

**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)

**2007**

Open to Public Inspection

Department of the Treasury  
Internal Revenue Service

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

**A For the 2007 calendar year, or tax year beginning and ending**

<b>B</b> Check if applicable <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Termination <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	Please use IRS label or print or type See Specific Instructions	<b>C Name of organization</b> <b>THE WORKMEN'S CIRCLE ARBETER RING, INC.</b>		<b>D Employer identification number</b> 13-6178558
		Number and street (or P O box if mail is not delivered to street address) <b>45 EAST 33RD STREET</b>	Room/suite _____	<b>E Telephone number</b> (212) 889-6800
		City or town, state or country, and ZIP + 4 <b>NEW YORK, NY 10016</b>		<b>F Accounting method</b> <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____

Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ)

*H and I are not applicable to section 527 organizations*

**H(a)** Is this a group return for affiliates?  Yes  No

**H(b)** If "Yes," enter number of affiliates  N/A

**H(c)** Are all affiliates included?  N/A  Yes  No (If "No," attach a list)

**H(d)** Is this a separate return filed by an organization covered by a group ruling?  Yes  No

**I** Group Exemption Number  N/A

**G Website:** WWW.CIRCLE.ORG

**J Organization type** (check only one)  501(c) ( 3 ) (insert no)  4947(a)(1) or  527

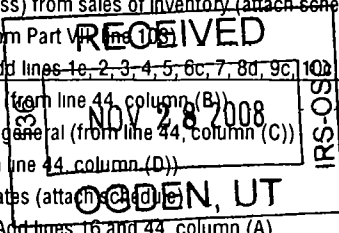
**K** Check here  if the organization is not a 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000. A return is not required, but if the organization chooses to file a return, be sure to file a complete return

**L** Gross receipts Add lines 6b, 8b, 9b, and 10b to line 12 **4,158,691.**

**Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances**

Revenue		Expenses		Net Assets									
<b>1</b>	Contributions, gifts, grants, and similar amounts received												
<b>a</b>	Contributions to donor advised funds	<b>1a</b>											
<b>b</b>	Direct public support (not included on line 1a)	<b>1b</b>	478,076.										
<b>c</b>	Indirect public support (not included on line 1a)	<b>1c</b>											
<b>d</b>	Government contributions (grants) (not included on line 1a)	<b>1d</b>	30,500.										
<b>e</b>	Total (add lines 1a through 1d) (cash \$ 508,576. noncash \$ _____)	<b>1e</b>		508,576.									
<b>2</b>	Program service revenue including government fees and contracts (from Part VII, line 93)	<b>2</b>		381,443.									
<b>3</b>	Membership dues and assessments	<b>3</b>		823,001.									
<b>4</b>	Interest on savings and temporary cash investments	<b>4</b>											
<b>5</b>	Dividends and interest from securities	<b>5</b>		62.									
<b>6 a</b>	Gross rents See Statement 2	<b>6a</b>	362,826.										
<b>b</b>	Less rental expenses See Statement 3	<b>6b</b>	370,677.										
<b>c</b>	Net rental income or (loss) Subtract line 6b from line 6a	<b>6c</b>		<7,851.>									
<b>7</b>	Other investment income (describe <input type="checkbox"/> See Statement 1)	<b>7</b>		15,986.									
<b>8 a</b>	Gross amount from sales of assets other than inventory	<table border="1"> <tr> <th>(A) Securities</th> <th>(B) Other</th> </tr> <tr> <td><b>8a</b></td> <td>875,000.</td> </tr> <tr> <td><b>8b</b></td> <td>326,673.</td> </tr> <tr> <td><b>8c</b></td> <td>548,327.</td> </tr> </table>		(A) Securities	(B) Other	<b>8a</b>	875,000.	<b>8b</b>	326,673.	<b>8c</b>	548,327.	<b>8d</b>	548,327.
(A) Securities	(B) Other												
<b>8a</b>	875,000.												
<b>8b</b>	326,673.												
<b>8c</b>	548,327.												
<b>b</b>	Less cost or other basis and sales expenses												
<b>c</b>	Gain or (loss) (attach schedule)												
<b>d</b>	Net gain or (loss) Combine line 8c, columns (A) and (B) Stmt 4												
<b>9</b>	Special events and activities (attach schedule) If any amount is from gaming, check here <input type="checkbox"/>												
<b>a</b>	Gross revenue (not including \$ 175,964. of contributions reported on line 1b)	<b>9a</b>	58,788.										
<b>b</b>	Less direct expenses other than fundraising expenses	<b>9b</b>	43,439.										
<b>c</b>	Net income or (loss) from special events Subtract line 9b from line 9a See Statement 5	<b>9c</b>		15,349.									
<b>10 a</b>	Gross sales of inventory, less returns and allowances	<b>10a</b>											
<b>b</b>	Less cost of goods sold	<b>10b</b>											
<b>c</b>	Gross profit or (loss) from sales of inventory (attach schedule) Subtract line 10b from line 10a	<b>10c</b>											
<b>11</b>	Other revenue (from Part VII, line 10)	<b>11</b>		1,133,009.									
<b>12</b>	Total revenue. Add lines 1e, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11	<b>12</b>		3,417,902.									
<b>13</b>	Program services (from line 44, column (B))	<b>13</b>		2,484,071.									
<b>14</b>	Management and general (from line 44, column (C))	<b>14</b>		858,387.									
<b>15</b>	Fundraising (from line 44, column (D))	<b>15</b>		182,227.									
<b>16</b>	Payments to affiliates (attach schedule)	<b>16</b>											
<b>17</b>	Total expenses. Add lines 16 and 44, column (A)	<b>17</b>		3,524,685.									
<b>18</b>	Excess or (deficit) for the year Subtract line 17 from line 12	<b>18</b>		<106,783.>									
<b>19</b>	Net assets or fund balances at beginning of year (from line 73, column (A))	<b>19</b>		8,148.									
<b>20</b>	Other changes in net assets or fund balances (attach explanation) See Statement 6	<b>20</b>		125,033.									
<b>21</b>	Net assets or fund balances at end of year Combine lines 18, 19, and 20	<b>21</b>		26,398.									

SCANNED JAN 02 2009



**Part II Statement of Functional Expenses**

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

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I	(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22a Grants paid from donor advised funds (attach schedule) (cash \$ 0 noncash \$ 0) If this amount includes foreign grants, check here <input type="checkbox"/>				
22b Other grants and allocations (attach schedule) (cash \$ 14,510 noncash \$ 0) If this amount includes foreign grants, check here <input type="checkbox"/>	14,510.	14,510.	Statement 8	
23 Specific assistance to individuals (attach schedule)				
24 Benefits paid to or for members (attach schedule)				
25a Compensation of current officers, directors, key employees, etc listed in Part V-A	350,333.	272,148.	66,740.	11,445.
b Compensation of former officers, directors, key employees, etc listed in Part V-B	0.	0.	0.	0.
c Compensation and other distributions, not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
26 Salaries and wages of employees not included on lines 25a, b, and c	1,212,764.	788,880.	314,664.	109,220.
27 Pension plan contributions not included on lines 25a, b, and c	31,920.	21,273.	8,233.	2,414.
28 Employee benefits not included on lines 25a - 27	159,424.	107,446.	37,065.	14,913.
29 Payroll taxes	121,724.	82,943.	28,108.	10,673.
30 Professional fundraising fees				
31 Accounting fees	41,175.		41,175.	
32 Legal fees	41,515.		41,515.	
33 Supplies	15,328.		11,338.	3,990.
34 Telephone	17,720.		17,720.	
35 Postage and shipping	39,544.		29,913.	9,631.
36 Occupancy	77,803.		77,803.	
37 Equipment rental and maintenance	42,468.		42,468.	
38 Printing and publications	32,722.	18,548.		14,174.
39 Travel	32,802.	30,886.		1,916.
40 Conferences, conventions, and meetings	4,008.	4,008.		
41 Interest	10,529.		10,529.	
42 Depreciation, depletion, etc. (attach schedule)				
43 Other expenses not covered above (itemize):				
a				
b				
c				
d				
e				
f				
g See Statement 7	1,278,396.	1,143,429.	131,116.	3,851.
44 Total functional expenses. Add lines 22a through 43g (Organizations completing columns (B)-(D), carry these totals to lines 13-15)	3,524,685.	2,484,071.	858,387.	182,227.

Joint Costs. Check  if you are following SOP 98-2

Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services?  Yes  No  
 If "Yes," enter (i) the aggregate amount of these joint costs \$ N/A, (ii) the amount allocated to Program services \$ N/A,  
 (iii) the amount allocated to Management and general \$ N/A, and (iv) the amount allocated to Fundraising \$ N/A

Part III Statement of Program Service Accomplishments (See the instructions)

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

What is the organization's primary exempt purpose? ▶ See Statement 10	Program Service Expenses (Required for 501(c)(3) and (4) orgs, and 4947(a)(1) trusts, but optional for others)
All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)	
a See Statement 9	
(Grants and allocations \$ 14,510.) If this amount includes foreign grants, check here ▶ <input type="checkbox"/>	2,484,071.
b	
(Grants and allocations \$ ) If this amount includes foreign grants, check here ▶ <input type="checkbox"/>	
c	
(Grants and allocations \$ ) If this amount includes foreign grants, check here ▶ <input type="checkbox"/>	
d	
(Grants and allocations \$ ) If this amount includes foreign grants, check here ▶ <input type="checkbox"/>	
e Other program services (attach schedule)	
(Grants and allocations \$ ) If this amount includes foreign grants, check here ▶ <input type="checkbox"/>	
f Total of Program Service Expenses (should equal line 44, column (B), Program services) ▶	2,484,071.

**Part IV Balance Sheets** (See the instructions)

Note: Where required, attached schedules and amounts within the description column should be for end-of-year amounts only.

		(A) Beginning of year		(B) End of year
<b>Assets</b>	45 Cash - non-interest-bearing	68,800.	45	269,557.
	46 Savings and temporary cash investments	2,496.	46	1,244.
	47 a Accounts receivable	166,309.		
	b Less: allowance for doubtful accounts		47c	166,309.
	48 a Pledges receivable	42,062.		
	b Less: allowance for doubtful accounts		48c	42,062.
	49 Grants receivable		49	19,500.
	50 a Receivables from current and former officers, directors, trustees, and key employees		50a	
	b Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)		50b	
	51 a Other notes and loans receivable			
	b Less: allowance for doubtful accounts		51c	
	52 Inventories for sale or use	165,921.	52	166,590.
	53 Prepaid expenses and deferred charges	7,726.	53	19,246.
	54 a Investments - publicly-traded securities <input type="checkbox"/> Cost <input type="checkbox"/> FMV		54a	
	b Investments - other securities <input type="checkbox"/> Cost <input type="checkbox"/> FMV		54b	
55 a Investments - land, buildings, and equipment: basis	834,356.			
b Less: accumulated depreciation	458,556.	55c	375,800.	
56 Investments - other	See Statement 11	56	27,329.	
57 a Land, buildings, and equipment: basis				
b Less: accumulated depreciation		57c		
58 Other assets, including program-related investments (describe <input type="checkbox"/> See Statement 12 )	1,000.	58	214,782.	
59 <b>Total assets</b> (must equal line 74). Add lines 45 through 58	922,040.	59	1,302,419.	
<b>Liabilities</b>	60 Accounts payable and accrued expenses	326,299.	60	544,746.
	61 Grants payable		61	
	62 Deferred revenue	147,155.	62	64,605.
	63 Loans from officers, directors, trustees, and key employees		63	
	64 a Tax-exempt bond liabilities		64a	
	b Mortgages and other notes payable	75,000.	64b	
	65 Other liabilities (describe <input type="checkbox"/> See Statement 13 )	365,438.	65	666,670.
66 <b>Total liabilities.</b> Add lines 60 through 65	913,892.	66	1,276,021.	
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74.</b>			
	67 Unrestricted	8,148.	67	26,398.
	68 Temporarily restricted		68	
	69 Permanently restricted		69	
	<b>Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 70 through 74.</b>			
	70 Capital stock, trust principal, or current funds		70	
	71 Paid-in or capital surplus, or land, building, and equipment fund		71	
	72 Retained earnings, endowment, accumulated income, or other funds		72	
73 <b>Total net assets or fund balances.</b> Add lines 67 through 69 or lines 70 through 72 (Column (A) must equal line 19 and column (B) must equal line 21)	8,148.	73	26,398.	
74 <b>Total liabilities and net assets/fund balances.</b> Add lines 66 and 73	922,040.	74	1,302,419.	





**Part VI Other Information** (continued)

		Yes	No
82 a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?		X
b	If "Yes," you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II. (See instructions in Part III.)		
	82b N/A		
83 a	Did the organization comply with the public inspection requirements for returns and exemption applications?	X	
b	Did the organization comply with the disclosure requirements relating to <i>quid pro quo</i> contributions?	X	
84 a	Did the organization solicit any contributions or gifts that were not tax deductible?		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
	N/A		
85 a	501(c)(4), (5), or (6). Were substantially all dues nondeductible by members?		
	N/A		
b	Did the organization make only in-house lobbying expenditures of \$2,000 or less? If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year.		
	N/A		
c	Dues, assessments, and similar amounts from members		
	85c N/A		
d	Section 162(e) lobbying and political expenditures		
	85d N/A		
e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices		
	85e N/A		
f	Taxable amount of lobbying and political expenditures (line 85d less 85e)		
	85f N/A		
g	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?		
	N/A		
h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?		
	N/A		
86	501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on line 12		
	86a N/A		
b	Gross receipts, included on line 12, for public use of club facilities		
	86b N/A		
87	501(c)(12) organizations Enter: a Gross income from members or shareholders		
	87a N/A		
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them)		
	87b N/A		
88 a	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX		X
b	At any time during the year, did the organization, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Part XI		X
89 a	501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under: section 4911 <u>0.</u> , section 4912 <u>0.</u> , section 4955 <u>0.</u>		
b	501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction		X
c	Enter Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 <u>0.</u>		
d	Enter: Amount of tax on line 89c, above, reimbursed by the organization <u>0.</u>		
e	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction?		X
f	All organizations. Did the organization acquire a direct or indirect interest in any applicable insurance contract?		X
g	For supporting organizations and sponsoring organizations maintaining donor advised funds Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		X
90 a	List the states with which a copy of this return is filed <u>NY</u>		
b	Number of employees employed in the pay period that includes March 12, 2007	90b	38
91 a	The books are in care of <u>The Organization</u> Telephone no <u>(212) 889-6800</u> Located at <u>45 EAST 33RD STREET, NEW YORK, NY</u> ZIP + 4 <u>10016</u>		
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country <u>N/A</u> See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.	91b	X

**Part VI Other Information** (continued) Yes No

c At any time during the calendar year, did the organization maintain an office outside of the United States? 91c    
 If "Yes," enter the name of the foreign country N/A

92 Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041- Check here   
 and enter the amount of tax-exempt interest received or accrued during the tax year 92 N/A

**Part VII Analysis of Income-Producing Activities** (See the instructions)

**Note:** Enter gross amounts unless otherwise indicated

	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclu- sion code	(D) Amount	
93 Program service revenue:					
a See Statement 16		267,864.			113,579.
b					
c					
d					
e					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					
94 Membership dues and assessments					823,001.
95 Interest on savings and temporary cash investments					
96 Dividends and interest from securities			14	62.	
97 Net rental income or (loss) from real estate:					
a debt-financed property					
b not debt-financed property	531120	<7,851.>			
98 Net rental income or (loss) from personal property					
99 Other investment income			14	15,986.	
100 Gain or (loss) from sales of assets other than inventory			18	548,327.	
101 Net income or (loss) from special events			01	15,349.	
102 Gross profit or (loss) from sales of inventory					
103 Other revenue:					
a See Statement 17				139,371.	993,638.
b					
c					
d					
e					
104 Subtotal (add columns (B), (D), and (E))		260,013.		719,095.	1,930,218.
105 Total (add line 104, columns (B), (D), and (E))					2,909,326.

**Note:** Line 105 plus line 1e, Part I, should equal the amount on line 12, Part I

**Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes** (See the instructions.)

Line No.	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes)
▼	See Statement 18

**Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities** (See the instructions.)

(A) Name, address, and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End-of-year assets
N/A	%			
	%			
	%			
	%			

**Part X Information Regarding Transfers Associated with Personal Benefit Contracts** (See the instructions.)

(a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  Yes  No

(b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  Yes  No

**Note:** If "Yes" to (b), file Form 8870 and Form 4720 (see instructions)

**Part XI** Information Regarding Transfers To and From Controlled Entities. Complete only if the organization is a controlling organization as defined in section 512(b)(13). N/A

106 Did the reporting organization make any transfers to a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity.

Yes No

	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer
a	----- ----- -----			
b	----- ----- -----			
c	----- ----- -----			
<b>Totals</b>				

107 Did the reporting organization receive any transfers from a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity.

Yes No

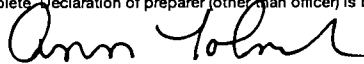
	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer
a	----- ----- -----			
b	----- ----- -----			
c	----- ----- -----			
<b>Totals</b>				

108 Did the organization have a binding written contract in effect on August 17, 2006, covering the interest, rents, royalties, and annuities described in question 107 above?

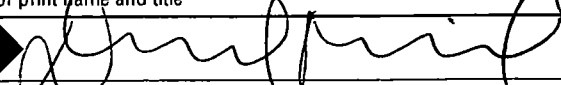
Yes No

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

Please Sign Here

  
 Signature of officer 11/17/08  
 Date  
 ANN Toback, Executive Director  
 Type or print name and title

Paid Preparer's Use Only

Preparer's signature  Date 11/17/08 Check if self-employed  Preparer's SSN or PTIN (See Gen Inst X)  
 Firm's name (or yours if self-employed), address, and ZIP + 4 DONALD BUDNICK, CPA, P.C.  
 118 EAST 28TH STREET  
 NEW YORK, NY 10016 EIN   
 Phone no (212) 725-4657

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

**Organization Exempt Under Section 501(c)(3)**

OMB No 1545-0047

(Except Private Foundation) and Section 501(e), 501(f), 501(k),  
501(n), or 4947(a)(1) Nonexempt Charitable Trust

**2007**

Department of the Treasury  
Internal Revenue Service

**Supplementary Information-(See separate instructions.)**

▶ **MUST be completed by the above organizations and attached to their Form 990 or 990-EZ**

Name of the organization

THE WORKMEN'S CIRCLE ARBETER RING, INC.

Employer identification number

13 6178558

**Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees**

(See page 1 of the instructions List each one If there are none, enter "None")

(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
LAWRENCE BUSH 45 EAST 33RD STREET, NEW YORK, NY 100	PUBLIC EDITOR 40.00	68,240.	22,683.	
FLORENCE RUBENFELD 45 EAST 33RD STREET, NEW YORK, NY 100	DEVELOP DIR 32.00	58,997.	1,770.	
NIKOLAI BORODULIN 45 EAST 33RD STREET, NEW YORK, NY 100	ASST DIR CCJL 40.00	60,340.	9,225.	
LISA GALLATIN 45 EAST 33RD STREET, NEW YORK, NY 100	BOSTON REG DIR 40.00	55,583.	1,667.	
YANIQUE ALCE 45 EAST 33RD STREET, NEW YORK, NY 100	ADMIN MGR 40.00	54,555.	18,370.	
Total number of other employees paid over \$50,000	▶ 0			

**Part II-A Compensation of the Five Highest Paid Independent Contractors for Professional Services**

(See page 2 of the instructions List each one (whether individuals or firms) If there are none, enter "None")

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
None		
Total number of others receiving over \$50,000 for professional services	▶ 0	

**Part II-B Compensation of the Five Highest Paid Independent Contractors for Other Services**

(List each contractor who performed services other than professional services, whether individuals or firms If there are none, enter "None" See page 2 of the instructions )

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
None		
Total number of other contractors receiving over \$50,000 for other services	▶ 0	

**Part III Statements About Activities** (See page 2 of the instructions )

		Yes	No
1	During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities ▶ \$ _____ \$ _____ (Must equal amounts on line 38, Part VI-A, or line i of Part VI-B ) Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A Other organizations checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities		X
2	During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions )		
a	Sale, exchange, or leasing of property?		X
b	Lending of money or other extension of credit?		X
c	Furnishing of goods, services, or facilities?		X
d	Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?	X	
e	Transfer of any part of its income or assets?		X
3	Did the organization make grants for scholarships, fellowships, student loans, etc ? (If "Yes," attach an explanation of how the organization determines that recipients qualify to receive payments )		X
a	Did the organization have a section 403(b) annuity plan for its employees?		X
b	Did the organization receive or hold an easement for conservation purposes, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," attach a detailed statement		X
c	Did the organization provide credit counseling, debt management, credit repair, or debt negotiation services?		X
4	Did the organization maintain any donor advised funds? If "Yes," complete lines 4b through 4g If "No," complete lines 4f and 4g		X
a	Did the organization make any taxable distributions under section 4966?	N/A	
b	Did the organization make a distribution to a donor, donor advisor, or related person?	N/A	
c	Enter the total number of donor advised funds owned at the end of the tax year	▶ N/A	
d	Enter the aggregate value of assets held in all donor advised funds owned at the end of the tax year	▶ N/A	
e	Enter the total number of separate funds or accounts owned at the end of the year (excluding donor advised funds included on line 4d) where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts	▶ 0.	
f	Enter the aggregate value of assets in all funds or accounts included on line 4f at the end of the tax year	▶ 0.	

**Part IV Reason for Non-Private Foundation Status** (See pages 4 through 8 of the instructions )

I certify that the organization is not a private foundation because it is (Please check only **ONE** applicable box )

- 5  A church, convention of churches, or association of churches Section 170(b)(1)(A)(i)
- 6  A school Section 170(b)(1)(A)(ii) (Also complete Part V )
- 7  A hospital or a cooperative hospital service organization Section 170(b)(1)(A)(iii)
- 8  A federal, state, or local government or governmental unit Section 170(b)(1)(A)(v)
- 9  A medical research organization operated in conjunction with a hospital Section 170(b)(1)(A)(iii) Enter the hospital's name, city, and state ▶
- 10  An organization operated for the benefit of a college or university owned or operated by a governmental unit Section 170(b)(1)(A)(iv) (Also complete the **Support Schedule** in Part IV-A )
- 11a  An organization that normally receives a substantial part of its support from a governmental unit or from the general public Section 170(b)(1)(A)(vi) (Also complete the **Support Schedule** in Part IV-A )
- 11b  A community trust Section 170(b)(1)(A)(vi) (Also complete the **Support Schedule** in Part IV-A )
- 12  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 charitable, etc , 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) (Also complete the **Support Schedule** in Part IV-A )
- 13  An organization that is not controlled by any disqualified persons (other than foundation managers) and otherwise meets the requirements of section 509(a)(3) Check the box that describes the type of supporting organization  
 Type I                       Type II                       Type III-Functionally Integrated                       Type III-Other

Provide the following information about the supported organizations. (See page 8 of the instructions )

(a) Name(s) of supported organization(s)	(b) Employer identification number (EIN)	(c) Type of organization (described in lines 5 through 12 above or IRC section)	(d) Is the supported organization listed in the supporting organization's governing documents?		(e) Amount of support
			Yes	No	
<b>Total</b>					▶

- 14  An organization organized and operated to test for public safety Section 509(a)(4) (See page 8 of the instructions )

**Part IV-A Support Schedule** (Complete only if you checked a box on line 10, 11, or 12) **Use cash method of accounting.**  
**Note:** You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting

Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2005	(c) 2004	(d) 2003	(e) Total
15 Gifts, grants, and contributions received (Do not include unusual grants. See line 28.)	540,351.	1,127,183.			1,667,534.
16 Membership fees received	1,132,873.	773,972.			1,906,845.
17 Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc., purpose	906,027.	860,991.			1,767,018.
18 Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, income from similar sources, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975	2,521.	4,715.			7,236.
19 Net income from unrelated business activities not included in line 18					
20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					
21 The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge.					
22 Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets.		133,111.	See Statement 19		133,111.
23 Total of lines 15 through 22	2,581,772.	2,899,972.	0.	0.	5,481,744.
24 Line 23 minus line 17	1,675,745.	2,038,981.			3,714,726.
25 Enter 1% of line 23	25,818.	29,000.			
26 Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24					26a N/A
b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 2003 through 2006 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts					26b N/A
c Total support for section 509(a)(1) test. Enter line 24, column (e)					26c N/A
d Add Amounts from column (e) for lines 18 _____ 19 _____ 22 _____ 26b _____					26d N/A
e Public support (line 26c minus line 26d total)					26e N/A
f Public support percentage (line 26e (numerator) divided by line 26c (denominator))					26f N/A %
27 Organizations described on line 12: a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person." Do not file this list with your return. Enter the sum of such amounts for each year	(2006) 0.	(2005) 0.	(2004) 0.	(2003) 0.	0.
b For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000 (Include in the list organizations described in lines 5 through 11b, as well as individuals.) Do not file this list with your return. After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year	(2006) 0.	(2005) 0.	(2004) 0.	(2003) 0.	0.
c Add Amounts from column (e) for lines 15 <u>1,667,534.</u> 16 <u>1,906,845.</u> 17 <u>1,767,018.</u> 20 _____ 21 _____					27c 5,341,397.
d Add Line 27a total <u>0.</u> and line 27b total <u>0.</u>					27d 0.
e Public support (line 27c total minus line 27d total)					27e 5,341,397.
f Total support for section 509(a)(2) test. Enter amount on line 23, column (e)					27f 5,481,744.
g Public support percentage (line 27e (numerator) divided by line 27f (denominator))					27g 97.4397%
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))					27h .1320%

28 Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 2003 through 2006, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not file this list with your return. Do not include these grants in line 15

None

**Part V Private School Questionnaire** (See page 9 of the instructions )

N/A

**(To be completed ONLY by schools that checked the box on line 6 in Part IV)**

		Yes	No
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?		
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?		
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe, if "No," please explain (If you need more space, attach a separate statement )		
<hr/>			
<hr/>			
32	Does the organization maintain the following		
a	Records indicating the racial composition of the student body, faculty, and administrative staff?	32a	
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	32b	
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	32c	
d	Copies of all material used by the organization or on its behalf to solicit contributions? If you answered "No" to any of the above, please explain (If you need more space, attach a separate statement )	32d	
<hr/>			
33	Does the organization discriminate by race in any way with respect to		
a	Students' rights or privileges?	33a	
b	Admissions policies?	33b	
c	Employment of faculty or administrative staff?	33c	
d	Scholarships or other financial assistance?	33d	
e	Educational policies?	33e	
f	Use of facilities?	33f	
g	Athletic programs?	33g	
h	Other extracurricular activities? If you answered "Yes" to any of the above, please explain (If you need more space, attach a separate statement )	33h	
<hr/>			
<hr/>			
34 a	Does the organization receive any financial aid or assistance from a governmental agency?	34a	
b	Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" to either 34a or b, please explain using an attached statement	34b	
35	Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," attach an explanation	35	

**Part VI-A Lobbying Expenditures by Electing Public Charities** (See page 11 of the instructions) N/A

(To be completed **ONLY** by an eligible organization that filed Form 5768)

Check  **a** if the organization belongs to an affiliated group Check  **b** if you checked "a" and "limited control" provisions apply

<b>Limits on Lobbying Expenditures</b> (The term "expenditures" means amounts paid or incurred )		(a) Affiliated group totals	(b) To be completed for all electing organizations
		N/A	
<b>36</b>	Total lobbying expenditures to influence public opinion (grassroots lobbying)	<b>36</b>	
<b>37</b>	Total lobbying expenditures to influence a legislative body (direct lobbying)	<b>37</b>	
<b>38</b>	Total lobbying expenditures (add lines 36 and 37)	<b>38</b>	
<b>39</b>	Other exempt purpose expenditures	<b>39</b>	
<b>40</b>	Total exempt purpose expenditures (add lines 38 and 39)	<b>40</b>	
<b>41</b>	Lobbying nontaxable amount Enter the amount from the following table - If the amount on line 40 is -                      The lobbying nontaxable amount is - Not over \$500,000                                      20% of the amount on line 40 Over \$500,000 but not over \$1,000,000                      \$100,000 plus 15% of the excess over \$500,000 Over \$1,000,000 but not over \$1,500,000                      \$175,000 plus 10% of the excess over \$1,000,000 Over \$1,500,000 but not over \$17,000,000                      \$225,000 plus 5% of the excess over \$1,500,000 Over \$17,000,000                                      \$1,000,000	<b>41</b>	
<b>42</b>	Grassroots nontaxable amount (enter 25% of line 41)	<b>42</b>	
<b>43</b>	Subtract line 42 from line 36 Enter -0- if line 42 is more than line 36	<b>43</b>	
<b>44</b>	Subtract line 41 from line 38 Enter -0- if line 41 is more than line 38	<b>44</b>	

**Caution:** If there is an amount on either line 43 or line 44, you must file Form 4720.

**4-Year Averaging Period Under Section 501(h)**

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below See the instructions for lines 45 through 50 on page 13 of the instructions )

Calendar year (or fiscal year beginning in)	Lobbying Expenditures During 4-Year Averaging Period				N/A
	(a) 2007	(b) 2006	(c) 2005	(d) 2004	(e) Total
<b>45</b> Lobbying nontaxable amount					0.
<b>46</b> Lobbying ceiling amount (150% of line 45(e))					0.
<b>47</b> Total lobbying expenditures					0.
<b>48</b> Grassroots nontaxable amount					0.
<b>49</b> Grassroots ceiling amount (150% of line 48(e))					0.
<b>50</b> Grassroots lobbying expenditures					0.

**Part VI-B Lobbying Activity by Nonelecting Public Charities** (For reporting only by organizations that did not complete Part VI-A) (See page 14 of the instructions) N/A

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of			Amount
	Yes	No	
<b>a</b> Volunteers			
<b>b</b> Paid staff or management (Include compensation in expenses reported on lines c through h.)			
<b>c</b> Media advertisements			
<b>d</b> Mailings to members, legislators, or the public			
<b>e</b> Publications, or published or broadcast statements			
<b>f</b> Grants to other organizations for lobbying purposes			
<b>g</b> Direct contact with legislators, their staffs, government officials, or a legislative body			
<b>h</b> Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means			
<b>i</b> Total lobbying expenditures (Add lines c through h )			0.

If "Yes" to any of the above, also attach a statement giving a detailed description of the lobbying activities



Form 990	Other Investment Income	Statement	1
<u>Description</u>		<u>Amount</u>	
INTEREST ON ESCROW RE: PROSPECTIVE BLDG SALE			14,274.
INTEREST ON MORTGAGE RECEIVABLE			1,222.
OTHER			490.
Total to Form 990, Part I, line 7			15,986.

Form 990	Rental Income	Statement	2
<u>Kind and Location of Property</u>		<u>Activity Number</u>	<u>Gross Rental Income</u>
COMMERCIAL REAL ESTATE - 45 EAST 33RD ST, NY, NY		1	362,826.
Total to Form 990, Part I, line 6a			362,826.

Form 990	Rental Expenses	Statement	3
<u>Description</u>	<u>Activity Number</u>	<u>Amount</u>	<u>Total</u>
PAYROLL		111,274.	
PENSION		3,507.	
PAYROLL BENEFITS		13,305.	
PAYROLL TAX		9,179.	
OCCUPANCY		41,400.	
REPAIRS & MAINTENANCE		16,850.	
UTILITIES		128,705.	
SERVICE CONTRACTS		31,801.	
SECURITY		10,906.	
PROPERTY MAINTENANCE		3,750.	
- SubTotal -	1		370,677.
Total to Form 990, Part I, line 6b			370,677.



Form 990	Other Expenses			Statement 7
Description	(A) Total	(B) Program Services	(C) Management and General	(D) Fundraising
ADVERTISING PERFORMERS, WRITERS, SPEAKERS	26,377.	22,912.		3,465.
FOOD AND OTHER FOR EVENTS	122,987.	122,987.		
JEWISH CURRENTS - PRINTING	14,977.	14,977.		
JEWISH CURRENTS - POSTAGE	73,533.	73,533.		
JEWISH CURRENTS - OTHER	19,141.	19,141.		
DUES/MEMBERSHIPS SPECIAL EVENTS	4,534.	4,534.		
MEMBER BENEFIT INSURANCE PROGRAMS	10,372.	10,372.		
LOCAL TRANSPORTATION	2,107.	2,107.		
OFFICE EXPENSE	704,399.	704,399.		
COMPUTER SOFTWARE AND SERVICE	13,670.		13,670.	
INSURANCE	37,988.		37,941.	47.
PROFESSIONAL DEVELOPMENT	12,153.		12,153.	
SUBSCRIPTIONS	56,912.		56,912.	
INSURANCE CLAIMS	208.		25.	183.
MISCELLANEOUS	280.		280.	
BOOKSTORE COST OF SALES	5,525.		5,525.	
BOOKSTORE POSTAGE & SHIPPING	4,766.		4,610.	156.
BOOKSTORE SUPPLIES	139,679.	139,679.		
BOOKSTORE ADVERTISING	11,681.	11,681.		
BOOKSTORE ROYALTIES	529.	529.		
BOOKSTORE BANK CHARGES	1,700.	1,700.		
BOOKSTORE OFFICE EXPENSE	2,802.	2,802.		
BOOKSTORE COMPUTER SOFTWARE & SERVICE	5,539.	5,539.		
BOOKSTORE DUES/MEMBERSHIPS	2,602.	2,602.		
	3,520.	3,520.		
	415.	415.		
<b>Total to Fm 990, ln 43</b>	<b>1,278,396.</b>	<b>1,143,429.</b>	<b>131,116.</b>	<b>3,851.</b>

Form 990 Cash Grants and Allocations to Others Statement 8

Class of Activity/Donee's Name and Address	Amount
CAMP SCHOLARSHIP CAMP KINDER RING 335 SYLVAN LAKE ROAD HOPEWELL JCT, NY 12533	5,875.
UNRESTRICTED DONATION WORKMEN'S CIRCLE MULTICARE CENTER 3155 GRACE AVENUE BRONX, NY 10469	100.
REGRANT FROM UJA GRANT TO WC JEWISH BOARD OF FAMILY SERVICES 120 W 57TH STREET NEW YORK, NY 10019	7,685.
UNRESTRICTED DONATION WORKMEN'S CIRCLE MULTICARE CENTER 3155 GRACE AVENUE BRONX, NY 10469	100.
SPONSORSHIP VILLAGE FOR HEALTHCARE AND REHAB OF THE WC 4400 ROUTE 9 SOUTH FREEHOLD, NJ 07728	250.
SPONSORSHIP NEW JERSEY CITIZEN ACTION 744 BROAD STREET NEWARK, NJ 07102	500.
Total Included on Form 990, Part II, line 22b	14,510.

Form 990 Statement of Program Service Accomplishments Statement 9

Description of Program Service One

The Workmen's Circle/Arbeter Ring reaches some 40,000 individuals through its public programs, publications and education services. The WC/AR published the bi-monthly magazine, Jewish Currents, reaching 13,000 members and subscribers; we provide cultural stipends to our 10 affiliated Sunday schools and to 4 choral societies comprising some 400 children and 200 adult participants. Summer public concerts serve an audience of 20,000 in the New York and New Jersey regions. We publish and distribute, through our bookstore, textbooks, dictionaries and curriculum resources for the study of Yiddish language and culture selling each year to some 1,000 individuals. Weekly throughout the year, the organization serves some 120 adult Yiddish language students and some 75 adult dance and music workshop participants. Our staff travel as presenters and participants in Jewish education, culture and social justice meetings throughout the country.

	Grants	Expenses
	<u>          </u>	<u>          </u>
To Form 990, Part III, line a	14,510.	2,484,071.
	<u>          </u>	<u>          </u>

Form 990 Statement of Organization's Primary Exempt Purpose Statement 10  
Part III

Explanation

TO PROVIDE CULTURAL, EDUCATIONAL, INFORMATIONAL AND OTHER PROGRAMS FOR THE BENEFIT OF ITS MEMBERS AND THE PUBLIC

Form 990 Other Investments Statement 11

Description	Valuation Method	Amount
<u>          </u>	<u>          </u>	<u>          </u>
MORTGAGE RECEIVABLE - WC MICHIGAN	Cost	27,329.
Total to Form 990, Part IV, line 56, Column B		<u>27,329.</u>

Form 990	Other Assets	Statement 12
Description	Beginning of Year	End of Year
DUE FROM WC SOCIAL SERVICES		10,000.
DUE FROM WC CEMETERY DEPT EXCHANGES	1,000.	204,782.
Total to Form 990, Part IV, line 58	1,000.	214,782.

Form 990	Other Liabilities	Statement 13
Description	Beginning of Year	End of Year
SALES TAX PAYABLE	1,971.	2,001.
HEALTH INSURANCE DEPOSITS	96,384.	53,636.
REAL ESTATE TAX PAYABLE	14,128.	
OTHER PAYABLES	82,270.	
OTHER LIABILITIES	128,247.	153,417.
RENT SECURITY DEPOSITS	6,440.	6,440.
RESERVE FOR PITTSBURGH	35,998.	23,541.
NOTES DUE TO AFFILIATE - SCF		140,000.
DUE TO AFFILIATE NJ MULTICARE		125,000.
DUE TO AFFILIATE CENTRAL SCHOOLS		70,000.
DUE TO AFFILIATE BASKIN		3,000.
DUE TO AFFILIATE ZUKERMAN		5,000.
DUE TO AFFILIATE CEMETERY DEPT		39,000.
DUE TO AFFILIATE WC SOCIAL SERVICES		10,250.
DUE TO AFFILIATE CEMETERY DEPT		35,385.
Total to Form 990, Part IV, line 65	365,438.	666,670.

Form 990 Part V-A - List of Current Officers, Directors, Trustees and Key Employees Statement 14

Name and Address	Title and Avrg Hrs/Wk	Compen- sation	Employee Ben Plan Contrib	Expense Account
ROBERT KESTENBAUM 45 EAST 33RD STREET NEW YORK, NY 10016	EXEC OFFICER 40.00	STRAT PLANNING 114,768.	22,594.	0.
NANCY BLECHMAN 45 EAST 33RD STREET NEW YORK, NY 10016	EXEC OFFICER 40.00	ADMIN FINANCE 104,721.	9,730.	0.
ADRIENNE COOPER 45 EAST 33RD STREET NEW YORK, NY 10016	EXEC OFFICER 40.00	EXTERNAL AFFAIRS 86,296.	9,224.	3,000.
Henrietta Backer 45 EAST 33RD STREET NEW YORK, NY 10016	DIRECTOR 1.00		0.	0.
Richard Bock 45 EAST 33RD STREET NEW YORK, NY 10016	DIRECTOR 1.00		0.	0.
Joanne Borts 45 EAST 33RD STREET NEW YORK, NY 10036	DIRECTOR 1.00		0.	0.
Andrew Braun 45 EAST 33RD STREET NEW YORK, NY 10016	DIRECTOR 1.00		0.	0.
Maddy Braun 45 EAST 33RD STREET NEW YORK, NY 10016	TREASURER 3.00		0.	0.
Donald Budnick 45 EAST 33RD STREET NEW YORK, NY 10016	DIRECTOR 1.00		0.	0.
Syd Bykofsky 45 EAST 33RD STREET NEW YORK, NY 10016	DIRECTOR 1.00		0.	0.
Elaine Cohen 45 EAST 33RD STREET NEW YORK, NY 10016	DIRECTOR 1.00		0.	0.

Martin Cohen 45 EAST 33RD STREET NEW YORK, NY 10016	DIRECTOR 1.00	0.	0.	0.
Matthew Didner 45 EAST 33RD STREET NEW YORK, NY 10016	DIRECTOR 1.00	0.	0.	0.
Eli Dugan 45 EAST 33RD STREET NEW YORK, NY 10016	DIRECTOR 1.00	0.	0.	0.
Mike Felsen 45 EAST 33RD STREET NEW YORK, NY 10016	DIRECTOR 1.00	0.	0.	0.
Eugene Glaberman 45 EAST 33RD STREET NEW YORK, NY 10016	DIRECTOR 1.00	0.	0.	0.
Ira Halfond 45 EAST 33RD STREET NEW YORK, NY 10016	DIRECTOR 1.00	0.	0.	0.
Ed Harris 45 EAST 33RD STREET NEW YORK, NY 10016	DIRECTOR 1.00	0.	0.	0.
Jack Jacobs 45 EAST 33RD STREET NEW YORK, NY 10016	DIRECTOR 1.00	0.	0.	0.
Ruth Judkowitz 45 EAST 33RD STREET NEW YORK, NY 10016	DIRECTOR 1.00	0.	0.	0.
Milton Kant 45 EAST 33RD STREET NEW YORK, NY 10016	DIRECTOR 1.00	0.	0.	0.
Robert Kaplan 45 EAST 33RD STREET NEW YORK, NY 10016	VICE PRESIDENT 3.00	0.	0.	0.
Lyber Katz 45 EAST 33RD STREET NEW YORK, NY 10016	DIRECTOR 1.00	0.	0.	0.
Dan Klein 45 EAST 33RD STREET NEW YORK, NY 10016	DIRECTOR 1.00	0.	0.	0.

Martin Krupnick 45 EAST 33RD STREET NEW YORK, NY 10016	DIRECTOR 1.00	0.	0.	0.
Michael Krupnick 45 EAST 33RD STREET NEW YORK, NY 10016	DIRECTOR 1.00	0.	0.	0.
Rena Leikind 45 EAST 33RD STREET NEW YORK, NY 10016	DIRECTOR 1.00	0.	0.	0.
Abigail Mandel 45 EAST 33RD STREET NEW YORK, NY 10016	DIRECTOR 1.00	0.	0.	0.
Susan Milamed 45 EAST 33RD STREET NEW YORK, NY 10016	DIRECTOR 1.00	0.	0.	0.
Mark Mlotek 45 EAST 33RD STREET NEW YORK, NY 10016	DIRECTOR 1.00	0.	0.	0.
Allan Newman 45 EAST 33RD STREET NEW YORK, NY 10016	DIRECTOR 1.00	0.	0.	0.
Marie Parham 45 EAST 33RD STREET NEW YORK, NY 10016	DIRECTOR 1.00	0.	0.	0.
Seena Parker 45 EAST 33RD STREET NEW YORK, NY 10016	DIRECTOR 1.00	0.	0.	0.
Peter Pepper 45 EAST 33RD STREET NEW YORK, NY 10016	PRESIDENT 3.00	0.	0.	0.
Milton Pincus 45 EAST 33RD STREET NEW YORK, NY 10016	DIRECTOR 1.00	0.	0.	0.
Rosalyn Pincus 45 EAST 33RD STREET NEW YORK, NY 10016	DIRECTOR 1.00	0.	0.	0.
Marc Rauch 45 EAST 33RD STREET NEW YORK, NY 10016	DIRECTOR 1.00	0.	0.	0.

Len Rodberg 45 EAST 33RD STREET NEW YORK, NY 10016	DIRECTOR 1.00	0.	0.	0.
Eric Roth 45 EAST 33RD STREET NEW YORK, NY 10016	DIRECTOR 1.00	0.	0.	0.
Robert Schwartz 45 EAST 33RD STREET NEW YORK, NY 10016	DIRECTOR 1.00	0.	0.	0.
Diana Scott 45 EAST 33RD STREET NEW YORK, NY 10016	DIRECTOR 1.00	0.	0.	0.
Mitchell Silver 45 EAST 33RD STREET NEW YORK, NY 10016	DIRECTOR 1.00	0.	0.	0.
Seena Stein 45 EAST 33RD STREET NEW YORK, NY 10016	DIRECTOR 1.00	0.	0.	0.
Jeff Warschauer 45 EAST 33RD STREET NEW YORK, NY 10016	DIRECTOR 1.00	0.	0.	0.
Tamar Zinn 45 EAST 33RD STREET NEW YORK, NY 10016	DIRECTOR 1.00	0.	0.	0.
Barnett Zumoff 45 EAST 33RD STREET NEW YORK, NY 10016	DIRECTOR 1.00	0.	0.	0.
Totals Included on Form 990, Part V-A		305,785.	41,548.	3,000.

Form 990 Identification of Related Organizations Statement 15  
Part VI, Line 80b

Name of Organization	Exempt	NonExempt
CIRCLE LODGE AND CAMP KINDER RING OF THE WORKMEN'S CIRCLE INC.	X	
SECOND CENTURY FUND OF THE WORKMEN'S CIRCLE INC	X	
CEMETERY DEPARTMENT OF THE WORKMEN'S CIRCLE INC	X	
SOCIAL SERVICE DEPT OF THE WORKMEN'S CIRCLE INC	X	
WORKMEN'S CIRCLE CENTRAL SCHOOLS COMMITTEE OF NEW YORK	X	
JACOB T ZUKERMAN FUND INC	X	
JOSEPH BASKIN CULTURE CENTER INC	X	

Form 990	Program Service Revenue				Statement 16
Description	Bus Code	Unrelated Business Inc	Excl Code	Excluded Amount	Related or Exempt Function Income
EDUCATIONAL PROGRAMS					83,998.
BOOKSTORE	451211	237,841.			
JEWISH CURRENTS PUBL ADVERT	511120	30,023.			
JEWISH CURRENTS PUBL SUBSCRIPTIONS					29,581.
To Form 990, Part VII, line 93		267,864.			113,579.

Form 990	Other Revenue				Statement 17
Description	Bus Code	Unrelated Business Inc	Excl Code	Excluded Amount	Related or Exempt Function Income
MEMBER BENEFIT PROGRAMS					814,131.
RESTORE MORTGAGE RECEIVABLE			01	62,384.	
REIMB OF PAYROLL FROM AFFILIATES					179,507.
PROPERTY TAX REFUND			01	31,503.	
RECOVERY OF ASSETS			01	19,350.	
MISCELLANEOUS			01	26,134.	
To Form 990, Part VII, line 103				139,371.	993,638.

Form 990 Part VIII - Relationship of Activities to Accomplishment of Exempt Purposes Statement 18

Line	Explanation of Relationship of Activities
93A	EDUCATIONAL PROGRAM FEES ALLOW THE ORGANIZATION TO
93A	PRODUCE THE PROGRAMS WHICH ARE MISSION ORIENTED
93D	MAGAZINE SUBSCRIPTION REVENUE ALLOWS THE ORGANIZATION TO PUBLISH
93D	A MAGAZINE WHICH PROVIDES INFORMATIONAL AND EDUCATIONAL CONTENT
94	DUES AND ASSESSMENTS COLLECTED FROM THE ORGANIZATION'S MEMBERS
94	PROVIDES THE BASIC FUNDING WHICH ALLOWS THE ORGANIZATION TO FUNCTION
101	SPECIAL EVENTS ARE ACTIVITIES WHICH ARE MISSION BASED AND WHICH
101	GENERATE REVENUE TO CONTINUE THE MISSION
103a	THE ORGANIZATION PROVIDES IT MEMBERS WITH BENEFIT PROGRAMS
103a	IN FURTHERANCE OF THE MISSION OF THE ORGANIZATION
103d	THE ORGANIZATION SUPPORTS THE MISSION OF AFFILIATED ENTITIES BY ACTING

103d AS COMMON PAYMASTER. THE AFFILIATES REIMBURSE THE ORGANIZATION FOR  
 103d A PORTION OF THE PAYROLL

Schedule A	Other Income			Statement 19
Description	2006 Amount	2005 Amount	2004 Amount	2003 Amount
OTHER	0.	133,111.	0.	0.
Total to Schedule A, line 22	0.	133,111.	0.	0.