Form **990-EZ**

Department of the Treasury
Internal Revenue Service

Short Form
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)

► Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990 All other organizations with gross receipts less than $500,000 and total assets less than $1,250,000 at the end of the year may use this form

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

OMB No 1545-1150

2009

Open to Public Inspection

A For the 2009 calendar year, or tax year beginning 7/01 **, 2009, and ending** 6/30 , 2010

B Check if applicable: ☐ Address change ☐ Name change ☐ Initial return ☐ Termination ☐ Amended return ☐ Application pending

Please use IRS label or print or type. See Specific Instructions.

C THE CONSENSUS COUNCIL, INC.
1003 E INTERSTATE AVE. #7
BISMARCK, ND 58503-0500

D Employer identification number: 45-0418456

E Telephone number: (701) 224-0588

F Group Exemption Number ►

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

G Accounting method ☐ Cash ☒ Accrual Other (specify) ►

H Check ► ☐ if the organization is **not** required to attach Schedule B (Form 990, 990-EZ, or 990-PF)

I Website: ► WWW.AGREE.ORG

J Tax-exempt status (check only one) — ☒ 501(c) (3) ◄ (insert no) ☐ 4947(a)(1) or ☐ 527

K Check ► ☐ if the organization is not a section 509(a)(3) supporting organization **and** its gross receipts are normally **not** more than $25,000 A Form 990-EZ or Form 990 return is not required, but if the organization chooses to file a return, be sure to file a complete return

L Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts, if $500,000 or more, file Form 990 instead of Form 990-EZ ► $ 446,938.

Part I **Revenue, Expenses, and Changes in Net Assets or Fund Balances** (See the instructions for Part I.)

REVENUE	1	Contributions, gifts, grants, and similar amounts received			1	65,428.
	2	Program service revenue including government fees and contracts			2	379,724.
	3	Membership dues and assessments			3	
	4	Investment income			4	1,786.
	5a	Gross amount from sale of assets other than inventory	5a			
	b	Less: cost or other basis and sales expenses	5b			
	c	Gain or (loss) from sale of assets other than inventory (Subtract ln 5b from ln 5a)			5c	
	6	Special events and activities (complete applicable parts of Schedule G) If any amount is from gaming, check here ► ☐				
	a	Gross revenue (not including $ ______ of contributions reported on line 1)	6a			
	b	Less direct expenses other than fundraising expenses	6b			
	c	Net income or (loss) from special events and activities (Subtract line 6b from line 6a)			6c	
	7a	Gross sales of inventory, less returns and allowances	7a			
	b	Less: cost of goods sold	7b			
	c	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)			7c	
	8	Other revenue (describe ►)			8	
	9	**Total revenue.** Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8 ►			9	446,938.
EXPENSES	10	Grants and similar amounts paid (attach schedule)			10	
	11	Benefits paid to or for members			11	
	12	Salaries, other compensation, and employee benefits			12	418,424.
	13	Professional fees and other payments to independent contractors			13	7,076.
	14	Occupancy, rent, utilities, and maintenance			14	22,123.
	15	Printing, publications, postage, and shipping			15	7,503.
	16	Other expenses (describe ► SEE STATEMENT 1)			16	102,289.
	17	**Total expenses.** Add lines 10 through 16 ►			17	557,415.
NET ASSETS	18	Excess or (deficit) for the year (Subtract line 17 from line 9)			18	-110,477.
	19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)			19	307,570.
	20	Other changes in net assets or fund balances (attach explanation)			20	
	21	Net assets or fund balances at end of year Combine lines 18 through 20 ►			21	197,093.

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SCANNED SEP 30 2010

Part II **Balance Sheets.** If Total assets on line 25, column (B) are $1,250,000 or more, file Form 990 instead of Form 990-EZ

	(See the instructions for Part II)	(A) Beginning of year		(B) End of year
22	Cash, savings, and investments	345,698.	22	262,392.
23	Land and buildings	1,517.	23	1,268.
24	Other assets (describe ► SEE STATEMENT 2)	20,991.	24	55,588.
25	**Total assets**	368,206.	25	319,248.
26	**Total liabilities** (describe ► SEE STATEMENT 3)	60,636.	26	122,155.
27	**Net assets or fund balances** (line 27 of column (B) **must** agree with line 21)	307,570.	27	197,093.

9

1

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

What is the organization's primary exempt purpose? BUILD AGREEMENTS ON PUBLIC POLICY GOVERANCE.

Describe what was achieved in carrying out the organization's exempt purposes In a clear and concise manner, describe the services provided, the number of persons benefited, or other relevant information for each program title.

Expenses (Required for section 501(c)(3) and (4) organizations and section 4947(a)(1) trusts, optional for others.)

28	INTERNATIONAL FLOOD MITIGATION INITIATIVE PROJECT (Grants $) If this amount includes foreign grants, check here ► ☐	28a	98,047.
29	ND ECONOMIC SECURITY ALLIANCE (Grants $) If this amount includes foreign grants, check here ► ☐	29a	85,622.
30	ND SCHOOL FOR THE DEAF (Grants $) If this amount includes foreign grants, check here ► ☐	30a	76,899.
31	Other program services (attach schedule) SEE STATEMENT 4 (Grants $) If this amount includes foreign grants, check here ► ☐	31a	158,794.
32	**Total program service expenses** (add lines 28a through 31a) ►	32	419,362.

Part IV **List of Officers, Directors, Trustees, and Key Employees.** List each one even if not compensated (See the instrs.)

(a) Name and address	**(b)** Title and average hours per week devoted to position	**(c)** Compensation **(If not paid, enter -0-.)**	**(d)** Contributions to employee benefit plans and deferred compensation	**(e)** Expense account and other allowances
ROSE M. STOLLER 1003 E INTERSTATE AVE., STE 7 BISMARCK, ND 58503-0500	EXECUTIVE DIREC 40.00	103,233.	13,283.	0.
BRUCE W. FURNESS 311 11TH AVE S UNIT 202 FARGO, ND 58103	DIRECTOR 0	0.	0.	0.
DENNIS HILL PO BOX 727 MANDAN, ND 58554-0727	DIRECTOR 0	0.	0.	0.
CHRISTINE HOGAN 2001 S GRANDVIEW LANE BISMARCK, ND 58503	DIRECTOR 0	0.	0.	0.
BETTY KEEGAN PO BOX 444 ROLLA, ND 58367	DIRECTOR 0	0.	0.	0.
DAVID L. KEMNITZ 1323 EAST FRONT AVENUE BISMARCK, ND 58504	DIRECTOR 0	0.	0.	0.
ANDREW MARAGOS 125 6TH AVE. NE MINOT, ND 58703-2558	SECRETARY/TREAS 0	0.	0.	0.
JERRY L. NAGEL 4838 ROCKING HORSE CIR STE 201 FARGO, ND 58104	VICE CHAIR 0	0.	0.	0.
CAROLYN NELSON ONE SOUTH 2ND STREET #5-402 FARGO, ND 58103	DIRECTOR 0	0.	0.	0.
BARRY VICKREY 414 E CLARK STREET VERMILLION, SD 57069	CHAIR 0	0.	0.	0.

Part V **Other Information** (Note the statement requirements in the instrs for Part V.) SEE STATEMENT 5

				Yes	No
33	Did the organization engage in any activity not previously reported to the IRS? If 'Yes,' attach a detailed description of each activity	33			X
34	Were any changes made to the organizing or governing documents? If 'Yes,' attach a conformed copy of the changes	34			X
35	If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported on Form 990-T, attach a statement explaining why the organization did not report the income on Form 990-T.				
a	Did the organization have unrelated business gross income of $1,000 or more or was it subject to section 6033(e) notice, reporting, and proxy tax requirements?	35a			X
b	If 'Yes,' has it filed a tax return on **Form 990-T** for this year?	35b			
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If 'Yes,' complete applicable parts of Schedule N	36			X
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions ►	37a	0.		
b	Did the organization file **Form 1120-POL** for this year?	37b			X
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee **or** were any such loans made in a prior year and still outstanding at the end of the period covered by this return?	38a			X
b	If 'Yes,' complete Schedule L, Part II and enter the total amount involved	38b	N/A		
39	Section 501(c)(7) organizations Enter				
a	Initiation fees and capital contributions included on line 9	39a	N/A		
b	Gross receipts, included on line 9, for public use of club facilities	39b	N/A		
40a	Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under: section 4911 ► 0. , section 4912 ► 0. , section 4955 ► 0.				
b	Section 501(c)(3) and 501(c)(4) organizations Did the organization engage in any section 4958 excess benefit transaction during the year or is it 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 Schedule L, Part I	40b			X
c	Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 ►		0.		
d	Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax on line 40c reimbursed by the organization ►		0.		
e	All organizations At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If 'Yes,' complete Form 8886-T	40e			X

41 List the states with which a copy of this return is filed ► NONE

42a The organization's books are in care of ► ROSE M. STOLLER Telephone no. ► (701) 224-0588
Located at ► 1003 E INTERSTATE AVE., STE 7 BISMARCK ND ZIP + 4 ► 58503-0500

			Yes	No
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 ►	42b		X
	See the instructions for exceptions and filing requirements for **Form TD F 90-22.1, Report of a Foreign Bank and Financial Accounts.**			
c	At any time during the calendar year, did the organization maintain an office outside of the U S ? If 'Yes,' enter the name of the foreign country ►	42c		X

43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of **Form 1041** – Check here ► ☐ N/A
and enter the amount of tax-exempt interest received or accrued during the tax year ► 43 N/A

			Yes	No
44	Did the organization maintain any donor advised funds? If 'Yes,' Form 990 must be completed instead of Form 990-EZ	44		X
45	Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If 'Yes,' Form 990 must be completed instead of Form 990-EZ	45		X

Part VI **Section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts only.** All section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts must answer questions 46-49b and complete the tables for lines 50 and 51.

			Yes	No
46	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I	46		X
47	Did the organization engage in lobbying activities? If 'Yes,' complete Schedule C, Part II	47	X	
48	Is the organization a school as described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	48		X
49a	Did the organization make any transfers to an exempt non-charitable related organization?	49a		X
b	If 'Yes,' was the related organization a section 527 organization?	49b		

50 Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than $100,000 of compensation from the organization If there is none, enter 'None '

(a) Name and address of each employee paid more than $100,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account and other allowances
NONE				

f Total number of other employees paid over $100,000 ►

51 Complete this table for the organization's five highest compensated independent contractors who each received more than $100,000 of compensation from the organization If there is none, enter 'None '

(a) Name and address of each independent contractor paid more than $100,000	(b) Type of service	(c) Compensation
NONE		

d Total number of other independent contractors each receiving over $100,000 ►

Sign Here

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

► Rose M. Stoller — Signature of officer — Date 9/13/10

► ROSE M. STOLLER EXECUTIVE DIRECTOR — Type or print name and title

Paid Preparer's Use Only

Preparer's signature ► Steven L. Wonnenberg	Date 9/13/10	Check if self-employed ► [X]	Preparer's Identifying Number (See instructions) P00259290
Firm's name (or yours if self-employed), address, and ZIP + 4 ► STEVEN L. WONNENBERG C.P.A. PO BOX 7183 BISMARCK, ND 58507-7183		EIN ► 45-0424130	Phone no ► (701) 223-4317

May the IRS discuss this return with the preparer shown above? See instructions ► [X] Yes [ ] No

OMB No 1545-0047

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

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

2009

Open to Public Inspection

Name of the organization: THE CONSENSUS COUNCIL, INC.

Employer identification number: 45-0418456

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions

The organization is not a private foundation because it is (For lines 1 through 11, check only one box)

1 ☐ A church, convention of churches or association of churches described in **section 170(b)(1)(A)(i).**

2 ☐ A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E)

3 ☐ A hospital or cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**

4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)** Enter the hospital's name, city, and state

5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II)

6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**

7 ☐ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II)

8 ☐ A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II)

9 [X] An organization that normally receives: (1) more than 33-1/3 % of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions – subject to certain exceptions, and (2) no more than 33-1/3 % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2).** (Complete Part III)

10 ☐ An organization organized and operated exclusively to test for public safety See **section 509(a)(4).**

11 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or 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

a ☐ Type I **b** ☐ Type II **c** ☐ Type III – Functionally integrated **d** ☐ Type III– Other

e ☐ 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)

f If the organization received a written determination from the IRS that is a Type I, Type II or Type III supporting organization, check this box ☐

g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

		Yes	No
(i) a person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, 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?	**11g (iii)**		

h Provide the following information about the supported organizations

(i) Name of Supported Organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization in col (i) listed in your governing document?		(v) Did you notify the organization in col (i) of your support?		(vi) Is the organization in col (i) organized in the U S ?		(vii) Amount of Support
			Yes	No	Yes	No	Yes	No	
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)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions and membership fees received (Do not include 'unusual grants')						
2 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf						
3 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						
4 **Total.** Add lines 1-through 3						
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)						
6 **Public support.** Subtract line 5 from line 4						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources						
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						

12 Gross receipts from related activities, etc (see instructions) | 12 |

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

Section C. Computation of Public Support Percentage

14 Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f) | 14 | %

15 Public support percentage from 2008 Schedule A, Part II, line 14 | 15 | %

16a **33-1/3 support test – 2009.** If the organization did not check the box on line 13, and the line 14 is 33-1/3 % or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ► ☐

b **33-1/3 support test – 2008.** If the organization did not check a box on line 13, or 16a, and line 15 is 33-1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ► ☐

17a **10%-facts-and-circumstances test – 2009** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and **stop here.** Explain in Part IV how the organization meets the 'facts-and-circumstances' test The organization qualifies as a publicly supported organization. ► ☐

b **10%-facts-and-circumstances test – 2008.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and **stop here.** Explain in Part IV how the organization meets the 'facts-and-circumstances' test The organization qualifies as a publicly supported organization. ► ☐

18 **Private foundation.** If the organization did not check a box on line, 13, 16a, 16b, 17a, or 17b, check this box and see instructions ► ☐

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

(Complete only if you checked the box on line 9 of Part I.)

Section A. Public Support

Calendar year (or fiscal yr beginning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions and membership fees received (Do not include 'unusual grants')	104,000.	146,494.	88,000.	105,847.	65,428.	509,769.
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in a activity that is related to the organization's tax-exempt purpose	428,474.	322,539.	254,940.	203,083.	379,724.	1,588,760.
3 Gross receipts from activities that are not an unrelated trade or business under section 513						0.
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0.
5 The value of services or facilities furnished by a governmental unit to the organization without charge						0.
6 **Total.** Add lines 1 through 5	532,474.	469,033.	342,940.	308,930.	445,152.	2,098,529.
7a Amounts included on lines 1, 2, 3 received from disqualified persons	0.	0.	0.	0.	0.	0.
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the amount on line 13 for the year	276,316.	235,879.	152,555.	119,928.	273,340.	1,058,018.
c Add lines 7a and 7b	276,316.	235,879.	152,555.	119,928.	273,340.	1,058,018.
8 **Public support** (Subtract line 7c from line 6)						1,040,511.

Section B. Total Support

Calendar year (or fiscal yr beginning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9 Amounts from line 6	532,474.	469,033.	342,940.	308,930.	445,152.	2,098,529.
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources	17,986.	34,057.	24,067.	9,965.	1,786.	87,861.
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						0.
c Add lines 10a and 10b	17,986.	34,057.	24,067.	9,965.	1,786.	87,861.
11 Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on						0.
12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						0.
13 **Total support.** (add lns 9, 10c, 11, and 12)						2,186,390.

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

Section C. Computation of Public Support Percentage

15 Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f))	15	47.6 %
16 Public support percentage from 2008 Schedule A, Part III, line 15	16	55.9 %

Section D. Computation of Investment Income Percentage

17 Investment income percentage for **2009** (line 10c, column (f) divided by line 13, column (f))	17	4.0 %
18 Investment income percentage from **2008** Schedule A, Part III, line 17	18	4.2 %

19a **33-1/3 support tests – 2009.** If the organization did not check the box on line 14, and line 15 is more than 33-1/3%, and line 17 is not more than 33-1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ► ☒

b **33-1/3 support tests – 2008.** If the organization did not check a box on line 14 or 19a, and line 16 is more than 33-1/3%, and line 18 is not more than 33-1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ► ☐

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

Part IV **Supplemental Information.** Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Provide any other additional information. See instructions.

SCHEDULE C
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527
► **Complete if the organization is described below.**
► **Attach to Form 990 or Form 990-EZ.** ► **See separate instructions.**

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If the organization answered 'Yes,' to Form 990, Part IV, line 3, or Form 990-EZ, Part VI, line 46 (Political Campaign Activities), then

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

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

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

If the organization answered 'Yes,' to Form 990, Part IV, line 5 (Proxy Tax), then

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

Name of organization	Employer identification number
THE CONSENSUS COUNCIL, INC.	45-0418456

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

1 Provide a description of the organization's direct and indirect political campaign activities in Part IV

2 Political expenditures ► $

3 Volunteer hours

Part I-B Complete if the organization is exempt under section 501(c)(3).

1 Enter the amount of any excise tax incurred by the organization under section 4955 ► $ 0.

2 Enter the amount of any excise tax incurred by organization managers under section 4955 ► $ 0.

3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ☐ Yes ☐ No

4a Was a correction made? ☐ Yes ☐ No

b If 'Yes,' describe in Part IV

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

1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ► $

2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ► $

3 Total of exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b ► $

4 Did the filing organization file **Form 1120-POL** for this year? ☐ Yes ☐ No

5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which payments were made For each organization listed, enter the amount paid from the filing organization's funds Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

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

Part II-A **Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).**

A Check ► ☐ if the filing organization belongs to an affiliated group

B Check ► ☐ if the filing organization checked box A and 'limited control' provisions apply

Limits on Lobbying Expenditures – (The term 'expenditures' means amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals
1 a Total lobbying expenditures to influence public opinion (grass roots lobbying)		
b Total lobbying expenditures to influence a legislative body (direct lobbying)		
c Total lobbying expenditures (add lines 1a and 1b)	0.	0.
d Other exempt purpose expenditures	557,415.	
e Total exempt purpose expenditures (add lines 1c and 1d)	557,415.	0.
f Lobbying nontaxable amount. Enter the amount from the following table in both columns	108,612.	

If the amount on line 1e, column (a) or (b) is.	The lobbying nontaxable amount is·
Not over $500,000	20% of the amount on line 1e.
Over $500,000 but not over $1,000,000	$100,000 plus 15% of the excess over $500,000
Over $1,000,000 but not over $1,500,000	$175,000 plus 10% of the excess over $1,000,000.
Over $1,500,000 but not over $17,000,000	$225,000 plus 5% of the excess over $1,500,000
Over $17,000,000	$1,000,000

	(a)	(b)
g Grassroots nontaxable amount (enter 25% of line 1f)	27,153.	0.
h Subtract line 1g from line 1a If zero or less, enter -0-	0.	0.
i Subtract line 1f from line 1c If zero or less, enter -0-	0.	0.

j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? ☐ Yes ☐ No

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

Lobbying Expenditures During 4-Year Averaging Period

Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) Total
2a Lobbying non-taxable amount	95,642.	101,579.	106,533.	108,612.	412,366.
b Lobbying ceiling amount (150% of line 2a, column (e))					618,549.
c Total lobbying expenditures					0.
d Grassroots nontaxable amount	23,911.	25,395.	26,633.	27,153.	103,092.
e Grassroots ceiling amount (150% of line 2d, column (e))					154,638.
f Grassroots lobbying expenditures					0.

Part II-B **Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).**

	(a) Yes	(a) No	(b) Amount
1 During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of			
a Volunteers?			
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
c Media advertisements?			
d Mailings to members, legislators, or the public?			
e Publications, or published or broadcast statements?			
f Grants to other organizations for lobbying purposes?			
g Direct contact with legislators, their staffs, government officials, or a legislative body?			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
i Other activities? If 'Yes,' describe in Part IV			
j Total Add lines 1c through 1i			
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
b If 'Yes,' enter the amount of any tax incurred under section 4912			
c If 'Yes,' enter the amount of any tax incurred by organization managers under section 4912			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

Part III-A **Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).**

		Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?	1		
2 Did the organization make only in-house lobbying expenditures of $2,000 or less?	2		
3 Did the organization agree to carryover lobbying and political expenditures from the prior year?	3		

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

1 Dues, assessments and similar amounts from members.	1	
2 Section 162(e) non-deductible lobbying and political expenditures **(do not include amounts of political expenses for which the section 527(f) tax was paid).**		
a Current year	2a	
b Carryover from last year	2b	
c Total	2c	
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
5 Taxable amount of lobbying and political expenditures (see instructions)	5	

Part IV **Supplemental Information**

Complete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4, Part I-C, line 5, and Part II-B, line 1i. Also, complete this part for any additional information.

Part IV Supplemental Information *(continued)*

STATEMENT 1
FORM 990-EZ, PART I, LINE 16
OTHER EXPENSES

CONFERENCES, CONVENTIONS, AND MEETINGS	$	32,106.
CONSULTANTS/CONTRACTUAL		19,700.
DEPRECIATION		5,297.
INSURANCE		2,566.
OFFICE EXPENSES		12,102.
PROFESSIONAL DUES & EXPENSES		1,891.
REPAIRS & MAINTENANCE		1,052.
TELEPHONE		4,548.
TRAVEL		23,027.
TOTAL	$	102,289.

STATEMENT 2
FORM 990-EZ, PART II, LINE 24
OTHER ASSETS

	BEGINNING	ENDING
ACCOUNTS RECEIVABLE	$ 13,666.	$ 49,195.
FURNITURE AND FIXTURES	7,325.	6,393.
TOTAL	$ 20,991.	$ 55,588.

STATEMENT 3
FORM 990-EZ, PART II, LINE 26
TOTAL LIABILITIES

	BEGINNING	ENDING
ACCOUNTS PAYABLE AND ACCRUED EXPENSES	$ 2,743.	$ 12,663.
ACCRUED VACATION LEAVE	32,893.	24,616.
DEFERRED REVENUE	25,000.	84,876.
TOTAL	$ 60,636.	$ 122,155.

STATEMENT 4
FORM 990-EZ, PART III, LINE 31
STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS

DESCRIPTION	GRANTS	PROGRAM SERVICE EXPENSES
OTHER INCLUDES FOREIGN GRANTS: NO		68,965.
ND STATE FISCAL ANALYSIS INITIATIVE INCLUDES FOREIGN GRANTS: NO		58,605.
COMPREHENSIVE EMPLOYMENT SYSTEMS INCLUDES FOREIGN GRANTS: NO		31,224.

STATEMENT 4 (CONTINUED)
FORM 990-EZ, PART III, LINE 31
STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS

DESCRIPTION	GRANTS	PROGRAM SERVICE EXPENSES
INCLUDES FOREIGN GRANTS: NO		
TOTAL	$ 0.	$ 158,794.

STATEMENT 5
FORM 990-EZ, PART V
REGARDING TRANSFERS ASSOCIATED WITH PERSONAL BENEFIT CONTRACTS

(A) DID THE ORGANIZATION, DURING THE YEAR, RECEIVE ANY FUNDS, DIRECTLY OR INDIRECTLY, TO PAY PREMIUMS ON A PERSONAL BENEFIT CONTRACT? NO

(B) DID THE ORGANIZATION, DURING THE YEAR, PAY PREMIUMS, DIRECTLY OR INDIRECTLY, ON A PERSONAL BENEFIT CONTRACT? NO

CLIENT 16 **THE CONSENSUS COUNCIL, INC.** 45-0418456

9/13/10 01 25PM

NO.	DESCRIPTION	DATE ACQUIRED	DATE SOLD	COST/ BASIS	BUS. PCT.	CUR 179 BONUS	SPECIAL DEPR ALLOW.	PRIOR 179/ BONUS/ SP. DEPR.	PRIOR DEC. BAL DEPR.	SALVAG /BASIS REDUCT	DEPR BASIS	PRIOR DEPR.	METHOD	LIFE	RATE	CURRENT DEPR.
	FORM 990/990-PF															
	FURNITURE AND FIXTURES															
1	1 WOOD DESK - PAUL	9/25/90		203							203	203	S/L	7		0
2	1 WOOD TABLE - PAUL	9/25/90		150							150	150	S/L	7		0
3	1 ROUND 42" TABLE	9/25/90		100							100	100	S/L	7		0
4	1 HEX 42" TABLE	9/25/90		100							100	100	S/L	7		0
5	2 24"X60" TABLES	9/25/90		231							231	231	S/L	7		0
6	1 SECRETARIAL DESK - SECR	9/25/90		167							167	167	S/L	7		0
7	1 CREDENZA - SECRETARY	9/25/90		150							150	150	S/L	7		0
8	1 CREDENZA - ROSE	9/25/90		150							150	150	S/L	7		0
9	1 30"X60" DESK - ROSE	9/25/90		78							78	78	S/L	7		0
10	1 30"X60" DESK	9/25/90		78							78	78	S/L	7		0
11	1 30"X60" DESK	9/25/90		78							78	78	S/L	7		0
12	3 5-DRAWER FIELS	9/25/90		578							578	578	S/L	7		0
13	ROUGHRIDER FURNITURE	9/25/90		4,296							4,296	4,296	S/L	7		0
14	CHAIRS	10/08/90		275							275	275	S/L	7		0
15	1 HON GREY BACK CHAIR	11/12/90		159							159	159	S/L	7		0
16	BLINDS	12/01/90		435							435	435	S/L	7		0
17	SIGNS	12/07/90		515							515	515	S/L	7		0
18	DICTAPHONE	9/25/90	6/30/10	1,076							1,076	1,076	S/L	5		0
19	IBM TYPEWRITER	12/17/90		250							250	250	S/L	5		0
20	EASELS	3/01/91		246							246	246	S/L	7		0
21	PICTURE	5/01/91		15							15	15	S/L	7		0
22	SENSOR CHAIR	5/07/91		366							366	366	S/L	7		0
23	FRAMES	6/01/91		405							405	405	S/L	7		0

CLIENT 16 THE CONSENSUS COUNCIL, INC. 45-0418456

9/13/10 01:25PM

NO.	DESCRIPTION	DATE ACQUIRED	DATE SOLD	COST/ BASIS	BUS PCT.	CUR 179 BONUS	SPECIAL DEPR ALLOW	PRIOR 179/ BONUS/ SP. DEPR.	PRIOR DEC. BAL DEPR.	SALVAG /BASIS REDUCT	DEPR. BASIS	PRIOR DEPR.	METHOD	LIFE	RATE	CURRENT DEPR.
24	PICTURES	3/01/91		171							171	171	S/L	7		0
25	OAK TABLE - 46"X46"	10/31/91		366							366	366	S/L	7		0
26	OLYMPUS TRANSCRIBER	9/30/91	6/30/10	190							190	190	S/L	5		0
27	TELEPHONE - CONFER. ROOM	5/29/92		199							199	199	S/L	7		0
28	NOVELCO TELEPHONE ADAPTER	8/30/91	6/30/10	48							48	48	S/L	7		0
29	KENMORE REFRIGERATOR	2/28/92		219							219	219	S/L	7		0
30	DRY ERASE BOARD - 48 X 28	9/30/91		67							67	67	S/L	7		0
31	STEELECASE CHAIR - ROSE	8/31/92		424							424	424	S/L	7		0
32	GRAHL CHAIR - CONNIE S	9/24/92	6/30/10	477							477	477	S/L	7		0
33	DICTAPHONE - CONNIE S	7/01/92	6/30/10	133							133	133	S/L	5		0
34	STYLEWRITER PRINTER 2200	2/21/96	6/30/10	390							390	390	S/L	5		0
35	BROTHER INTELLIFAX 1250	3/27/97		370							370	370	S/L	5		0
36	CHAIR - GRAY (DEB BEST)	8/29/97		244							244	244	S/L	7		0
37	TELEPHONE SYSTEM - 6 PHNS	10/22/97		7,330							7,330	7,330	S/L	7		0
38	HP 4000TN PRINTER W/ENVLP	12/29/97	6/30/10	1,908							1,908	1,908	S/L	5		0
39	SEARS TV/VCR	10/01/98		212							212	212	S/L	5		0
40	1 -2-DRWR LATERAL FILE	4/14/00		254							254	254	S/L	7		0
41	BACKUP/TAPE DRIVE	2/06/01	6/30/10	1,491							1,491	1,491	S/L	3		0
42	2 BLINDS	4/30/01		230							230	230	S/L	7		0
43	1/2 IBOOK GE CMPTR - DICK	9/04/01		648							648	648	S/L	3		0
44	IMAC - DICK (30%)	10/21/02	6/30/10	227							227	227	S/L	3		0
45	IMAC G4 - ROSE	11/01/02		1,690							1,690	1,690	S/L	3		0
46	EBS OFFICE MACHINE	2/07/03		278							278	278	S/L	3		0
47	POWERMAC SERVER	7/21/03		1,539							1,539	1,539	S/L	3		0
48	IBOOK - PAUL	3/03/04		1,937							1,937	1,937	S/L	3		0
51	DRY ERASE BOARDS - 3	1/10/91		168							168	168	S/L	7		0
52	1 MACBOOK	6/27/06		1,345							1,345	1,345	S/L	3		0

CLIENT 16 THE CONSENSUS COUNCIL, INC. 45-0418456

9/13/10 01.25PM

NO.	DESCRIPTION	DATE ACQUIRED	DATE SOLD	COST/ BASIS	BUS PCT.	CUR 179 BONUS	SPECIAL DEPR. ALLOW.	PRIOR 179/ BONUS/ SP. DEPR.	PRIOR DEC BAL DEPR.	SALVAG /BASIS REDUCT	DEPR BASIS	PRIOR DEPR.	METHOD	LIFE	RATE	CURRENT DEPR.
53	POWERLITE LCD PROJECTOR	6/27/06		953							953	953	S/L	3		0
54	SHARP AR-M455N COPIER	9/28/06		9,830							9,830	5,406	S/L	5		1,966
55	3 - IMAC COMPUTERS	5/30/07		5,112							5,112	3,550	S/L	3		1,562
56	1 MACBOOK	9/12/06		2,948							2,948	2,744	S/L	3		164
57	IMAC COMPUTER - PAUL	6/20/08		1,702							1,702	567	S/L	3		567
59	LAPTOP - ROSE	7/27/09		1,307							1,307		S/L	3		399
60	MAC COMPUTER	2/03/10		2,809							2,809		S/L	3		390
	TOTAL FURNITURE AND FIXTURE			57,317		0	0	0	0	0	57,317	45,876				5,048
	IMPROVEMENTS															
49	CARPET	4/30/01	6/30/10	5,409							5,409	5,409	S/L	5		0
50	DUCTWORK & WIRING	4/30/01		4,209							4,209	4,209	S/L	5		0
58	SIGN - EXTERIOR	8/04/08		1,746							1,746	229	S/L	7		249
	TOTAL IMPROVEMENTS			11,364		0	0	0	0	0	11,364	9,847				249
	TOTAL DEPRECIATION			68,681		0	0	0	0	0	68,681	55,723				5,297
	GRAND TOTAL DEPRECIATION			68,681		0	0	0	0	0	68,681	55,723				5,297
	DEPRECIATION ASSETS SOLD			11,349		0	0	0	0	0	11,349	11,349				0
	DEPR REMAINING ASSETS			57,332		0	0	0	0	0	57,332	44,374				5,297