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Form 990  Department of the Treasury Internal Revenue Service	Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)	OMB No 1545-0047 2009 Open to Public Inspection
	The organization may have to use a copy of this return to satisfy state reporting requirements	

A For the 2009 calendar year, or tax year beginning 07-01-2009 and ending 06-30-2010				
B Check if applicable ☐ Address change ☐ Name change ☐ Initial return ☐ Terminated ☐ Amended return ☐ Application pending	Please use IRS label or print or type. See Specific Instructions.	C Name of organization COMMONWEAL		D Employer identification number 94-2366094
		Doing Business As		E Telephone number (415) 868-0970
		Number and street (or P O box if mail is not delivered to street address) P O BOX 316	Room/suite	G Gross receipts \$ 4,728,574
		City or town, state or country, and ZIP + 4 BOLINAS, CA 949240316		
		F Name and address of principal officer MICHAEL LERNER P O BOX 316 BOLINAS, CA 949240316		
I Tax-exempt status ☒ 501(c) (3) ◀ (insert no) ☐ 4947(a)(1) or ☐ 527		H(b) Are all affiliates included? ☐ Yes ☐ No If "No," attach a list (see instructions)		
J Website: ▶ WWW.COMMONWEAL.ORG		H(c) Group exemption number ▶		
K Form of organization ☒ Corporation ☐ Trust ☐ Association ☐ Other ▶			L Year of formation 1976	M State of legal domicile CA

Part I Summary			
Activities & Governance	1 Briefly describe the organization's mission or most significant activities Education, charity, research contributing to health of individuals, public, global environment		
	2 Check this box ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets		
	3 Number of voting members of the governing body (Part VI, line 1a) 3 _____		
	4 Number of independent voting members of the governing body (Part VI, line 1b) 4 _____		
	5 Total number of employees (Part V, line 2a) 5 _____ 3		
	6 Total number of volunteers (estimate if necessary) 6 _____		
	7a Total gross unrelated business revenue from Part VIII, column (C), line 12 7a _____		
	b Net unrelated business taxable income from Form 990-T, line 34 7b _____		
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9 Program service revenue (Part VIII, line 2g)	2,954,459	2,353,805
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	317,986	282,963
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	93,921	56,088
	12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	76,687	166,049
		3,443,053	2,858,905
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)	1,700	2,120
	14 Benefits paid to or for members (Part IX, column (A), line 4)		0
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	1,905,573	1,993,702
	16a Professional fundraising fees (Part IX, column (A), line 11e)		9,558
	b Total fundraising expenses (Part IX, column (D), line 25) ☒ 216,885		
	17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24f)	2,071,533	1,371,205
	18 Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	3,978,806	3,376,585
	19 Revenue less expenses Subtract line 18 from line 12	-535,753	-517,680
	Net Assets or Fund Balances		Beginning of Current Year
20 Total assets (Part X, line 16)		6,499,209	6,062,127
21 Total liabilities (Part X, line 26)		192,187	316,020
22 Net assets or fund balances Subtract line 21 from line 20		6,307,022	5,746,107

Part II Signature Block	
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
	***** Signature of officer 2011-03-15 Date
	SUSAN BRAUN EXECUTIVE DIRECTOR Type or print name and title
Paid Preparer's Use Only	Preparer's signature Michael Smith Date 2011-03-15 Check if self-employed ☒ Preparer's identifying number (see instructions)
	Firm's name (or yours if self-employed), address, and ZIP + 4 WILSON MARKLE STUCKEY HARDESTY & BOTT 101 LARKSPUR LANDING CIRCLE SUITE 2 LARKSPUR, CA 949391750
	EIN Phone no (415) 925-1120

May the IRS discuss this return with the preparer shown above? (see instructions) ☒ Yes ☐ No

Part III

Statement of Program Service Accomplishments

1

Briefly describe the organization’s mission

Engage in educational, charitable and research activities which contribute to the health of individuals, to public health and to the health of the global environment Commonweal is dedicated to healing ourselves and healing the earth To this end, Commonweal has developed programs of national and often international distinction in seven major fields of work cancer patients, physicians and health professionals, at-risk youth, environmental health, preserving oceans and ocean life, permaculture gardening and continuing adult education through collaborative learning The cancer program, health professional training and environmental health programs are internationally recognized The programs for at-risk youth, ocean and marine conservation and permaculture gardening have national reputations for excellence

2

Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☒ Yes ☐ No

If “Yes,” describe these new services on Schedule O

3

Did the organization cease conducting, or make significant changes in how it conducts, any program services? ☐ Yes ☒ No

If “Yes,” describe these changes on Schedule O

4

Describe the exempt purpose achievements for each of the organization’s three largest program services by expenses Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a

(Code) (Expenses \$ 973,793 including grants of \$) (Revenue \$ 97,301)

The Institute for the Study of Health and Illness (ISHI) - Dr Rachel Naomi Remen, internationally known for her work in healing with patients and health professionals, serves as the director of ISHI ISHI helps physicians, medical students, nurses and other health professionals who seek to restore the principles of healing to the practice of medicine and health care ISHI conducts faculty development trainings for Healers Art faculty, healing workshops for the public and continuing medical education workshops and retreats for physicians The Healers Art program started in 1992 with one school at the University of California, San Francisco During the 2009-10 school year, 306 faculty members and 1,529 students participated in The Healers Art Course and during the 2010-11 school year, 68 schools will teach The Healers Art Course, including new programs in Australia and Taiwan Finding Meaning in Medicine (FMM) provides a venue for physicians around the United States and the world to self-organize into small groups (at their workplaces or in their homes) to form communities of like-minded physicians for mutual support in practicing a medicine of service, human connection and compassionate healing There are currently 100 FMM groups around the United States and an active on-line community of over 1,000 physicians ISHI also published an important paper this year, "Professional Formation Extending Medicine's Lineage of Service into the Next Century," in the prestigious journal Academic Medicine

4b

(Code) (Expenses \$ 592,213 including grants of \$ 1,175) (Revenue \$ 5,273)

The Collaborative on Health and the Environment (CHE)CHE is an international partnership committed to strengthening the scientific and public dialogue on the impact of environmental factors on human health and catalyzing initiatives to address these concerns CHE has been instrumental in leveraging mainstream health-affected constituencies in the environmental health science revolution and engaging researchers, health professionals and environmental health and justice advocates from diverse sectors Founded in 2002, CHE members include over 4,000 partners in 48 states and 45 countries who serve a wide range of populations CHE translates and disseminates emerging environmental health science for different audiences, serves as a highly respected convener of colleagues in various fields, organizes monthly conference calls on relevant topics with leading researchers and develops scientific consensus statements, white papers and fact sheets In addition, CHE facilitates 12 strategic working and discussion groups, including asthma, autism, breast cancer, cancer, electromagnetic fields, fertility/reproductive health, healthy aging/cumulative stressors, integrative health, learning and developmental disabilities, mental health, neurodegenerative diseases and obesity/diabetes Childrens environmental health, fetal origin of adult disease, and climate change are also priority areas Elise Miller serves as the director of CHE

4c

(Code) (Expenses \$ 353,733 including grants of \$ 895) (Revenue \$ 99,115)

The Commonweal Cancer Help Program (CCHP)CCHP, now 26 years old, is perhaps the most respected residential support program for people with cancer and their significant others in the United States Bill Moyers featured CCHP in his award-winning PBS series, Healing and the Mind CCHP provides a week-long program of support groups, yoga, meditation, relaxation, massage, healing arts, primarily vegetarian whole foods cooking, individual counseling and explorations of choices in healing, therapy, and facing death and dying, if and when that time comes CCHP regularly and reliably transforms the lives of participants in lasting and profound ways It changes the experience of living with, and sometimes dying with, cancer Commonweal has hosted 150 week-long CCHP retreats since the inception of the program In addition, work with CCHP has led to the founding of other organizations critical to our work, including the Jenifer Altman Foundation, the Barbara Smith Fund and Smith Farm Center for Healing and the Arts Arlene Allsman serves as the coordinator of CCHP

4d

Other program services (Describe in Schedule O) See also Additional Data for Description

(Expenses \$ 811,022 including grants of \$ 50) (Revenue \$ 211,683)

4e

Total program service expenses \$ 2,730,761

Form 990 (2009)

Part IV Checklist of Required Schedules

		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Yes
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3	No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4	Yes
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5	
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6	No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," complete Schedule D, Part II	7	No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8	No
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9	No
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	Yes
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.	11	Yes
	• Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.		
	• Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.		
	• Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.		
	• Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.		
	• Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.		
	• Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X.		
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12	Yes
12A	Was the organization included in consolidated, independent audited financial statements for the tax year?	Yes	No
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional	12A	No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b	No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the U S? If "Yes," complete Schedule F, Part II	15	No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the U S? If "Yes," complete Schedule F, Part III	16	No
17	Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19	No
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20	No

Part IV

Checklist of Required Schedules (continued)

21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	21		No
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>	22		No
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to line 25</i>	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If "Yes," complete Schedule L, Part II</i>	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? <i>If "Yes," complete Schedule L, Part III</i>	27		No
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
a	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28a	Yes	
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28b	Yes	
c	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or owner? <i>If "Yes," complete Schedule L, Part IV</i>	28c	Yes	
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		No
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1</i>	34	Yes	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	35	Yes	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	

Part V

Statements Regarding Other IRS Filings and Tax Compliance

			Yes	No
1a	Enter the number reported in Box 3 of Form 1096, <i>Annual Summary and Transmittal of U.S. Information Returns</i> . Enter -0- if not applicable	1a46	1cYes	
	b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		
c				
2a				
b			2bYes	
3a			3a	No
b			3b	
4a			4a	No
b				
5a			5a	No
b			5b	No
c			5c	
6a			6a	No
b			6b	
7				
a			7a	No
b			7b	
c			7c	No
d			7d	
e			7e	No
f			7f	No
g			7gYes	
h			7hYes	
8			8	
9				
a			9a	
b			9b	
10				
a			10a	
b			10b	
11				
a			11a	
b			11b	
12a			12a	
b			12b	

Part VI

Governance, Management, and Disclosure

For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Section A. Governing Body and Management

			Yes	No
1a	Enter the number of voting members of the governing body . . .	1a	6	
b	Enter the number of voting members that are independent . . .	1b	4	
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? . . .	3		No
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a material diversion of the organization's assets? . . .	5		No
6	Does the organization have members or stockholders?	6		No
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a		No
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons? . . .	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
a	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No

Section B. Policies

(This Section B requests information about policies not required by the Internal Revenue Code.)

			Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a		No
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	10b		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11	Yes	
11A	Describe in Schedule O the process, if any, used by the organization to review the Form 990			
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	Yes	
13	Does the organization have a written whistleblower policy?	13	Yes	
14	Does the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
a	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line a or b, describe the process in Schedule O (See instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16b		

Section C. Disclosure

17	List the States with which a copy of this Form 990 is required to be filed CA , WA , NY
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you make these available. Check all that apply. ☐ Own website ☒ Another's website ☒ Upon request
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table.
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization. VANESSA MARCOTTE P O BOX 316 BOLINAS,CA 949240316 (415) 868-0970

Part VII

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

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

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year Use Schedule J-2 if additional space is needed

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

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

☐ Check this box if the organization did not compensate any current or former officer, director, trustee or key employee

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
MARTIN KRASNEY VICE PRESIDENT	1 00	X		X				0	0	0
MICHAEL LERNER PRESIDENT	10 00	X		X				58,337	0	0
BETH SETRAKIAN DIRECTOR	1 00	X						0	0	0
JAN VISICK TREASURER	1 00	X		X				0	0	0
LINDY GRAHAM DIRECTOR	1 00	X						0	0	0
ERIC KARPELES DIRECTOR	1 00	X						0	0	0
SUSAN BRAUN EXECUTIVE DIRECTOR AND SEC	32 00			X				151,254	0	10,208
VANESSA MARCOTTE CFO	32 00			X				77,859	0	3,943
RACHEL REMEN PROGRAM DIRECTOR	32 00				X			161,056	0	21,389

1b	Total	448,506	0	35,540
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2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization 2

3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	Yes	No
3			No
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	Yes	
4		Yes	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>	Yes	
5		Yes	

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization

(A) Name and business address	(B) Description of services	(C) Compensation
DAVID STEINHART 205 CAMINO ALTO SUITE 265 MILL VALLEY, CA 94941	JUVENILE JUSTICE PROGRAM DIRECTOR	235,500

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization 1

Part VIII

Statement of Revenue

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	1a	Federated campaigns . . .	1a				
	b	Membership dues	1b				
	c	Fundraising events	1c	7,837			
	d	Related organizations	1d				
	e	Government grants (contributions)	1e				
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	2,345,968			
	g	Noncash contributions included in lines 1a-1f \$ 42,766					
	h	Total. Add lines 1a-1f		2,353,805			
Program Service Revenue			Business Code				
	2a	Commonweal Cancer Help	624,100	99,556	99,556		
	b	Institute for the Stud	611,710	94,688	94,688		
	c	FISCAL AGENT	561,000	47,000	47,000		
	d	OTHER	900,099	41,719	41,719		
	e						
	f	All other program service revenue					
	g	Total. Add lines 2a-2f		282,963			
Other Revenue	3	Investment income (including dividends, interest and other similar amounts)		60,164			60,164
	4	Income from investment of tax-exempt bond proceeds . .					
	5	Royalties					
	6a	(i) Real					
		161,762					
		(ii) Personal					
	b	Less rental expenses					
	c	Rental income or (loss)		161,762			
	d	Net rental income or (loss)		161,762	129,362		32,400
	7a	(i) Securities					
		1,853,221					
		(ii) Other					
	b	Less cost or other basis and sales expenses		1,857,297			
	c	Gain or (loss)		-4,076			
	d	Net gain or (loss)		-4,076			-4,076
	8a	Gross income from fundraising events (not including \$ 7,837 of contributions reported on line 1c) See Part IV, line 18		6,215			
		a					
		2,975					
b	Less direct expenses						
c	Net income or (loss) from fundraising events . .		3,240			3,240	
9a	Gross income from gaming activities See Part IV, line 19						
	a						
b	Less direct expenses						
c	Net income or (loss) from gaming activities . .						
10a	Gross sales of inventory, less returns and allowances		10,444				
	a						
b	Less cost of goods sold		9,397				
c	Net income or (loss) from sales of inventory . .		1,047	1,047			
Miscellaneous Revenue		Business Code					
11a							
b							
c							
d	All other revenue						
e	Total. Add lines 11a-11d						
12	Total revenue. See Instructions		2,858,905	413,372	0	91,728	

Part IX

Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.		(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U S See Part IV, line 21	1,225	1,225		
2	Grants and other assistance to individuals in the U S See Part IV, line 22	895	895		
3	Grants and other assistance to governments, organizations, and individuals outside the U S See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	431,671	217,237	140,175	74,259
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	1,127,792	928,837	144,274	54,681
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	61,647	47,483	10,899	3,265
9	Other employee benefits	247,963	181,732	46,699	19,532
10	Payroll taxes	124,629	90,142	25,273	9,214
11	Fees for services (non-employees)				
a	Management				
b	Legal	135	103	24	8
c	Accounting	24,288		24,288	
d	Lobbying				
e	Professional fundraising See Part IV, line 17	9,558			9,558
f	Investment management fees				
g	Other	667,594	647,538	3,664	16,392
12	Advertising and promotion	8,052	7,970	40	42
13	Office expenses	39,273	35,954	1,624	1,695
14	Information technology	36,225	31,525	1,303	3,397
15	Royalties	6,100	6,100		
16	Occupancy	199,696	193,615	4,561	1,520
17	Travel	47,960	44,878	179	2,903
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	35,749	35,605	108	36
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	77,145	65,432	8,785	2,928
23	Insurance	36,585	25,614	9,470	1,501
24	Other expenses Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)				
a	FOOD	56,729	55,265	1,261	203
b	Printing and copying	32,842	23,071	192	9,579
c	Maintenance and repairs	29,652	27,632	1,515	505
d	TELEPHONE	26,369	24,615	1,133	621
e	POSTAGE AND SHIPPING	21,247	16,517	428	4,302
f	All other expenses	25,564	21,776	3,044	744
25	Total functional expenses. Add lines 1 through 24f	3,376,585	2,730,761	428,939	216,885
26	Joint costs. Check here ☐ if following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X

Balance Sheet

						(A)		(B)
						Beginning of year		End of year
Assets	1	Cash—non-interest-bearing				51,990	1	48,779
	2	Savings and temporary cash investments				680,296	2	467,227
	3	Pledges and grants receivable, net				285,000	3	525,000
	4	Accounts receivable, net				24,522	4	
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L					5	
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L					6	
	7	Notes and loans receivable, net					7	
	8	Inventories for sale or use				15,654	8	11,786
	9	Prepaid expenses and deferred charges				23,516	9	18,364
	10a	Land, buildings, and equipment—cost or other basis. Complete Part VI of Schedule D	10a	3,016,858				
	b	Less accumulated depreciation	10b	978,941	2,098,584	10c	2,037,917	
	11	Investments—publicly traded securities				3,319,647	11	2,630,910
	12	Investments—other securities. See Part IV, line 11					12	302,979
	13	Investments—program-related. See Part IV, line 11					13	
	14	Intangible assets					14	
	15	Other assets. See Part IV, line 11				0	15	19,165
	16	Total assets. Add lines 1 through 15 (must equal line 34)				6,499,209	16	6,062,127
Liabilities	17	Accounts payable and accrued expenses				166,888	17	206,262
	18	Grants payable					18	81,112
	19	Deferred revenue				25,299	19	28,646
	20	Tax-exempt bond liabilities					20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D					21	
	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L					22	
	23	Secured mortgages and notes payable to unrelated third parties					23	
	24	Unsecured notes and loans payable to unrelated third parties					24	
	25	Other liabilities. Complete Part X of Schedule D					25	
	26	Total liabilities. Add lines 17 through 25				192,187	26	316,020
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here ☒ and complete lines 27 through 29, and lines 33 and 34.							
	27	Unrestricted net assets				4,092,279	27	4,060,004
	28	Temporarily restricted net assets				2,214,743	28	1,686,103
	29	Permanently restricted net assets					29	
	Organizations that do not follow SFAS 117, check here ☐ and complete lines 30 through 34.							
	30	Capital stock or trust principal, or current funds					30	
	31	Paid-in or capital surplus, or land, building or equipment fund					31	
	32	Retained earnings, endowment, accumulated income, or other funds					32	
	33	Total net assets or fund balances				6,307,022	33	5,746,107
	34	Total liabilities and net assets/fund balances				6,499,209	34	6,062,127

Part XI **Financial Statements and Reporting**

	Yes	No
1 Accounting method used to prepare the Form 990 ☐ Cash ☒ Accrual ☐ Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O		
2a Were the organization's financial statements compiled or reviewed by an independent accountant? . .		No
b Were the organization's financial statements audited by an independent accountant? 	Yes	
c If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O . . .	Yes	
d If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both ☒ Separate basis ☐ Consolidated basis ☐ Both consolidated and separated basis		
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? 		No
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits . .		

SCHEDULE A
(Form 990 or 990EZ)

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.

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization
COMMONWEAL

Employer identification number
94-2366094

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 **section 170(b)(1)(A)(i).**

2

☐

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

3

☐

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

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

☐

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 to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See **section 509(a)(3).** Check the box that describes the type of supporting organization and complete lines 11e through 11h

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 it 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?

(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 the supported organization?

(ii)

a family member of a person described in (i) above?

(iii)

a 35% controlled entity of a person described in (i) or (ii) above?

h

☐

Provide the following information about the supported organization(s)

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

(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 IRC 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 any "unusual grants.")	3,698,985	4,519,056	4,425,381	2,954,459	2,353,805	17,951,686
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	3,698,985	4,519,056	4,425,381	2,954,459	2,353,805	17,951,686
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)						7,959,323
6 Public Support. Subtract line 5 from line 4						9,992,363

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	3,698,985	143,487	4,425,381	2,954,459	2,353,805	17,951,686
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	70,258	143,487	145,501	92,586	92,564	544,396
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income (Explain in Part IV) Do not include gain or loss from the sale of capital assets						
11 Total support (Add lines 7 through 10)						18,496,082
12 Gross receipts from related activities, etc (See instructions)					12	422,769

13 First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 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	54 020 %
15 Public Support Percentage for 2008 Schedule A, Part II, line 14	15	91 730 %

- 16a 33 1/3% support test—2009. If the organization did not check the box on line 13, and 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 the 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 IIISupport Schedule for Organizations Described in IRC 509(a)(2)
(Complete only if you checked the box on line 9 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
1Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3Gross receipts from activities that are not an unrelated trade or business under section 513						
4Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5The value of services or facilities furnished by a governmental unit to the organization without charge						
6Total. Add lines 1 through 5						
7aAmounts included on lines 1, 2, and 3 received from disqualified persons						
bAmounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
cAdd lines 7a and 7b						
8Public Support (Subtract line 7c from line 6)						

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9Amounts from line 6						
10aGross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
bUnrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
cAdd lines 10a and 10b						
11Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13Total support (Add lines 9, 10c, 11 and 12.)						
14First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here						

Section C. Computation of Public Support Percentage

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

Section D. Computation of Investment Income Percentage

17Investment income percentage for 2009 (line 10c column (f) divided by line 13 column (f))	17	
18Investment income percentage from 2008 Schedule A, Part III, line 17	18	
19a33 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		
b33 1/3% support tests—2008. If the organization did not check a box on line 14 or line 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		
20Private 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. Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Provide any other additional information. See instructions

Additional Data

Software ID:
Software Version:
EIN: 94-2366094
Name: COMMONWEAL

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

4d. Other program services			
(Code)	(Expenses \$ 62,120	including grants of \$)	(Revenue \$ 22,000)
The Commonweal Biomonitoring Resource Center (CBRC)CBRC helps citizen groups around the world measure, or biomonitor, the levels of toxic substances or their breakdown products in human tissue and fluids By documenting the personal chemical body burdens of key individuals, CBRC generates and delivers clear messages about the significance of biomonitoring data to the public, community groups and state legislators Biomonitoring data tells us that toxic chemicals pollute our internal landscape and suggests that this landscape is precious, fragile and vulnerable to chemically related harm This year, the CBRC continued to be active in biomonitoring research and advocacy at the state, national and international levels, including working with the World Health Organization and European Union CBRC undertook two key studies in California, in the Imperial and Central Valleys In conjunction with CHE, CBRC compiled and released the report Mind Disrupted How Toxic Chemicals May Change How We Think and Who We Are Sharyle Patton serves as the director of CBRC			
(Code)	(Expenses \$ 139,701	including grants of \$)	(Revenue \$ 15,000)
Health Care Without Harm (HCWH)HCWH is an international campaign for environmentally responsible health care founded at Commonweal Commonweal continues to support HCWH Executive Committee and special initiatives HCWH is the premier market-based environmental health advocacy campaign, now in over 40 countries It influences 90% of health care group purchasing in the United States During the year ended June 30, 2010, the HCWH CleanMed conference featured 45 panel sessions, three keynote addresses, a hospital leadership plenary panel, 40 posters, and an exhibit hall of environmentally preferable vendors Davis Baltz leads Commonweals involvement with HCWH Mr Baltz also represents Commonweal in the coalition Californians for a Healthy and Green Economy (CHANGE) In addition to being active in state legislative and regulatory initiatives, Mr Baltz produced a press conference in Los Angeles, timed to coincide with the Academy Awards, calling attention to "bad actor" chemicals that need better regulation in California The "Toxies "			
(Code)	(Expenses \$ 72,255	including grants of \$)	(Revenue \$ 4,912)
The Campaign for Safe Cosmetics (CSC)CSC protects women and children from harmful chemicals in personal care products Commonweal co-founded CSC Commonweal continues to contribute science-based materials and strategic direction for CSC Important federal legislation, the Safe Cosmetics Act of 2010, was introduced in July 2010 by U S Representative Jan Schakowsky with Representatives Edward Markey and Tammy Baldwin CSC produced two key reports this year "Pretty Scary Heavy Metals in Face Paint" and "Not So Sexy The Health Risks of Secret Chemicals in Fragrance " Heather Sarantis leads Commonweals involvement with CSC			
(Code)	(Expenses \$ 197,700	including grants of \$)	(Revenue \$)
The Commonweal Juvenile Justice Program (CJJJ)CJJJ is widely regarded as the foremost juvenile justice advocacy program in California Attorney David Steinhart serves as the director of CJJP Mr Steinhart has played a central role in all major juvenile justice reforms in California over the past 20 years and consults with State programs around the nation			
(Code)	(Expenses \$ 42,518	including grants of \$)	(Revenue \$)
The Ocean Policy Program (OPP)Burr Heneman, who crafted and implemented California's model legislation on sustainable ocean policies and is now leading international work on seabird survival, serves as the director of OPP Mr Heneman is gently phasing out this program, but he remains active with Commonweal			

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

4d. Other program services			
(Code)	(Expenses \$ 3,861	including grants of \$)	(Revenue \$)
Commonweal Garden and the Regenerative Design Institute (RDI)Penny Livingston-Stark and James Stark serve as the co-directors of RDI RDI offers classes, workshops and internships in permaculture gardening and nature awareness Each year, hundreds of people come to the Garden to learn the principles of permaculture and regenerative design, which not only apply to gardening but also represent a tool kit of ethical ways of living on Earth During the year ended June 30, 2010, RDI offered more than 25 classes, helping over 500 individuals to better connect with the natural world, increase their leadership skills and desire to serve their local communities and learn how to live in a way that enhances the Earth and the world in which we live			
(Code)	(Expenses \$ 82,432	including grants of \$)	(Revenue \$ 1,070)
The New School at Commonweal (TNS)TNS is the most recent innovation by Commonweal This extremely low-cost model of life-long learning is directly relevant to promoting personal well-being, community resilience and a global ethic in the challenging times in which we live During the year ended June 30, 2010, TNS held 14 audio events and eight live events Michael Lerner serves as the director and Kyra Epstein serves as the coordinator of TNS			
(Code)	(Expenses \$ 210,435	including grants of \$ 50)	(Revenue \$ 168,701)
1,000 FlowersAutismBioInitiativeGreen InitiativesWomen's Health and the EnvironmentGangesNonprofit CollaborationGalleryArthur Okamura FundMarinRetreat CenterHeydendhal Center			

Form 990, Part IX - Statement of Functional Expenses - 24a - 24e Other Expenses

<i>Do not include amounts reported on line 6b, 8b, 9b, and 10b of Part VIII.</i>	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
FOOD	56,729	55,265	1,261	203
Printing and copying	32,842	23,071	192	9,579
Maintenance and repairs	29,652	27,632	1,515	505
TELEPHONE	26,369	24,615	1,133	621
POSTAGE AND SHIPPING	21,247	16,517	428	4,302

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.**

OMB No 1545-0047

2009

Open to Public
Inspection

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) or Form 990-EZ, line 35a (regarding proxy tax), then

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

Name of the organization COMMONWEAL	Employer identification number 94-2366094
--	--

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 ▶ \$
- 2 Enter the amount of any excise tax incurred by organization managers under section 4955 ▶ \$
- 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 funtion activities ▶ \$
- 3 Total 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 State 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												
1a Total lobbying expenditures to influence public opinion (grass roots lobbying)		64													
b Total lobbying expenditures to influence a legislative body (direct lobbying)		107													
c Total lobbying expenditures (add lines 1a and 1b)		171													
d Other exempt purpose expenditures		3,376,414													
e Total exempt purpose expenditures (add lines 1c and 1d)		3,376,585													
f Lobbying nontaxable amount Enter the amount from the following table in both columns		318,829													
<table><thead><tr><th>If the amount on line 1e, column (a) or (b) is:</th><th>The lobbying nontaxable amount is:</th></tr></thead><tbody><tr><td>Not over \$500,000</td><td>20% of the amount on line 1e</td></tr><tr><td>Over \$500,000 but not over \$1,000,000</td><td>\$100,000 plus 15% of the excess over \$500,000</td></tr><tr><td>Over \$1,000,000 but not over \$1,500,000</td><td>\$175,000 plus 10% of the excess over \$1,000,000</td></tr><tr><td>Over \$1,500,000 but not over \$17,000,000</td><td>\$225,000 plus 5% of the excess over \$1,500,000</td></tr><tr><td>Over \$17,000,000</td><td>\$1,000,000</td></tr></tbody></table>		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		
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														
g Grassroots nontaxable amount (enter 25% of line 1f)		79,707													
h Subtract line 1g from line 1a If zero or less, enter -0-		0													
i Subtract line 1f from line 1c If zero or less, enter -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 on page 4.)

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	367,429	370,051	328,225	318,829	1,384,534
b Lobbying ceiling amount (150% of line 2a, column(e))					2,076,801
c Total lobbying expenditures	33,402	23,308	1,055	171	57,936
d Grassroots non-taxable amount	91,857	92,513	82,056	79,707	346,133
e Grassroots ceiling amount (150% of line 2d, column (e))					519,200
f Grassroots lobbying expenditures	231	49	1,055	64	1,399

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)		(b)
		Yes	No	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 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, lines 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.

Identifier	Return Reference	Explanation

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

▶ **Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.**
▶ **Attach to Form 990. ▶ See separate instructions.**

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization
COMMONWEAL

Employer identification number
94-2366094

Part I

Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	
2	Aggregate contributions to (during year)	
3	Aggregate grants from (during year)	
4	Aggregate value at end of year	
5	Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No	
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit ☐ Yes ☐ No	

Part II

Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1

Purpose(s) of conservation easements held by the organization (check all that apply)

☐ Preservation of land for public use (e g , recreation or pleasure)

☐ Preservation of an historically importantly land area

☐ Protection of natural habitat

☐ Preservation of a certified historic structure

☐ Preservation of open space

2

Complete lines 2a–2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

	Held at the End of the Year
2a	
2b	
2c	
2d	

3

Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year ▶ _____

4

Number of states where property subject to conservation easement is located ▶ _____

5

Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

☐ Yes ☐ No

6

Staff and volunteer hours devoted to monitoring, inspecting and enforcing conservation easements during the year ▶ _____

7

Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ \$ _____

8

Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?

☐ Yes ☐ No

9

In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization’s financial statements that describes the organization’s accounting for conservation easements

Part III

Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

1a

If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items

b

If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

(i) Revenues included in Form 990, Part VIII, line 1▶ \$ _____

(ii) Assets included in Form 990, Part X▶ \$ _____

2

If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items

a Revenues included in Form 990, Part VIII, line 1▶ \$ _____

b Assets included in Form 990, Part X▶ \$ _____

For Privacy Act and Paperwork Reduction Act Notice, see the Intructions for Form 990

Cat No 52283D

Schedule D (Form 990) 2009

Part III

Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3

Using the organization's accession and other records, check any of the following that are a significant use of its collection items (check all that apply)

a

☐ Public exhibition

b

☐ Scholarly research

c

☐ Preservation for future generations

d

☐ Loan or exchange programs

e

☐ Other

4

Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV

5

During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?

☐ Yes

☐ No

Part IV

Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a

Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?

☐ Yes

☐ No

b

If "Yes," explain the arrangement in Part XIV and complete the following table

	Amount
1c	
1d	
1e	
1f	

2a

Did the organization include an amount on Form 990, Part X, line 21?

☐ Yes

☐ No

b

If "Yes," explain the arrangement in Part XIV

Part V

Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

	(a)Current Year	(b)Prior Year	(c)Two Years Back	(d)Three Years Back	(e)Four Years Back
1a	Beginning of year balance	3,319,647			
b	Contributions	0			
c	Investment earnings or losses	4,669			
d	Grants or scholarships	0			
e	Other expenditures for facilities and programs	390,427			
f	Administrative expenses	0			
g	End of year balance	2,933,889			

2

Provide the estimated percentage of the year end balance held as

a

Board designated or quasi-endowment ▶ 100.000 %

b

Permanent endowment ▶ 0 %

c

Term endowment ▶ 0 %

3a

Are there endowment funds not in the possession of the organization that are held and administered for the organization by

(i)

unrelated organizations

3a(i)

No

(ii)

related organizations

3a(ii)

No

b

If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

3b

4

Describe in Part XIV the intended uses of the organization's endowment funds

Part VI

Investments—Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		985,500		985,500
b Buildings		519,527	51,815	467,712
c Leasehold improvements		1,406,831	842,323	564,508
d Equipment		52,260	48,016	4,244
e Other		52,740	36,787	15,953
Total. Add lines 1a-1e (Column (d) should equal Form 990, Part X, column (B), line 10(c).) ▶				2,037,917

Part XIReconciliation of Change in Net Assets from Form 990 to Financial Statements		
1	Total revenue (Form 990, Part VIII, column (A), line 12)	12,858,905
2	Total expenses (Form 990, Part IX, column (A), line 25)	3,376,585
3	Excess or (deficit) for the year Subtract line 2 from line 1	-517,680
4	Net unrealized gains (losses) on investments	-43,235
5	Donated services and use of facilities	
6	Investment expenses	
7	Prior period adjustments	
8	Other (Describe in Part XIV)	
9	Total adjustments (net) Add lines 4 - 8	-43,235
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	-560,915

Part XIIReconciliation of Revenue per Audited Financial Statements With Revenue per Return		
1	Total revenue, gains, and other support per audited financial statements	12,817,838
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12	
a	Net unrealized gains on investments2a-43,235	
b	Donated services and use of facilities2b2,168	
c	Recoveries of prior year grants2c	
d	Other (Describe in Part XIV)2d	
e	Add lines 2a through 2d	2e-41,067
3	Subtract line 2e from line 1	32,858,905
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1	
a	Investment expenses not included on Form 990, Part VIII, line 7b4a	
b	Other (Describe in Part XIV)4b	
c	Add lines 4a and 4b	
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	52,858,905

Part XIIIReconciliation of Expenses per Audited Financial Statements With Expenses per Return		
1	Total expenses and losses per audited financial statements	13,378,753
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	
a	Donated services and use of facilities2a2,168	
b	Prior year adjustments2b	
c	Other losses2c	
d	Other (Describe in Part XIV)2d	
e	Add lines 2a through 2d	2e2,168
3	Subtract line 2e from line 1	33,376,585
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	
a	Investment expenses not included on Form 990, Part VIII, line 7b4a	
b	Other (Describe in Part XIV)4b	
c	Add lines 4a and 4b	
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	53,376,585

Part XIVSupplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b Also complete this part to provide any additional information

Identifier	Return Reference	Explanation
Part V, Line 4	Description of Intended Use of Endowment Funds	PROGRAMS, AS DEEMED APPROPRIATE, BY THE BOARD OF DIRECTORS
Part X	Description of Uncertain Tax Positions Under FIN 48	Effective July 1, 2009, Commonwealth adopted the provisions of Financial Accounting Standards Board (FASB) Interpretation Number 48 (FIN 48), "Accounting for Uncertainty in Income Taxes, An interpretation of FASB [Accounting Standards Codification (ASC) 740] " Those provisions require management of Commonwealth to consider certain tax positions taken by Commonwealth A tax position is a position taken in a previously filed tax return or a position management of Commonwealth expects to take in a future tax return that figures in measuring current or deferred income tax assets and liabilities for interim or annual periods A tax position can result in a permanent reduction in income taxes payable, a deferral of income taxes otherwise currently payable to future years or a change in the expected realizability of deferred tax assets A tax position also encompasses, but is not limited to 1 A decision not to file a tax return 2 An allocation or a shift of income between jurisdictions 3 The characterization of income or a decision to exclude reporting taxable income in a return 4 A decision to classify a transaction, entity or other position in a tax return as tax exempt 5 The status of an entity, including its status as a pass-through or tax-exempt entity Evaluating a tax position requires management of Commonwealth to determine, for each tax position, whether it is more likely than not that, upon examination by taxing authorities, such authorities will uphold the tax position and, for each more-likely-than-not tax position, determine the highest benefit with a more than 50% likelihood of realization upon ultimate settlement Accordingly, it is possible that tax positions taken on tax returns and related amounts recognized herein could vary Commonwealth files tax returns with the IRS and various states Commonwealth recognizes interest and penalties related to income taxes and tax positions with interest and income tax expense, respectively As of and for the year ended June 30, 2010, interest and penalties related to income taxes and tax positions were not material As of June 30, 2010, management of Commonwealth believes that there are no tax positions of Commonwealth where it is reasonably possible that the total amount of unrecognized tax benefits will significantly increase or decrease within the period ending June 30, 2011 As of June 30, 2010, open tax periods subject to future examination by taxing authorities cover periods from July 1, 2006 through June 30, 2010 Management of Commonwealth does not believe that differences between income taxes Commonwealth measures using the current "tax position" method and the methods Commonwealth used previously to be material to the financial position of Commonwealth, except for the additional disclosures

Schedule J
(Form 990)

Compensation Information

OMB No 1545-0047

2009

Open to Public Inspection

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

▶ Complete if the organization answered "Yes" to Form 990, Part IV, question 23.

▶ Attach to Form 990. ▶ See separate instructions.

Name of the organization COMMONWEAL	Employer identification number 94-2366094
--	--

Part I

Questions Regarding Compensation

	Yes	No
1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items		
☐ First-class or charter travel		
☐ Travel for companions		
☐ Tax idemnification and gross-up payments		
☐ Discretionary spending account		
☐ Housing allowance or residence for personal use		
☐ Payments for business use of personal residence		
☐ Health or social club dues or initiation fees		
☐ Personal services (e g , maid, chauffeur, chef)		
b If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all the expenses described above? If "No," complete Part III to explain	1b	
2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2	
3 Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director Check all that apply		
☐ Compensation committee		
☐ Independent compensation consultant		
☐ Form 990 of other organizations		
☐ Written employment contract		
☒ Compensation survey or study		
☒ Approval by the board or compensation committee		
4 During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization		
a Receive a severance payment or change-of-control payment?	4a	No
b Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b	No
c Participate in, or receive payment from, an equity-based compensation arrangement?	4c	No
If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III		
Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9.		
5 For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of		
a The organization?	5a	No
b Any related organization?	5b	No
If "Yes," to line 5a or 5b, describe in Part III		
6 For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of		
a The organization?	6a	No
b Any related organization?	6b	No
If "Yes," to line 6a or 6b, describe in Part III		
7 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	7	No
8 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regs section 53 4958-4(a)(3)? If "Yes," describe in Part III	8	No
9 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?	9	

Part II

Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.

Note. The sum of columns (B)(i)-(iii) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a.

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
MICHAEL LERNER	(i)	58,337	0	0	0	0	58,337	0
	(ii)	0	0	0	0	0	0	0
SUSAN BRAUN	(i)	151,254	0	0	0	10,958	162,212	0
	(ii)	0	0	0	0	0	0	0
RACHEL REMEN	(i)	161,056	0	0	8,143	13,934	183,133	0
	(ii)	0	0	0	0	0	0	0

Part IIISupplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8. Also complete this part for any additional information.

Identifier	Return Reference	Explanation
Supplemental Information	Part III	MICHAEL LERNER IS AN EMPLOYEE OF THE JENIFER ALTMAN FOUNDATION, AN UNRELATED ENTITY. COMMONWEAL CONTRACTS WITH THE JENIFER ALTMAN FOUNDATION FOR SERVICES MICHAEL LERNER PROVIDES TO COMMONWEAL. COMMONWEAL EXPENSES UNDER THE CONTRACT TOTALLED \$58,791 FOR THE FISCAL YEAR ENDED JUNE 30, 2010, AND \$58,337 FOR THE CALENDAR YEAR ENDED DECEMBER 31, 2009.

Schedule L
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Transactions with Interested Persons

▶ Complete if the organization answered
"Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c,
or Form 990-EZ, Part V lines 38a or 40b.
▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization
COMMONWEAL

Employer identification number
94-2366094

Part I Excess Benefit Transactions (section 501(c)(3) and section 501 (c)(4) organizations only).

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b

1	(a) Name of disqualified person	(b) Description of transaction	(c) Corrected?	
			Yes	No

2 Enter the amount of tax imposed on the organization managers or disqualified persons during the year under section 4958 ▶ \$

3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization ▶ \$

Part II Loans to and/or From Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 26, or Form 990-EZ, Part V, line 38a

(a) Name of interested person and purpose	(b) Loan to or from the organization?		(c)Original principal amount	(d)Balance due	(e) In default?		(f) Approved by board or committee?		(g)Written agreement?	
	To	From			Yes	No	Yes	No	Yes	No
Total ▶ \$										

Part III Grants or Assistance Benefitting Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

(a) Name of interested person	(b)Relationship between interested person and the organization	(c)Amount of grant or type of assistance

Part IV Business Transactions Involving Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
BURR HENEMAN	SPOUSE OF DIRECTOR	30,780	OCEAN POLICY PROGRAM		No
SHARYLE PATTON	SPOUSE OF DIRECTOR	36,219	BIOMONITORING PROGRAM		No
JENIFER ALTMAN FOUNDATION	MICHAEL LERNER	58,791	EMPLOYS PRESIDENT/DIRECTOR		No

SCHEDULE M
(Form 990)

NonCash Contributions

OMB No 1545-0047

2009

Open to Public Inspection

►Complete if the organization answered "Yes" on Form 990, Part IV, lines 29 or 30.
► Attach to Form 990.

Name of the organization
COMMONWEAL

Employer identification number
94-2366094

Part I

Types of Property

	(a) Check if applicable	(b) Number of Contributions	(c) Revenues reported on Form 990, Part VIII, line 1g	(d) Method of determining revenues
1 Art—Works of art				
2 Art—Historical treasures				
3 Art—Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities—Publicly traded	X	2	42,766	AVERAGE HI/LO
10 Securities—Closely held stock				
11 Securities—Partnership, LLC, or trust interests				
12 Securities—Miscellaneous				
13 Qualified conservation contribution—Historic structures				
14 Qualified conservation contribution—Other				
15 Real estate—Residential				
16 Real estate—Commercial				
17 Real estate—Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ► ()				
26 Other ► ()				
27 Other ► ()				
28 Other ► ()				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement29

30a During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?

31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?

32a Does the organization hire or use third parties or related organizations to solicit, process, or sell non-cash contributions?

33 If the organization did not report revenues in column (c) for a type of property for which column (a) is checked, describe in Part II

Yes

No

No

No

No

Part II

Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information.

Identifier	Return Reference	Explanat ion
Method for Determining Number of Contributors	Part I, Column (b)	COUNTED NUMBER OF UNIQUE CONTRIBUTIONS

SCHEDULE O
(Form 990)

Supplemental Information to Form 990

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization
COMMONWEAL

Employer identification number
94-2366094

Identifier	Return Reference	Explanation
Form 990, Part III, line 2	New Program Services	End of Life Initiative Both CCHP and ISHI have components that focus on the end of life. Many of the individuals who are a part of these programs are interested in learning how to learn from and cope with death, be it their own, their patients or their loved ones. Interest has been high among virtually every circle in the Commonwealth community. A planning team, including volunteers, staff, and board members, has been formed to explore and implement program components that complement and round out the current programs of Commonwealth. The initial program is a series of TNS Conversations, beginning in September 2010. In addition, ISHI is developing and will be offering a new program, A Conversation on Death. Learning from the Deaths that Touch our Lives, in October 2010. Environmental Health Primary Prevention Training Program During the year ended June 30, 2010, Commonwealth embarked upon a new initiative designed to train advocates in environmental health science, with a focus on primary prevention. Environmental health is a compelling subject that touches all people. Many lay advocates and professionals addressing environmental health concerns find themselves in leadership positions without a sufficient grasp of how to articulate the science behind their work. There are many key opportunities where advocates can influence important appropriations and policy decisions and increasing the capacity of these advocates to articulate concerns based on science strengthens their effectiveness. A recent needs assessment affirmed that a program like this would be well-received and that no other trainings of this kind currently exist. In this context, Commonwealth conducted a pilot training in August 2010, on environmental health science specific to breast cancer. A second training will focus on reproductive health. Commonwealth has been successful in raising funds for this program from the Cedar Tree Foundation, The Kresge Foundation, The San Francisco Foundation, Susan G. Komen for the Cure and an anonymous donor. Upon successful raising of multi-year funds, Commonwealth will hold future trainings that may expand to include other diseases, disenfranchised populations and/or focus on specific regions or communities. Cancer Help Program Expansion In its 2007 report entitled, Cancer Care for the Whole Patient: Meeting Psychosocial Health Needs, an Institute of Medicine (IOM) panel stated: Cancer care today often provides state-of-the-science biomedical treatment, but fails to address the psychological and social (psychosocial) problems associated with the illness. This failure can compromise the effectiveness of health care and thereby adversely affect the health of cancer patients. Psychological and social problems created or exacerbated by cancer, including depression and other emotional problems, lack of information or skills needed to manage the illness, lack of transportation or other resources, and disruptions in work, school and family life, cause additional suffering, weaken adherence to prescribed treatments and threaten patients' return to health. It is clear from this report and from long experience that one of the greatest failings of cancer medicine in the United States is the inadequacy of psychological support programs for people with cancer. Many studies have shown that people with cancer who engage in first-rate support programs have higher quality of life, and may in some instances live longer, than those who do not have access to such programs. Skilled psychosocial support impacts pain, anxiety, depression, sleeplessness and many other markers of distress. Yet not all cancer support programs have strong outcomes. Further, disenfranchised people and those with limited resources are the least likely to receive strong psychosocial support help. CCHP has a 26-year history of reaching into this void. It has wide recognition for its transformative power for people with cancer and their loved ones. Commonwealth currently offers six retreats each year, which does not meet demand. The waiting time is often one year. To help with this and to extend the reach into this area of need, Commonwealth has created a series of one-day programs offered in the San Francisco Bay Area. Kate Holcombe, former coordinator of and current yoga teacher for CCHP is leading this series at her studio, the Healing Yoga Foundation, in San Francisco. Ms. Holcombe has offered four one-day programs with great success. Evaluations have been strong, participation is very good, Commonwealth has found (not surprisingly) that alumni from CCHP attend the one-day programs and those who are first exposed to CCHP during the one-day programs then come to the weeklong program at Commonwealth. Commonwealth plans more one-day programs during the year ending June 30, 2011. Commonwealth will also extend the outreach of the existing CCHP to underserved individuals, with an initial focus on English-speaking women descended from Spanish-speaking countries. Commonwealth is also ex-

Identifier	Return Reference	Explanation
Form 990, Part III, line 2	New Program Services	ploring further expansion of CCHP with CCHP alumni in Texas who are planning to bring the program there They have come to Commonw eal for preliminary training and established a pla nning and w orking group They are now exploring venues, funding opportunities and staffing Commonw eal has received grant funding to begin the outreach w ork The expanded program h as strong potential for support from organizations and individuals in Texas as Commonw eal initiates outreach efforts there

Identifier	Return Reference	Explanation
Form 990, Part VI, Section B, line 11		REVIEWED BY STAFF AND THE FINANCE COMMITTEE AND A COPY GIVEN TO THE BOARD

Identifier	Return Reference	Explanation
Form 990, Part VI, Section B, line 12c		THE CONFLICT OF INTEREST POLICY IS INCLUDED IN THE STAFF HANDBOOK AND THE BYLAWS THE STAFF HANDBOOK IS GIVEN UPON HIRE AND WHEN REVISED AN ACKNOWLEDGEMENT IS SIGNED BY STAFF AND KEPT IN THE EMPLOYEE FILE THE BYLAWS ARE GIVEN TO DIRECTORS UPON JOINING THE BOARD AND WHEN REVISED

Identifier	Return Reference	Explanation
Form 990, Part VI, Section B, line 15		COMMONWEAL DOES A COMPARISON TO OTHER NONPROFITS IN NORTHERN CALIFORNIA, THEN FACTORS IN E XPERIENCE AND RESPONSIBILITY USING THIS INFORMATION, THE BOARD OF DIRECTORS APPROVES COMP ENSATION FOR ALL BOARD DIRECTORS, OFFICERS, THE PRESIDENT, CEO, EXECUTIVE DIRECTOR AND CFO

Identifier	Return Reference	Explanation
Form 990, Part VI, Section C, line 19		COMMONWEAL DOES NOT MAKE ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY OR FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC

Identifier	Return Reference	Explanation
FORM 990, PART XI, LINE 2C		COMMONWEAL HAS MADE NO CHANGES TO THIS PROCESS FROM THE PRIOR YEAR

SCHEDULE R
(Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.
▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization
COMMONWEAL

Employer identification number
94-2366094

Part I Identification of Disregarded Entities (Complete if the organization answered "Yes" on Form 990, Part IV, line 33.)

(a) Name, address, and EIN of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

Part II Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity
THE HALE FUND P O BOX 316 BOLINAS, CA 949240316 94-3116561	INACTIVE SUPPORTING ORGANIZATION	CA	501(c)(3)	Line 11a, I	COMMONWEAL

Part III

Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?	
							Yes	No		Yes	No

Part IV

Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership

Part V

Transactions With Related Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35, or 36.)

Note. Complete line 1 if any entity is listed in Parts II, III or IV

1

During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

a

Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity

b

Gift, grant, or capital contribution to other organization(s)

c

Gift, grant, or capital contribution from other organization(s)

d

Loans or loan guarantees to or for other organization(s)

e

Loans or loan guarantees by other organization(s)

f

Sale of assets to other organization(s)

g

Purchase of assets from other organization(s)

h

Exchange of assets

i

Lease of facilities, equipment, or other assets to other organization(s)

j

Lease of facilities, equipment, or other assets from other organization(s)

k

Performance of services or membership or fundraising solicitations for other organization(s)

l

Performance of services or membership or fundraising solicitations by other organization(s)

m

Sharing of facilities, equipment, mailing lists, or other assets

n

Sharing of paid employees

o

Reimbursement paid to other organization for expenses

p

Reimbursement paid by other organization for expenses

q

Other transfer of cash or property to other organization(s)

r

Other transfer of cash or property from other organization(s)

Yes

No

1a

1b

1c

1d

1e

1f

1g

1h

1i

1j

1k

1l

1m

1n

1o

1p

1q

1r

No

No

No

No

No

No

No

No

No

No

No

No

No

No

No

No

No

No

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

(a) Name of other organization	(b) Transaction type(a-r)	(c) Amount involved
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

[illegible]