(IV)) and persons described in section 4956(IV) and persons described in section 4956(IV) and persons described in section 4956(IV) and apersons described in section 4956(IV) and apersons described in section 4956(IV) and days are provided to the person of the person of IV, and 403(IV) employer contributions (include section 4916(IV) and 403(IV) employer contributions) 9 Other employee benefits 26 2.990. 21,294. 4,469. 527 10 Payroll taxes 31,818. 25,455. 5,727. 636 11 Fees for services (non-employees): a Management b Legal c Accounting d Lobbying Professional fundiasing services. See Part IV, line 17 f Investment management fees 9 Other, (III) for a mount exceeds 10% of line 25, 200 and 10, 250. 3,750. 6,500. 20 Advertising and promotion 5 9 Other, (III) for a mount exceeds 10% of line 25, 200 and 10, 250. 3,750. 6,500. 21 Advertising and promotion 5 9 Other, (III) for a mount exceeds 10% of line 25, 200 and 11, 200 and 20	2	_ · · _ F	1703372374	1,033,137,		
3 Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16 4 Benefits paid to or for members 5 Compensation of current officers, directors, trustees, and key employees 6 Compensation of included above, to disqualified persons (as defined under section 4958(ft(1)) and persons described in section 4958(ft(1)) and (and (and in)) and (and in)) and (and (and in)) and (and (and in)) and (and in)) and (and in) and (and in) and (and in) and (and in) and (and in)) and (and in) and (2					
organizations, and individuals outside the United States. See Part IV, lines 15 and 16. 4 Berrelits paid to or for members. 5 Compensation of current officers, directors, trustees, and key employees for any feeding that seems of the seem	2					
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4 Benefits paid to or for members 5 Compensation of current officers, directors, trustees, and key employees 6 Compensation not included above, to disqualified persons (as defined under section 4958((x)1) and persons described in section 4958((x)1) and persons described in section 4958((x)1) and approximate part of the persons of the definition of minute persons described in section 4918(x) and 490(x) employer contributions (include section 401(x) and 490(x)) employer contributions (include section 401(x) and 490(x)) employer contributions (include section 401(x) and 400(x)) employer contributions (include section 401(x) and 401(•	47 019	47 019		
171,868 129,086 36,754 6,028	4	· · · · · · · · · · · · · · · · · · ·	47,013.	47,013.		
171,868. 129,086. 36,754. 6,028		_				
6 Compensation not included above, to disqualitied persons (as defined under section 4986(r)(3)(8) 7 Other salaries and wages 8 Pensison plan accusals and contributions (include section 401(k) and 403(b) employer contributions) 9 Other employee benefits 10 Payrolit taxes 11 Fees for services (non-employees): 12 Management 13 Legal 14 Lebysing 15 Pensison planting services. See Part IV, line 17 Investment management research 16 Legal 17 Investment management research 18 Other, (If line 11g amount exceeds 198 of line 25, outnum (A) amount, list line 11g expenses on School on Spatial Individuals of the Coupancy 16 Royalties 17 Travel 18 Payments of travel or entertainment expenses for any detrail, state, or local public officials 19 Conferences, conventions, and meetings 20 Interest 21 Payments to affiliates 22 Depreciation, depletion, and amortization insurance above, and amount exceeds 19% of line 25, column (A) amount, list line 24e expenses on Schedule (O) 24 Payments to affiliates 25 Depreciation, depletion, and amortization insurance above, in the 26, time 24 expenses on Schedule (O) 26 Paymants 27 Payments to affiliates 28 Depreciation, depletion, and amortization insurance above, in the 26, time 24 expenses on Schedule (O) 28 BANK AND PROCESSING FEE PUBLIC WEBSITE 11, 322 , 9,517 , 747 , 1,058 28 Total functional expenses on Schedule (O) 38 BANK AND PROCESSING FEE PUBLIC WEBSITE 11,322 , 9,517 , 747 , 1,058 36 PUBLIC WEBSITE 11,322 , 9,517 , 747 , 1,058 37	5		171 868	129 086	36 754	6 028
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persons described in section 4958(c)(3)(8) 7 Other salaries and wages 8 Pension plan accruals and contributions (include section 401(k) and 403(t) employer contributions) 9 Other employee benefits 126, 290. 21, 294. 4, 469. 527 10 Payroll taxes 11 Fees for services (non-employees): 12 Management 13 Legal 14 Lobbying 15 Professional fundrishing services. See Part IV, line 17 Investment management tees 15 Coultrum (1, a) mount exceeds 01% of line 25, column (1, a) mount exceeds 10% of line 25, column (1, a) mount exceeds 10% of line 25, column (2, a) mount extine 11g penesson son Son 0.0 12 Advertising and promotion 15 Payronet of travel or entertainment expenses for any federal, state, or local public officials 16 Payments of travel or entertainment expenses for any federal, state, or local public officials 17 Travel 18 Payments of a filliates 19 Conferences, conventions, and meetings interest 21 Payments to a filliates 22 Depreciation, depletion, and amortization insurance above. List ine 24e expenses on Schedule 0.) 28 BANK AND PROCESSING FEE 29 Depreciation, depletion, and amortization insurance (2, 2, 233. 2, 233. 2) 29 Total functional expenses on Schedule 0.) 28 BANK AND PROCESSING FEE 29 DELIC WEBSITE 11, 322. 9, 517. 747. 1,058 29 Copt Marke 756. 20. 736	6					
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10 Payroll taxes	_		26 200	21 204	4 460	F 2 7
11 Fees for services (non-employees): a Management b Legal c Accounting d Lobbying Professional fundraising services. See Part IV, line 17 f Investment management fees g Other, (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Sch 0.) 12 Advertising and promotion 15 Agvatties 15 Royatties 16 Occupancy 17 Travel 17 Travel 17 Travel 17 Travel 17 Travel 17 Travel 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings 11 Payments to affiliates 12 Depreciation, depletion, and amortization 18 Payments to affiliates 19 Conferences, conventions, and meetings 20 Interest 21 Payments to affiliates 22 Depreciation, depletion, and amortization 23 Insurance 24 Other expenses Interest expenses in line 24e, I line 24e amount, list line 24e expenses son Schedule 0.) 28 BANK AND PROCESSING FEE 29 DUBLIC WEBSITE 20 Interest 21 DUES AND SUBSCRIPTIONS 20 All other expenses 21 Interest 22 Depreciation, depletion, and amortization 23 Insurance 24 Other expenses on Schedule 0.) 25 Total functional expenses Add lines 1 through 24e 26 Joint costs. Complete this line only if the organization reported in column (8) point costs from a combined educational campalgn and fundraising solicitation. Creact new page 1 Int 1 Interest 2 Interes						547
a Management b Legal c Accounting d Lobbying e Professional fundraising services. See Part IV, line 17 f Investment management fees g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch 0.) 12 Advertising and promotion 13 Office expenses 15, 333, 3, 225, 2, 097, 11 Information technology 16 Occupancy 17 Travel 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings 10 Interest 21 Payments to affiliates 22 Depreciation, depletion, and amortization 23 Insurance 24 Other expenses in line 24e, if line 24e amount exceeds replied. Schooling of the Schoo	10		31,818.	∠5,455.	5,727.	636.
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14 Information technology 15 Royalties 16 Occupancy 12,061. 9,770. 2,050. 241 17 Travel 17,490. 13,003. 4,024. 463 18 Payments of travel or entertainment expenses for any federal, state, or local public officials Conferences, conventions, and meetings 19 Conferences, conventions, and meetings	13	Office expenses	5,333.	3,225.	2,097.	11.
15 Royalties 16 Occupancy 12,061. 9,770. 2,050. 241 17 Travel 17 Travel 17,490. 13,003. 4,024. 463 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings 19 Interest 20 Interest 21 Payments to affiliates 22 Depreciation, depletion, and amortization 23 Insurance 24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount, list line 24e expenses on Schedule O.) 2 BANK AND PROCESSING FEE 11,610. 10,381. 1,229. 10 DUES AND SUBSCRIPTIONS 2 C SOFTWARE 7756. 20. 736. 11,058 2 DUES AND SUBSCRIPTIONS 2 All other expenses 2 Total functional expenses. Add lines 1 through 24e 2,300,254. 2,159,637. 128,169. 12,448 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 in following SOP 98-2 (ASC 958-720)	14					
16 Occupancy 12,061. 9,770. 2,050. 241 17 Travel 17,490. 13,003. 4,024. 463 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings 19 Interest 21 Payments to affiliates 20 Depreciation, depletion, and amortization Insurance 22 Depreciation, depletion, and amortization 24 amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.) a BANK AND PROCESSING FEE b PUBLIC WEBSITE 11,610. 10,381. 1,229. b PUBLIC WEBSITE 756. 20. 736. d DUES AND SUBSCRIPTIONS 357. 180. 177. e All other expenses Add lines 1 through 24e 2,300,254. 2,159,637. 128,169. 12,448 25 Total functional expenses. Add lines 1 through 24e 2,300,254. 2,159,637. 128,169. 12,448 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 in following SOP 98-2 (ASC 958-720)	15					
17 Travel	16					241.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings Interest Inter	17	Traval	17,490.	13,003.	4,024.	463.
for any federal, state, or local public officials Conferences, conventions, and meetings Interest Payments to affiliates Depreciation, depletion, and amortization Insurance Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.) BANK AND PROCESSING FEE DUBLIC WEBSITE SOFTWARE DUES AND SUBSCRIPTIONS All other expenses. Add lines 1 through 24e 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)	18					
19 Conferences, conventions, and meetings 20 Interest 21 Payments to affiliates 22 Depreciation, depletion, and amortization 23 Insurance 24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.) a BANK AND PROCESSING FEE b PUBLIC WEBSITE b PUBLIC WEBSITE c SOFTWARE d DUES AND SUBSCRIPTIONS e All other expenses 756. 20. 736. d DUES AND SUBSCRIPTIONS e All other expenses 9,293. 115. 9,178. 21,233. 2,233. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3.						
20 Interest 21 Payments to affiliates 22 Depreciation, depletion, and amortization 23 Insurance 24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount, list line 24e expenses on Schedule 0.) a BANK AND PROCESSING FEE b PUBLIC WEBSITE b PUBLIC WEBSITE c SOFTWARE d DUES AND SUBSCRIPTIONS e All other expenses 756. 20. 736. dl other expenses 9,293. 115. 9,178. 2,300,254. 2,159,637. 128,169. 12,448 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)	19					
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DUBLIC WEBSITE 11,322. 9,517. 747. 1,058 756. 20. 736. 736. 756. 20. 20. 736. 756. 20. 20. 736. 756. 20. 20. 20. 20. 20. 20. 20. 20. 20. 20	а		11.610.	10.381.	1.229.	
C SOFTWARE DUES AND SUBSCRIPTIONS All other expenses Total functional expenses. Add lines 1 through 24e 25 Total functional expenses. Add lines 1 through 24e 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 (a) Total functional expenses. Add lines 1 through 24e 27 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 (b) I following SOP 98-2 (ASC 958-720)					-	1.058.
DUES AND SUBSCRIPTIONS All other expenses Total functional expenses. Add lines 1 through 24e Dint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here	_				1	_,
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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)		· -				12 448
reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720)			2,500,254.	2,23,037.	220,200	10,110
educational campaign and fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720)	20					
Check here if following SOP 98-2 (ASC 958-720)		, , ,				
		. —				
						Form 990 (2012)

Form 990 (2012)
Part X Balance Sheet

Pa	rt X	Balance Sheet			
		Check if Schedule O contains a response to any question in this Part X			
			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	1,026,130.	1	1,663,761.
	2	Savings and temporary cash investments	397,107.	2	675,013.
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	
	5	Loans and other receivables from current and former officers, directors,			
		trustees, key employees, and highest compensated employees. Complete			
		Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under			
		section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			
		employers and sponsoring organizations of section 501(c)(9) voluntary			
		employees' beneficiary organizations (see instr). Complete Part II of Sch L		6	
ets	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use		8	
_	9	Prepaid expenses and deferred charges	3,486.	9	2,756.
	10a	Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D 10a			
	b			10c	
	11	Investments - publicly traded securities	7,491.	11	29,945.
	12	Investments - other securities. See Part IV, line 11		12	
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)	1,434,214.	16	2,371,475.
	17	Accounts payable and accrued expenses	7,699.	17	2,371,475. 6,313.
	18	Grants payable	587,633.	18	1,327,374.
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
Se	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
Liabilities	22	Loans and other payables to current and former officers, directors, trustees,			
ap		key employees, highest compensated employees, and disqualified persons.			
_		Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part X of			
		Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	595,332.	26	1,333,687.
		Organizations that follow SFAS 117 (ASC 958), check here ▶ X and			
es		complete lines 27 through 29, and lines 33 and 34.	BB4 60B		1 000 000
anc	27	Unrestricted net assets	771,687.	27	1,037,788.
Bal	28	Temporarily restricted net assets	67,195.	28	0.
pu	29	Permanently restricted net assets		29	
Ŀ		Organizations that do not follow SFAS 117 (ASC 958), check here ▶└─			
s or		and complete lines 30 through 34.			
sets	30	Capital stock or trust principal, or current funds		30	
As	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated income, or other funds	020 000	32	1 000 000
~	33	Total net assets or fund balances	838,882.	33	1,037,788.
	34	Total liabilities and net assets/fund balances	1,434,214.	34	2,371,475.

Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response to any question in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	2,49		
2	Total expenses (must equal Part IX, column (A), line 25)	2	2,30		
3	Revenue less expenses. Subtract line 2 from line 1	3			94.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	83		82.
5	Net unrealized gains (losses) on investments	5		3	12.
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10	1,03	7,7	88.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Cother				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewe	d 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?		2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separa	te basis,			
	consolidated basis, or both:				
	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	e audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Audit			
	Act and OMB Circular A-133?		3a		Х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ				
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		

SCHEDULE A

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

Public Charity Status and Public Support

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

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

Employer identification number THE CLEAR FUND 20-8625442 Reason for Public Charity Status (All organizations must complete this part.) See instructions. Part I The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name. 4 city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h. d Type III - Non-functionally integrated **b** Type II c Type III - Functionally integrated By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below. Yes Nο the governing body of the supported organization? 11g(i) (ii) A family member of a person described in (i) above? 11g(ii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? Provide the following information about the supported organization(s). h (vi) Is the (iv) Is the organization (v) Did you notify the (vii) Amount of monetary (i) Name of supported (ii) EIN (iii) Type of organization organization in col. in col. (i) listed in your organization in col. (described on lines 1-9 organization support (i) organized in the aovernina document? (i) of your support? above or IRC section U.S.? (see instructions)) Yes No Yes Yes No

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

Schedule A (Form 990 or 990-EZ) 2012

Total

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

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

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions, and	, ,	, ,	, ,	, ,	, ,	, ,
	membership fees received. (Do not						
	include any "unusual grants.")	734,480.	367,792.	366,093.	1345838.	2496559.	5310762.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	734,480.	367,792.	366,093.	1345838.	2496559.	5310762.
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						220,695.
6	Public support. Subtract line 5 from line 4.						5090067.
Sec	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
7	Amounts from line 4	734,480.	367,792.	366,093.	1345838.	2496559.	5310762.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources		8,446.	2,877.	2,197.	2,601.	16,121.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part IV.)						
11	Total support. Add lines 7 through 10						5326883.
12	Gross receipts from related activities,	, etc. (see instruction	ons)			12	
13	First five years. If the Form 990 is for	r the organization's	first, second, thir	d, fourth, or fifth ta	ax year as a sectio	n 501(c)(3)	
	organization, check this box and stor	here					<u></u> ▶□
Sec	ction C. Computation of Publ	ic Support Pe	rcentage				
14	Public support percentage for 2012 (line 6, column (f) di	ivided by line 11, c	olumn (f))		14	95.55 %
15	Public support percentage from 2011	Schedule A, Part	II, line 14			15	%
16a	33 1/3% support test - 2012. If the o	organization did no	t check the box o	n line 13, and line	14 is 33 1/3% or n	nore, check this bo	
	stop here. The organization qualifies						
b	33 1/3% support test - 2011. If the	organization did no	t check a box on I	ine 13 or 16a, and	line 15 is 33 1/3%	or more, check th	nis box
	and stop here. The organization qual						
17a	10% -facts-and-circumstances tes	t - 2012. If the org	anization did not c	heck a box on line	e 13, 16a, or 16b, a	and line 14 is 10%	or more,
	and if the organization meets the "fac	cts-and-circumstan	ces" test, check th	nis box and stop h	ere. Explain in Par	t IV how the organ	ization
	meets the "facts-and-circumstances"	test. The organiza	tion qualifies as a	publicly supported	d organization		▶□
b	10% -facts-and-circumstances tes	t - 2011. If the org	anization did not c	heck a box on line	e 13, 16a, 16b, or	17a, and line 15 is	10% or
	more, and if the organization meets the	he "facts-and-circu	mstances" test, cl	neck this box and	stop here. Explain	in Part IV how the	
	organization meets the "facts-and-circ	cumstances" test.	The organization of	qualifies as a publi	cly supported orga	anization	▶∐
18	Private foundation. If the organization	on did not check a	box on line 13, 16	a, 16b, 17a, or 17b			
					Sobo	dule A (Form 990	or 000 E7\ 2012

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

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to

Sec	ction A. Public Support	now, please com	piete Part II.)				
	endar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
	Gifts, grants, contributions, and	(4) 2000	(5) 2000	(0) 2010	(4) 2011	(6) 2012	(i) rotar
•	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions,						
_	merchandise sold or services per-						
	formed, or facilities furnished in						
	any activity that is related to the						
2	organization's tax-exempt purpose Gross receipts from activities that						
3	are not an unrelated trade or bus-						
	in a						
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
78	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
k	Amounts included on lines 2 and 3 received						
	from other than disqualified persons that exceed the greater of \$5,000 or 1% of the						
	amount on line 13 for the year						
c	Add lines 7a and 7b						
	Public support (Subtract line 7c from line 6.)						
	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in) 🖊	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
9	Amounts from line 6						
10a	Gross income from interest,						
	dividends, payments received on securities loans, rents, royalties						
	and income from similar sources						
k	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included in line 10b,						
	whether or not the business is regularly carried on						
12	Other income. Do not include gain						
	or loss from the sale of capital						
12	assets (Explain in Part IV.)						
	Total support. (Add lines 9, 10c, 11, and 12.)	41	- 6:			504(-)(0)	.:
14	First five years. If the Form 990 is for	•			•	. , . ,	. —
Sec	check this box and stop here ction C. Computation of Publi						P
_	Public support percentage for 2012 (li			oolumn (f)\		15	%
						16	
	Public support percentage from 2011 ction D. Computation of Inves					10	%
	•					17	0/
	Investment income percentage for 20						%
	Investment income percentage from 2					18	% .17:
198	33 1/3% support tests - 2012. If the						
	more than 33 1/3%, check this box ar						
k	33 1/3% support tests - 2011. If the						
	line 18 is not more than 33 1/3%, che						
20	Private foundation. If the organization	n did not check a	box on line 14, 19	a, or 19b, check t	his box and see ir	nstructions	<u></u>

232023 12-04-12

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

► Attach to Form 990. ► See separate instructions.

OMB No. 1545-0047

2012
Open to Public Inspection

Name of the organization

THE CLEAR FIINT

Employer identification number

Pai	t I Organizations Maintaining Donor Advised	I Funds or Other Similar Funds	e or Accounts Complete if the
Fai			S of Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, line	(a) Donor advised funds	(b) Funds and other accounts
		(a) Donor advised funds	(b) I dilds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in w	_	
_	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	, , , , ,	
Pai			
			Part IV, line 7.
1	Purpose(s) of conservation easements held by the organizatio		
	Preservation of land for public use (e.g., recreation or ed	· 🖂	storically important land area
	Protection of natural habitat	Preservation of a cert	tified historic structure
_	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualified	ed conservation contribution in the form	of a conservation easement on the last
	day of the tax year.		Held shifts Find of the Ton Vers
			Held at the End of the Tax Year
а			
b	•		
C	Number of conservation easements on a certified historic structure of the conservation easements on a certified historic structure.		
d	Number of conservation easements included in (c) acquired af	•	
_	listed in the National Register		
3	Number of conservation easements modified, transferred, rele	eased, extinguished, or terminated by the	e organization during the tax
	year -		
4	Number of states where property subject to conservation ease		
5	Does the organization have a written policy regarding the period	- · · · · · · · · · · · · · · · · · · ·	
_	violations, and enforcement of the conservation easements it l		
6	Staff and volunteer hours devoted to monitoring, inspecting, a		
7	Amount of expenses incurred in monitoring, inspecting, and er		
8	Does each conservation easement reported on line 2(d) above	·	
_			
9	In Part XIII, describe how the organization reports conservation		
	include, if applicable, the text of the footnote to the organization	on's financial statements that describes	the organization's accounting for
Dai	t III Organizations Maintaining Collections of	Art Historical Treasures or C	Other Similar Assets
ı aı	Complete if the organization answered "Yes" to Form 9		diei olilliai Assets.
10	If the organization elected, as permitted under SFAS 116 (ASC		ment and balance about works of art
Ia			
	historical treasures, or other similar assets held for public exhill the text of the feetness to its financial statements that describe		ance of public service, provide, in Part XIII,
	the text of the footnote to its financial statements that describ		*
D	If the organization elected, as permitted under SFAS 116 (ASC		
	treasures, or other similar assets held for public exhibition, edu	ucation, or research in furtherance of pu	iblic service, provide the following amounts
	relating to these items:		Δ.
	(i) Revenues included in Form 990, Part VIII, line 1		
^		ourse or other similar assets for financia	
2	If the organization received or held works of art, historical treas		ai gairi, provide
_	the following amounts required to be reported under SFAS 110		Δ Φ
a	Revenues included in Form 990, Part VIII, line 1		· · · · · · · · · · · · · · · · · · ·
b	Assets included in Form 990, Part X		

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. 232051 12-10-12

Schedule D (Form 990) 2012

	t III Organizations Maintaining C		rt. Historical T	reasures. c	r Other	Similar			ued)
Ū	Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):								
а									
b	Scholarly research	e		crialige progra					
C	Preservation for future generations	e							
4	Provide a description of the organization's co	lloctions and ovalai	n how thoy further	the organization	on's ovomi	ot purposo	in Dart	VIII	
5	During the year, did the organization solicit or						IIIFait	AIII.	
3	to be sold to raise funds rather than to be ma							Yes	□ No
Pai	t IV Escrow and Custodial Arrang								L INC
. u.	reported an amount on Form 990, Par		ete ii tile organizat	ion answered	163 1010	Jilli 990, 1 e	,	16 3, 01	
	Is the organization an agent, trustee, custodi		liany for contribution	ons or other as	sets not in	cluded			
Iu	on Form 990, Part X?							Yes	
h	If "Yes," explain the arrangement in Part XIII						—	103	
D	Tres, explain the arrangement in rate xing	and complete the ro	nowing table.					Amount	
С	Beginning balance					1c		7 tiriodire	
	Additions during the year					\vdash			
u _	Distributions during the year					1e			
f	Ending balance					\vdash			
	Did the organization include an amount on Fo	orm 990 Part X line	212					Yes	□ No
	If "Yes," explain the arrangement in Part XIII.								
	t V Endowment Funds. Complete if								
		(a) Current year	(b) Prior year	(c) Two year			back	(e) Four	vears back
1a	Beginning of year balance	(2) 505	(b) Her year	(5)	1,2	, ,		(-)	,
b	Contributions								
c	Net investment earnings, gains, and losses								
d	Grants or scholarships								
e	Other expenditures for facilities								
_	and programs								
f	Administrative expenses								
g	End of year balance								
2	Provide the estimated percentage of the curr	ent vear end balanc	ce (line 1a. column	(a)) held as:					
a			%	(4))					
b	Permanent endowment	%	_^~						
	Temporarily restricted endowment	<u></u>							
_	The percentages in lines 2a, 2b, and 2c shou								
За	Are there endowment funds not in the posse	-	ation that are held	and administe	red for the	organizatio	on		
	by:					9		Г	Yes No
	(i) unrelated organizations							3a(i)	
	(ii) related organizations							3a(ii)	
b	If "Yes" to 3a(ii), are the related organizations	listed as required o	n Schedule R?					3b	
4	Describe in Part XIII the intended uses of the								
	t VI Land, Buildings, and Equipm								
	Description of property	(a) Cost or o		st or other	(c) Acc	umulated		(d) Book	value
	,	basis (investr	1 ' '	s (other)		eciation			
	Land								
	Buildings								
	Leasehold improvements								
	Equipment								
	Other								
	. Add lines 1a through 1e. (Column (d) must ed		X, column (B), line	10(c).)		•			0

Schedule D (Form 990) 2012

Part VII Investments - Other Securities. Sec	e Form 990, Part X, line	12.		
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of v	aluation: Cost or end	d-of-year market value
(1) Financial derivatives				
(2) Closely-held equity interests				
(3) Other				
(A)				
(B)				
(C)				
(D)				
(E)				
(F)				
(G)				
(H)				
(1)				
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)				
Part VIII Investments - Program Related. Se	ee Form 990. Part X. lin	e 13.		
(a) Description of investment type	(b) Book value		aluation: Cost or end	d-of-year market value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)				
Part IX Other Assets. See Form 990, Part X, line	15			
	Description			(b) Book value
(1)				(-,
(1)				
(3)				
<u>(4)</u>				
(5)				
<u>(6)</u>				
<u>(7)</u>				
(8)				
(9)				
(10) Total. (Column (b) must equal Form 990, Part X, col. (B) line	0.15			
Part X Other Liabilities. See Form 990, Part X, I	•		P	
() 5	irie 25.	(b) Book value		
· · · · · · · · · · · · · · · · · · ·		(b) Book value	-	
(1) Federal income taxes	<u>_</u>		_	
(2)				
(3)			_	
(4)			-	
(5)			-	
(6)			-	
(7)				
(8)				
(9)				
(10)				
(11)				
Total. (Column (b) must equal Form 990, Part X, col. (B) line				
2. FIN 48 (ASC 740) Footnote. In Part XIII, provide the tex	xt of the footnote to the	organization's financia	I statements that ren	orts the organization's

Sche	edule D (Form 990) 2012 THE CLEAR FUND			20-	8625442 _{Page} 4
Pai	rt XI Reconciliation of Revenue per Audited Financial Stater	nents With	Revenue per R		
1	Total revenue, gains, and other support per audited financial statements			1	2,653,697.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains on investments	2a	312.		
b	Donated services and use of facilities	2b	154,537.		
С	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d			
е				2e	154,849.
3	Subtract line 2e from line 1			3	2,498,848.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b			
С	Add lines 4a and 4b			4c	0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	2,498,848.
Pa	rt XII Reconciliation of Expenses per Audited Financial State	ments Wit	h Expenses per	Retu	
1	Total expenses and losses per audited financial statements			1	2,454,791.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
а	Donated services and use of facilities	2a	154,537.		
b	Prior year adjustments	2b			
С	Other losses	2c			
d	Other (Describe in Part XIII.)	2d			
е	Add lines 2a through 2d			2e	154,537.
3	Subtract line 2e from line 1			3	2,300,254.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b			
С	Add lines 4a and 4b			4c	0.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			5	2,300,254.
Pa	rt XIII Supplemental Information				
Com	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Par	rt III, lines 1a a	and 4; Part IV, lines 1	b and	2b: Part V. line 4: Part

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

PART X, LINE 2: THE CLEAR FUND'S ACCOUNTING POLICY PROVIDES THAT A TAX

EXPENSE OR BENEFIT FROM AN UNCERTAIN TAX POSITION MAY BE RECOGNIZED WHEN IT IS MORE LIKELY THAN NOT THAT THE POSITION WILL BE SUSTAINED UPON EXAMINATION, INCLUDING RESOLUTIONS OF ANY RELATED APPEALS OR LITIGATION PROCESSES, BASED ON THE TECHNICAL MERITS. THE CLEAR FUND HAS NO UNCERTAIN TAX POSITION RESULTING IN AN ACCRUAL OF TAX EXPENSE OR BENEFIT.

Schedule D (Form 990) 2012

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

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

OMB No. 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenue Service

➤ Attach to Form 990.
➤ See separate instructions.

Name of the organization **Employer identification number** THE CLEAR FUND 20-8625442 General Information on Activities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 14b. For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the **United States** Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.) (b) Number of (a) Region (c) Number of (d) Activities conducted in region (e) If activity listed in (d) (f) Total émployees, expenditures offices (by type) (e.g., fundraising, program is a program service, agents, and for and in the region services, investments, grants to describe specific type independent investments contractors recipients located in the region) of service(s) in region in region in region 3 a Sub-total 0 0. **b** Total from continuation 0 sheets to Part I c Totals (add lines 3a 0 and 3b) 0.

2012.04000 THE CLEAR FUND

Schedule F (Form 990) 2012

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

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)		(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SOUTH AFRICA	MICROFINANCE.	47,019.	WIRE TRANSFER	0.	N/A	CASH
			recognized as charities by the				<u> </u>	1
3 Enter total number of			n 501(c)(3) equivalency letter			.		

THE CLEAR FUND

Part III	Grants and Other Assistanc	e to Individuals Outsid	e the United St	ates. Complete i	f the organization answered "Yes" t	o Form 990, Part	IV, line 16.		
F	Part III can be duplicated if additional space is needed.								
(a) Typ	e of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)	

Page 4

6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report. (see Instructions for Form 5713)	 Yes	X No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect To Certain Foreign Partnerships. (see Instructions for Form 8865)	 Yes	X No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)	 Yes	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations. (see Instructions for Form 5471)	 Yes	X No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)	 Yes	X No
1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	 Yes	X No

Schedule F (Form 990) 2012

Part V | Supplemental Information

Complete this part to provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method;
amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column
(c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information.

THE PURPOSE OF THE GRANT IS TO CREATE A SUPPORTIVE ENVIRONMENT WHERE
CREDIT AND SAVING SERVICES FOSTER SUSTAINABLE INCOME GENERATION, JOB
CREATION, AND SOCIAL EMPOWERMENT. FOR INTERNATIONAL GRANTS, THE CLEAR
FUND EXECUTES A SIGNED AGREEMENT LETTER REGARDING THE USE OF GRANT
FUNDS PRIOR TO DISBURSEMENT. THE CLEAR FUND ALSO PERFORMS A POST-GRANT
FOLLOWUP AFTER THE PERIOD IN WHICH FUNDS WERE TO BE USED, INCLUDING
REVIEW OF A GRANTEE REPORT FORM REGARDING THE USE OF GRANT FUNDS.

SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

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

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

► Attach to Form 990.

OMB No. 1545-0047 **2012**

Open to Public Inspection

Employer identification number

THE CLEAR	. FUND						20-8625442
Part I General Information on Grants a	nd Assistance					•	
1 Does the organization maintain records	to substantiate th	e amount of the grant	s or assistance, the	grantees' eligibili	ty for the grants or as:	sistance, and the selec	
criteria used to award the grants or assis	stance?						X Yes No
2 Describe in Part IV the organization's pro	ocedures for mon	itoring the use of gran	t funds in the United	d States.			
Part II Grants and Other Assistance to		-			anization answered "	Yes" to Form 990, Part	IV, line 21, for any
recipient that received more than					(f) Method of	1	Т
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AGAINST MALARIA FOUNDATION							
310 WEST 20TH STREET SUITE 300							
KANSAS CITY, MO 64108	20-3069841	501(C)(3)	595,933.	0.	CASH	N/A	OPERATING SUPPORT
IMPERIAL COLLEGE FOUNDATION							
P.O. BOX 80526	E0 1012002	E01/Q\/3\	E00 176	0	GA GII	NT / 3	GIIDDODE OE GGI
ATLANTA, GA 30366	58-1813092	501(C)(3)	592,176.	0.	CASH	N/A	SUPPORT OF SCI
GIVE DIRECT INC.							
171 AVENUE A, SUITE 6B							
NEW YORK, NY 10009	27-1661997	501(C)(3)	398,001.	0.	CASH	N/A	OPERATING SUPPORT
			·				
PRATHAM USA							
9703 RICHMOND AVENUE SUITE 102							
HOUSTON, TX 77042	76-0620808	501(C)(3)	11,061.	0.	CASH	N/A	OPERATING SUPPORT
THE GIVE FOUNDATION							
P.O. BOX 50876							
PALO ALTO, CA 94303	02-0570370	501(C)(3)	10,000.	0.	CASH	N/A	SALAAM BAALAK TRUST
			20,000.	•		1,7-2	
VILLAGEREACH							
2900 EASTLAKE AVENUE E, SUITE 230							
SEATTLE, WA 98102	91-2083484	501(C)(3)	9,368.	0.	CASH	N/A	OPERATING SUPPORT
2 Enter total number of section 501(c)(3) a	and government o	rganizations listed in tl	he line 1 table				>
3 Enter total number of other organization	s listed in the line	1 table					> 0.
LHA For Paperwork Reduction Act Notice	, see the Instruc	tions for Form 990.					Schedule I (Form 990) (2012)

Part II Continuation of Grants and Other	Assistance to Go	vernments and Orga	nizations in the U	nited States (Sch	edule I (Form 990), Pa	rt II.)	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
VANGUARD CHARITABLE ENDOWMENT PROGRAM - P.O. BOX 3075 - SOUTHEASTERN, PA 19398-9917	23-2888152	501(C)(3)	66,995.	0	Cash	N/A	VARIOUS GRANTS

Schedule I (Form 990) (2012) THE CLEAR FUND 20-8625442 Page 2

CHEDULE I, PART I, LINE 2: THE CLEAR FUND PERFORMS AN ANNUAL REVIEW OF ACH MAJOR GRANTEE, INVOLVING EXTENSIVE DUE DILIGENCE ON ITS MISSION, INANCIALS AND PERFORMANCE, AND USES THIS INFORMATION TO UPDATE ITS PUBLIC EVIEWS OF THE ORGANIZATIONS IN QUESTION, ALL OF WHICH ARE AVAILABLE VIA WW.GIVEWELL.ORG. WHENEVER A GRANT WAS DESIGNATED FOR A SPECIFIC PURPOSE, HE CLEAR FUND REQUIRES CONFIRMATION THAT THE FUNDS WERE USED FOR THIS	(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
CHEDULE I, PART I, LINE 2: THE CLEAR FUND PERFORMS AN ANNUAL REVIEW OF ACH MAJOR GRANTEE, INVOLVING EXTENSIVE DUE DILIGENCE ON ITS MISSION, INANCIALS AND PERFORMANCE, AND USES THIS INFORMATION TO UPDATE ITS PUBLIC EVIEWS OF THE ORGANIZATIONS IN QUESTION, ALL OF WHICH ARE AVAILABLE VIA WW.GIVEWELL.ORG. WHENEVER A GRANT WAS DESIGNATED FOR A SPECIFIC PURPOSE, HE CLEAR FUND REQUIRES CONFIRMATION THAT THE FUNDS WERE USED FOR THIS						
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CHEDULE I, PART I, LINE 2: THE CLEAR FUND PERFORMS AN ANNUAL REVIEW OF CACH MAJOR GRANTEE, INVOLVING EXTENSIVE DUE DILIGENCE ON ITS MISSION, CINANCIALS AND PERFORMANCE, AND USES THIS INFORMATION TO UPDATE ITS PUBLIC CEVIEWS OF THE ORGANIZATIONS IN QUESTION, ALL OF WHICH ARE AVAILABLE VIA TWW.GIVEWELL.ORG. WHENEVER A GRANT WAS DESIGNATED FOR A SPECIFIC PURPOSE, THE CLEAR FUND REQUIRES CONFIRMATION THAT THE FUNDS WERE USED FOR THIS						
Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information. SCHEDULE I, PART I, LINE 2: THE CLEAR FUND PERFORMS AN ANNUAL REVIEW OF EACH MAJOR GRANTEE, INVOLVING EXTENSIVE DUE DILIGENCE ON ITS MISSION, FINANCIALS AND PERFORMANCE, AND USES THIS INFORMATION TO UPDATE ITS PUBLIC REVIEWS OF THE ORGANIZATIONS IN QUESTION, ALL OF WHICH ARE AVAILABLE VIA JUWW.GIVEWELL.ORG. WHENEVER A GRANT WAS DESIGNATED FOR A SPECIFIC PURPOSE, CHE CLEAR FUND REQUIRES CONFIRMATION THAT THE FUNDS WERE USED FOR THIS PURPOSE.						
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	WW.GIVEWELL.ORG. WHENEVER A GRAN	NT WAS DES	IGNATED FO	OR A SPECIF	IC PURPOSE,	
URPOSE.	HE CLEAR FUND REQUIRES CONFIRMAT	TION THAT	THE FUNDS	WERE USED	FOR THIS	

SCHEDULE M (Form 990)

Department of the Treasury

Internal Revenue Service

Noncash Contributions

➤ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

➤ Attach to Form 990.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

THE CLEAR FUND

Employer identification number

20-8625442

Pai	rt I Types of Property				•			
		(a) Check if applicable	(b) Number of contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1q	(d) Method of de noncash contribu		•	s
1	Art - Works of art		items contributed	T Offit 990, i art viii, line ig				
2	Art - Historical treasures							
3	Art - Fractional interests							
4	Books and publications							
5	Clothing and household goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities - Publicly traded	Х	14	73,170.	MARKET VALU	ΙE		
10	Securities - Closely held stock							
11	Securities - Partnership, LLC, or							
	trust interests							
12	Securities - Miscellaneous							
13	Qualified conservation contribution -							
	Historic structures							
14	Qualified conservation contribution - Other							
15	Real estate - Residential							
16	Real estate - Commercial							
17	Real estate - Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	Other ()							
26	Other ()							
27	Other ()							
28	Other (
29	Number of Forms 8283 received by the organi	zation durin	g the tax year for o	contributions				
	for which the organization completed Form 82	83, Part IV,	Donee Acknowled	gement 29				
							Yes	No
30a	During the year, did the organization receive b	y contribution	on any property re	ported in Part I, lines 1-28 th	at it must hold for			
	at least three years from the date of the initial	contribution	, and which is not	required to be used for exer	npt purposes for			
	the entire holding period?					30a		X
b	If "Yes," describe the arrangement in Part II.							
31	Does the organization have a gift acceptance	policy that r	equires the review	of any non-standard contrib	utions?	31		Х
32a	Does the organization hire or use third parties	or related or	rganizations to soli	icit, process, or sell noncash				
	contributions?					32a		Х
b	If "Yes," describe in Part II.							
33	If the organization did not report an amount in	column (c) t	for a type of prope	rty for which column (a) is ch	necked,			
	describe in Part II.							
LHA	For Paperwork Reduction Act Notice, see	the Instruc	tions for Form 99	0.	Schedule M	(Form	990) (2012)

CHEDUL	E M,	PAF	RT I	, co	LUMN	(B):	PU:	BLICLY	TRADED	SECUI	RITIES	ARE	VALUED
THE	AVER	AGE	TRAI	OED	PRICE	ON	THE	DONAT	ION DAT	Ε.			

SCHEDULE 0 (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

OMB No. 1545-0047 Open to Public Inspection

Name of the organization

THE CLEAR FUND

Employer identification number 20-8625442

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

DETAILS OF OUR ANALYSIS TO HELP DONORS DECIDE WHERE TO GIVE.

FORM 990, PART VI, SECTION A, LINE 4: IN 2012, THE CLEAR FUND BOARD OF DIRECTORS ENACTED TWO AMENDMENTS TO THE THE CLEAR FUND'S BYLAWS (AVAILABLE IN FULL AT

HTTP://WWW.GIVEWELL.ORG/FILES/CLEARFUND/CLEAR%20FUND%20BYLAWS.PDF).

AMENDMENT 3 - BOARD MEMBER REQUIREMENTS. ARTICLE 3, SECTION 2 IS AMENDED TO READ AS FOLLOWS. DIRECTORS SHALL BE OF THE AGE OF MAJORITY IN THIS STATE. NOT MORE THAN 1/3 OF THE VOTING MEMBER(S) OF THE BOARD SHALL BE DIRECTLY OR INDIRECTLY COMPENSATED PERSON(S). THERE ARE NO OTHER QUALIFICATIONS FOR BOARD MEMBERS.

AMENDMENT 4 - FREQUENCY OF MEETINGS. ARTICLE 3, SECTION 8 IS AMENDED TO READ AS FOLLOWS. REGULAR MEETINGS OF DIRECTORS SHALL BE HELD AT THE BOARD'S DISCRETION. THE FREQUENCY OF THE MEETINGS OF DIRECTORS MAY BE NO LESS THAN 3 MEETINGS ANNUALLY. A MAJORITY OF THE GOVERNING BODY MEMBERS SHOULD BE IN ATTENDANCE. ATTENDANCE VIA VIDEO CONFERENCE, 50%, ON AVERAGE) OR ANY METHOD THAT ALLOWS REAL-TIME AUDIO PARTICIPATION IS TELEPHONE, COUNTED FOR PURPOSES OF DETERMINING IF THE CHARITY MEETS THE ABOVE ATTENDANCE REQUIREMENT. PROXY ATTENDANCE IS NOT COUNTED FOR PURPOSES OF DETERMINING IF THE CHARITY MEETS THE ABOVE ATTENDANCE REQUIREMENT. FOR ALL ALTERNATIVE MODES OF PARTICIPATION ARE ACCEPTABLE FOR THOSE WITH MEETINGS, PHYSICAL DISABILITIES. IF THIS CORPORATION MAKES NO PROVISION FOR MEMBERS,

AT THE REGULAR MEETING OF DIRECTORS HELD IN JUNE, DIRECTORS SHALL BE THEN,

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

Schedule O (Form 990 or 990-EZ) (2012)

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ELECTED BY THE BOARD OF DIRECTORS. THE TIME OF THE ELECTION OF THE DIRECTORS MAY BE CHANGED BY AN ACT OF THE BOARD, BUT MUST HAVE A SPECIFIED TIME FOR ELECTION OF DIRECTORS AT ONE SCHEDULED BOARD MEETING ANNUALLY. VOTING FOR THE ELECTION OF DIRECTORS SHALL BE BY WRITTEN BALLOT. EACH DIRECTOR SHALL CAST ONE VOTE PER CANDIDATE, AND MAY VOTE FOR AS MANY CANDIDATES AS THE NUMBER OF CANDIDATES TO BE ELECTED TO THE BOARD. THE CANDIDATES RECEIVING THE HIGHEST NUMBER OF VOTES UP TO THE NUMBER OF DIRECTORS TO BE ELECTED SHALL BE ELECTED TO SERVE ON THE BOARD. BOARD MEMBERS NOT ATTENDING MAY VOTE ELECTRONICALLY BY EMAILING THEIR VOTE TO THE CHAIRPERSON OF THE BOARD.

FORM 990, PART VI, SECTION B, LINE 11: THE FORM 990 IS DISTRIBUTED TO THE BOARD OF DIRECTORS, ELECTRONICALLY, PRIOR TO FILING FOR REVIEW.

FORM 990, PART VI, SECTION B, LINE 12C: AS STATED IN ARTICLE 9, SECTION 6 OF OUR BYLAWS:

EACH DIRECTOR, PRINCIPAL OFFICER, AND MEMBER OF A COMMITTEE WITH GOVERNING BOARD DELEGATED POWERS SHALL ANNUALLY SIGN A STATEMENT WHICH AFFIRMS SUCH PERSON:

- A. HAS RECEIVED A COPY OF THE CONFLICTS OF INTEREST POLICY,
- B. HAS READ AND UNDERSTANDS THE POLICY,
- C. HAS AGREED TO COMPLY WITH THE POLICY, AND
- D. UNDERSTANDS THE CORPORATION IS CHARITABLE AND IN ORDER TO MAINTAIN ITS FEDERAL TAX EXEMPTION IT MUST ENGAGE PRIMARILY IN ACTIVITIES WHICH ACCOMPLISH ONE OR MORE OF ITS TAX-EXEMPT PURPOSES.

THE BOARD SECRETARY IS RESPONSIBLE FOR ENFORCING COMPLIANCE. SIGNED ANNUAL 232212 01-04-13

STATEMENTS ARE CURRENTLY ON FILE FOR ALL BOARD MEMBERS FROM WITHIN THE LAST 12 MONTHS.

FORM 990, PART VI, SECTION B, LINE 15: THE PROCESS FOR COMPENSATION REVIEW IS OUTLINED IN ARTICLE 9, SECTION 5 OF OUR BYLAWS, AVAILABLE AT HTTP://WWW.GIVEWELL.ORG/ABOUT/OFFICIAL-RECORDS. THIS PROCESS WAS FOLLOWED IN FULL TO SET THE CURRENT LEVEL OF COMPENSATION FOR BOTH KEY EMPLOYEES (CO-EXECUTIVE DIRECTORS) OF THE ORGANIZATION. THE RELEVANT SECTION OF THE BYLAWS READS AS FOLLOWS:

A VOTING MEMBER OF THE GOVERNING BOARD WHO RECEIVES COMPENSATION, DIRECTLY OR INDIRECTLY, FROM THE CORPORATION FOR SERVICES IS PRECLUDED FROM VOTING ON MATTERS PERTAINING TO THAT MEMBER'S COMPENSATION.

A VOTING MEMBER OF ANY COMMITTEE WHOSE JURISDICTION INCLUDES COMPENSATION MATTERS AND WHO RECEIVES COMPENSATION, DIRECTLY OR INDIRECTLY, FROM THE CORPORATION FOR SERVICES IS PRECLUDED FROM VOTING ON MATTERS PERTAINING TO THAT MEMBER'S COMPENSATION.

NO VOTING MEMBER OF THE GOVERNING BOARD OR ANY COMMITTEE WHOSE JURISDICTION INCLUDES COMPENSATION MATTERS AND WHO RECEIVES COMPENSATION, DIRECTLY OR INDIRECTLY, FROM THE CORPORATION, EITHER INDIVIDUALLY OR COLLECTIVELY, IS PROHIBITED FROM PROVIDING INFORMATION TO ANY COMMITTEE REGARDING COMPENSATION.

WHEN APPROVING COMPENSATION FOR DIRECTORS, OFFICERS, EMPLOYEES, CONTRACTORS, AND ANY OTHER COMPENSATION CONTRACT OR ARRANGEMENT, IN ADDITION TO COMPLYING WITH THE CONFLICT OF INTEREST REQUIREMENTS AND 232212 01-04-13

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ARRANGEMENT; AND

THE PERSON WHO IS THE SUBJECT OF THE COMPENSATION ARRANGEMENT;

4. HAS NO MATERIAL FINANCIAL INTEREST AFFECTED BY THE COMPENSATION

Name of the organization **Employer identification number** THE CLEAR FUND 20-8625442 5. DOES NOT APPROVE A TRANSACTION PROVIDING ECONOMIC BENEFITS TO THE PERSON WHO IS THE SUBJECT OF THE COMPENSATION ARRANGEMENT, WHO IN TURN HAS APPROVED OR WILL APPROVE A TRANSACTION PROVIDING BENEFITS TO THE BOARD OR COMMITTEE MEMBER. C. THE BOARD OR COMPENSATION COMMITTEE SHALL OBTAIN AND RELY UPON APPROPRIATE DATA AS TO COMPARABILITY PRIOR TO APPROVING THE TERMS OF COMPENSATION. APPROPRIATE DATA MAY INCLUDE THE FOLLOWING: 1. COMPENSATION LEVELS PAID BY SIMILARLY SITUATED ORGANIZATIONS, BOTH TAXABLE AND TAX-EXEMPT, FOR FUNCTIONALLY COMPARABLE POSITIONS. "SIMILARLY SITUATED" ORGANIZATIONS ARE THOSE OF A SIMILAR SIZE, PURPOSE, AND WITH SIMILAR RESOURCES. THE AVAILABILITY OF SIMILAR SERVICES IN THE GEOGRAPHIC AREA OF THIS ORGANIZATION. CURRENT COMPENSATION SURVEYS COMPILED BY INDEPENDENT FIRMS. 4. ACTUAL WRITTEN OFFERS FROM SIMILAR INSTITUTIONS COMPETING FOR THE SERVICES OF THE PERSON WHO IS THE SUBJECT OF THE COMPENSATION ARRANGEMENT. AS ALLOWED BY IRS REGULATION 4958-6, IF THIS ORGANIZATION HAS AVERAGE ANNUAL GROSS RECEIPTS (INCLUDING CONTRIBUTIONS) FOR ITS THREE PRIOR TAX YEARS OF LESS THAN \$1 MILLION, THE BOARD OR COMPENSATION COMMITTEE WILL HAVE OBTAINED AND RELIED UPON APPROPRIATE DATA AS TO COMPARABILITY IF IT OBTAINS AND RELIES UPON DATA ON COMPENSATION PAID BY THREE COMPARABLE

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ORGANIZATIONS IN THE SAME OR SIMILAR COMMUNITIES FOR SIMILAR SERVICES.

Schedule O (Form 990 or 990-EZ) (2012) Page 2 Name of the organization **Employer identification number** THE CLEAR FUND 20-8625442 D. THE TERMS OF COMPENSATION AND THE BASIS FOR APPROVING THEM SHALL BE RECORDED IN WRITTEN MINUTES OF THE MEETING OF THE BOARD OR COMPENSATION COMMITTEE THAT APPROVED THE COMPENSATION. SUCH DOCUMENTATION SHALL INCLUDE: 1. THE TERMS OF THE COMPENSATION ARRANGEMENT AND THE DATE IT WAS APPROVED. THE MEMBERS OF THE BOARD OR COMPENSATION COMMITTEE WHO WERE PRESENT DURING DEBATE ON THE TRANSACTION, THOSE WHO VOTED ON IT, AND THE VOTES CAST BY EACH BOARD OR COMMITTEE MEMBER. THE COMPARABILITY DATA OBTAINED AND RELIED UPON AND HOW THE DATA WAS **OBTAINED.** 4. IF THE BOARD OR COMPENSATION COMMITTEE DETERMINES THAT REASONABLE COMPENSATION FOR A SPECIFIC POSITION IN THIS ORGANIZATION OR FOR PROVIDING SERVICES UNDER ANY OTHER COMPENSATION ARRANGEMENT WITH THIS ORGANIZATION IS HIGHER OR LOWER THAN THE RANGE OF COMPARABILITY DATA OBTAINED, THE BOARD OR COMMITTEE SHALL RECORD IN THE MINUTES OF THE MEETING THE BASIS FOR ITS **DETERMINATION.** IF THE BOARD OR COMMITTEE MAKES ADJUSTMENTS TO COMPARABILITY DATA DUE TO GEOGRAPHIC AREA OR OTHER SPECIFIC CONDITIONS, THESE ADJUSTMENTS AND THE REASONS FOR THEM SHALL BE RECORDED IN THE MINUTES OF THE BOARD OR COMMITTEE MEETING.

6. ANY ACTIONS TAKEN WITH RESPECT TO DETERMINING IF A BOARD OR COMMITTEE

MEMBER HAD A CONFLICT OF INTEREST WITH RESPECT TO THE COMPENSATION

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THE CLEAR FUND

Employer identification number 20-8625442

ARRANGEMENT, AND IF SO, ACTIONS TAKEN TO MAKE SURE THE MEMBER WITH THE

CONFLICT OF INTEREST DID NOT AFFECT OR PARTICIPATE IN THE APPROVAL OF THE

TRANSACTION (FOR EXAMPLE, A NOTATION IN THE RECORDS THAT AFTER A FINDING OF

CONFLICT OF INTEREST BY A MEMBER, THE MEMBER WITH THE CONFLICT OF INTEREST

WAS ASKED TO, AND DID, LEAVE THE MEETING PRIOR TO A DISCUSSION OF THE

COMPENSATION ARRANGEMENT AND A TAKING OF THE VOTES TO APPROVE THE

ARRANGEMENT).

7. THE MINUTES OF BOARD OR COMMITTEE MEETINGS AT WHICH COMPENSATION

ARRANGEMENTS ARE APPROVED MUST BE PREPARED BEFORE THE LATER OF THE DATE OF

THE NEXT BOARD OR COMMITTEE MEETING OR 60 DAYS AFTER THE FINAL ACTIONS OF

THE BOARD OR COMMITTEE ARE TAKEN WITH RESPECT TO THE APPROVAL OF THE

COMPENSATION ARRANGEMENTS. THE MINUTES MUST BE REVIEWED AND APPROVED BY THE

BOARD AND COMMITTEE AS REASONABLE, ACCURATE, AND COMPLETE WITHIN A

REASONABLE PERIOD THEREAFTER, NORMALLY PRIOR TO OR AT THE NEXT BOARD OR

COMMITTEE MEETING FOLLOWING FINAL ACTION ON THE ARRANGEMENT BY THE BOARD OR

COMMITTEE.

FORM 990, PART VI, SECTION C, LINE 19: RELEVANT RECORDS ARE AVAILABLE TO
THE PUBLIC FOR DOWNLOAD FROM OUR PUBLIC WEBSITE, AT

HTTP://WWW.GIVEWELL.ORG/ABOUT/OFFICIAL-RECORDS. SUCH RECORDS INCLUDE:

- ALL AVAILABLE FINANCIAL STATEMENTS
- OUR BYLAWS, WHICH INCLUDE OUR CONFLICT OF INTEREST POLICY
- OUR ARTICLES OF INCORPORATION

FORM 990, PART XII FINANCIAL STATEMENTS AND REPORTING, LINE 2C:

OVERSIGHT OF THE AUDIT

THE CLEAR FUND'S PROCESS FOR OVERSEEING THE AUDIT OF THE FINANCIAL

01-04-13

Schedule O (Form 990 or 990-EZ) (2012)