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.Form **990**

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

2011

Open to Public

Depa	artment of the Treasu nat Revenue Service	The organization may have to use a copy of this return to satisfy state reporting	ng requirements		İnspection
Α	For the 2011 ca	endar year, or tax year beginning , 2011, and ending			
В	Check if applicable	C	D Emplo	yer Identifi	cation Number
	Address change	Common Counsel Foundation	94-	-32141	.66
	Name change	405 14th Street #809	E Telepi	none numbe	er
	Initial return	Oakland, CA 94612	(51	٤3 (0	4-2995
	Terminated				
	Amended return		G Gross	receipts \$	4,884,403
	Application pen	F Name and address of principal officer	(a) Is this a group reti		
			l(b) Are all affiliates in		Yes
1	Tax-exempt statu	X 501(c)(3)	If 'No,' attach a lis	t (see instri	uctions) — —
<u>.</u>			(c) Group exemption	number ►	
ĸ	Form of organizati				gal domicile CA
	rt:1 . Sumn		<u> 2333 j</u>	Otato or reg	gar as
1.6		cribe the organization's mission or most significant activities. Provide p	hilanthrop	ic res	sources for
		ssive social movements by supporiting CBOs engaged			
Se .		, women, youth, people of color and others working			
Governance		, and build a healthy, sustainable environment.	id to maren		
λe	2 Check this	box I if the organization discontinued its operations or disposed of more	e than 25% of its	net ass	ets
		voting members of the governing body (Part VI, line 1a)		3	
တ္	4 Number o	independent voting members of the governing body (Part VI, line 1b)		4	
Activities &		per of individuals employed in calendar year 2011 (Part V, line 2a)		5	
ŧ		per of volunteers (estimate if necessary)		6	
⋖		ated business revenue from Part VIII, column (C), line 12		7a	
	b Net unrela	ted business taxable income from Form 990-T, line 34	r	7 b	
			Prior Yea		Current Year
a		ns and grants (Part VIII, line 1h)	1,489,		4,187,18
Š	_	ervice revenue (Part VIII, line 2g)	183,		222,41
Revenue		t income (Part VIII, column (A), lines 3, 4, and 7d)		798.	-24,16
Œ	Y	nue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		533.	4,87
		nue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)	1,679,		4,390,31
		similar amounts paid (Part IX, column (A), lines 1-3)	626,	945.	669,10
	· ·	aid to or for members (Part IX, column (A), line 4)		000	200 71
Ø		ther compensation, employee benefits (Part IX, column (A), lines 5-10)	337,	237.	388,71
Expenses	16a Profession	al fundraising fees செய்ர்≽⊏ேப்பா ற (A), line 11e)			
bei		aising expenses (Part IX, column (D), line (25) > 120, 473.	14:34.0	is Vy (
ũ		enses (Part Column (A), lines 11 a, 01 - 24e)	193,		379,21
	18 Total exp	nses Add lines 13-17 (must equal Part lx2column (A), line 25)	1,157,		1,437,03
	19 Revenue	ess expenses Subtract line 18-from line 12	522,		2,953,28
5 8	19 Revenue	OGDEN, UT	Beginning of Curre		End of Year
ance ance	20 Total asse	s (Part X, line 16)	719,		3,720,31
Asse Bal:		ties (Part X, line 26)		819.	79,16
und (•			· · · · · · · · · · · · · · · · · · ·
 D-		or fund balances Subtract line 21 from line 20	687,	0/0.1	3,641,15
		ure Block		 -	
Und com	er penalties of perjury plete Declaration of	I declare that I have examined this return, including accompanying schedules and statements, and to the reparer (other than officer) is based on all information of which preparer has any knowledge	e best of my knowled	je and belie	ef, it is true, correct, and
		Rille		127	
c:-	Sin	ature of officer	Date		
olg Hص		atricia Stonal Board Chair			
110		e or print name and title			
	- 1 'yk				TIN
	. Printly	1//8	Check	"	
Pai	d CARI	1. HU CARL 1. HU	self-emplo	yed P	00044659
re I-	re Print/Ty CARI eparer e Only Sig				2400-0-
JS	e Only Firm's a		Firm's EIN		3409437
		Daly City, CA 94015	Phone no	(650)) 758-1222

May the IRS discuss this return with the preparer shown above? (see instructions)

BAA For Paperwork Reduction Act Notice, see the separate instructions.

TEEA0113L 08/18/11

No

Form **990** (2011)

Form 990 (2011) C	ommon Counsel Foundation	94-3214166	Page 2
Part III Statem	ent of Program Service Accomplishments		
Check If	Schedule O contains a response to any question in this Part III		X
 Briefly describe 	the organization's mission		
<u>See Schedu</u>	le 0		
		- · 	
2 Did the organiza	ation undertake any significant program services during the year which were not listed	on the prior	
Form 990 or 990)-EZ?	Yes	X No
If 'Yes,' describe	e these new services on Schedule O		
3 Did the organiza	ation cease conducting, or make significant changes in how it conducts, any program	services? Yes	X No
If 'Yes,' describe	e these changes on Schedule O		
Section 501(c)(3	ganization's program service accomplishments for each of its three largest program sign and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the expenses, and revenue, if any, for each program service reported	ervices, as measured by e amount of grants and allo	xpenses ocations to
Strategic more than solutions support to comprehens also inves	Grantmaking - Common Counsel Foundation provides directly of the large state of large	ect grant funding ncing effective mework prioritiz eadership to adv ogical challenges to aggregate and	es ance CCF_ expand_
			_ _
	(Expenses \$ 336,436. including grants of \$)	(D	2,417.)
See_ Schedu	1e 0		
			
Philanthro services t justice an impact. W administra research, compliance	(Expenses \$ 192,238. including grants of \$ 906.) pic Services - Common Counsel Foundation provides struction independent foundations and donors that share a condition are interested in streamlining their grantmaking and are provide comprehensive grants program management and tion services including philanthropic advising, grants due diligence, board support, accounting, grants admit In partnership with our member funds and clients, iver over \$20 million in grants since 1986.	mategic philanthr mitment to socia nd deepening thei d foundation making strategy, nistration, and	l r legal
4d Other program s (Expenses \$	ervices (Describe in Schedule O.) including grants of \$) (Revenue	\$	
	ervice expenses ► 1,203,123.	·	<u></u>
BAA	TEEA0102L 07/05/11	Form	990 (2011)

Pa	art IV	Checklist of Required Schedules			
				Yes	No
1	ls the Sche	e organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete edule A	1	Х	
2	! Is the	e organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	X	
3	Did to for p	he organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates ublic office? If 'Yes,' complete Schedule C, Part I	3		х
4	Secti in eff	ion 501(c)(3) organizations Did the organization engage in lobbying activities, or have a section 501(h) election fect during the tax year? If 'Yes,' complete Schedule C, Part II	4		Х
5	ls the asses	e organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, ssments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III	5		Х
6	Did tl to pro Part	he organization maintain any donor advised funds or any similar funds or accounts for which donors have the right ovide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, I	6	X	
7	Did tl	he organization receive or hold a conservation easement, including easements to preserve open space, the onment, historic land areas or historic structures? If 'Yes,' complete Schedule D, Part II	7		Х
8	Did the comp	he organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' plete Schedule D, Part III	8_		Х
9	or pre	the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X, ovide credit counseling, debt management, credit repair, or debt negotiation services? If 'Yes,' complete idule D, Part IV	9	 	Х
10	Did ti perm	he organization, directly or through a related organization, hold assets in temporarily restricted endowments, ianent endowments, or quasi-endowments? If 'Yes,' complete Schedule D, Part V	10		х
11	If the	organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VIII, IX, as applicable		*	,
	a Did th D, Pa	he organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule art VI	11 a	Х	
	b Did thasset	the organization report an amount for investments— other securities in Part X, line 12 that is 5% or more of its total is reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VII	11 b		х
	c Did the asset	he organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total is reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII	11 c		Х
	ın Pa	the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported int X, line 16? If 'Yes,' complete Schedule D, Part IX	11 d		X
	e Did th	he organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e		X
	f Did th the o	the organization's separate or consolidated financial statements for the tax year include a footnote that addresses organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If 'Yes,' complete Schedule D, Part X	11 f		X
12		he organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete dule D, Parts XI, XII, and XIII	12a	Х	
	ıf the	the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		X
		e organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		Х
14	a Did th	ne organization maintain an office, employees, or agents outside of the United States?	14a		X
	b Did the busin at \$1	ne organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, less, investment, and program service activities outside the United States, or aggregate foreign investments valued 00,000 or more? If 'Yes,' complete Schedule F, Parts I and IV	14b		Х
15	Did th or en	ne organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization tity located outside the United States? If 'Yes,' complete Schedule F, Parts II and IV	15		X
16	Did th	ne organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to duals located outside the United States? If 'Yes,' complete Schedule F, Parts III and IV	16		Х
17	Did th colum	ne organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, nn (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I (see instructions)	17		Х
18	Did th lines	ne organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, 1c and 8a? If 'Yes,' complete Schedule G, Part II	18		X
	comp	ne organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' blete Schedule G, Part III	19		Х
		ne organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20		X
	b If 'Ye	s' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20 b		

1.00	KTE TO THE OWNER OF THE QUITE OF THE QUITE OF THE OWNER OWNER OF THE OWNER O			
			Yes	No
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? If 'Yes,' complete Schedule I, Parts I and II	21	х	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2° If 'Yes,' complete Schedule I, Parts I and III	22		Х
23	Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If 'Yes,' complete Schedule J</i>	23		х
24 8	a 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, and that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K If 'No,'go to line 25	24a		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		<u> </u>
(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		
C	I Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25 a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I	25a		Х
ł	b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part I	25b		Х
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? If 'Yes,' complete Schedule L, Part II	26		_X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If 'Yes,' complete Schedule L, Part III	27	,	Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)		**	
a	A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		X
t	A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28b		Х
	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29	<u> </u>	Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31_	ļ	X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If 'Yes,' complete Schedule R, Part I	33		х
34	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts_II,_III,_IV,_and_V,_	34		X
35 a	line I are the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2	35b		Х
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2	36_		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI	37		Х
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	X	
BAA		Form	990 ((2011)

	m 990 (2011) Common Counsel Foundation	94-321416	0	r	age
Pal	Statements Regarding Other IRS Filings and Tax Compliance				Г
	Check if Schedule O contains a response to any question in this Part V			Yes	No
1:	a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	1a 23			
	b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b 0	1		
	c Did the organization comply with backup withholding rules for reportable payments to vendo	rs and reportable gaming		:	
	(gambling) winnings to prize winners?	. 1	1c	X	
	a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a 7			-
ı	b If at least one is reported on line 2a, did the organization file all required federal employmen		2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see i		- مغهد		.,
	a Did the organization have unrelated business gross income of \$1,000 or more during the year		3a		X
	olf 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O		_3b		 -
	At any time during the calendar year, did the organization have an interest in, or a signature financial account in a foreign country (such as a bank account, securities account, or other t	e or other authority over, a financial account)?	4a		х
ı	o If 'Yes,' enter the name of the foreign country				
_	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and I		7.5		- ,,
	a Was the organization a party to a prohibited tax shelter transaction at any time during the tax		5 a		X
	b Did any taxable party notify the organization that it was or is a party to a prohibited tax shell	ter transaction?	5 b		_ <u></u>
	c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?		5c		
6 8	Does the organization have annual gross receipts that are normally greater than \$100,000, a solicit any contributions that were not tax deductible?	and did the organization	6a		Х
ŀ	o If 'Yes,' did the organization include with every solicitation an express statement that such c not tax deductible?	contributions or gifts were	6b		
7	Organizations that may receive deductible contributions under section 170(c).			^;	ĺ
ā	a Did the organization receive a payment in excess of \$75 made partly as a contribution and particles provided to the payor?	partly for goods and	- 7a	,	Х
ŀ	If 'Yes,' did the organization notify the donor of the value of the goods or services provided?)	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for w				,,
	Form 8282?	احا	7c	3	X
	I If 'Yes,' indicate the number of Forms 8282 filed during the year	7d		2	X
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal		7e 7f		X
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal ber		- ''		
	If the organization received a contribution of qualified intellectual property, did the organizat as required?		7g		<u> </u>
r	n If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the Form 1098-C?	e organization file a	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organization, or a donor advised fund maintained by a sponsoring organization, holdings at any time during the year?	ing organizations. Did the nave excess business	8		·
9	Sponsoring organizations maintaining donor advised funds.		A. Coor E. A.	L	
	a Did the organization make any taxable distributions under section 4966?		9a		
	Did the organization make a distribution to a donor, donor advisor, or related person?		9b	==	=
	Section 501(c)(7) organizations. Enter:		Series.		
	Initiation fees and capital contributions included on Part VIII, line 12	10a	4		1
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10Ь	* - * *		
11	Section 501(c)(12) organizations. Enter		~ ~,		
а	Gross income from members or shareholders	11 a			1
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	11 b			
12 a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of	of Form 1041?	12a		
	If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year	12Ь	4.4		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			ž	
a	is the organization licensed to issue qualified health plans in more than one state?		13a		<u> </u>
	Note. See the instructions for additional information the organization must report on Schedu	ile O			
Ь	Enter the amount of reserves the organization is required to maintain by the states in	126	37) \$1,"		
_	which the organization is licensed to issue qualified health plans. Enter the amount of reserves on hand	13b	e vinger i Start		
·	Enter the amount of reserves on name		L	l	

14a Did the organization receive any payments for indoor tanning services during the tax year?

b If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O

14a

14b

Part VI Governance, Management and Disclosure For each 'Yes' response to lines 2 through 7b below, and for a 'No' response to line 8a. 8b. or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. $\overline{\mathbf{X}}$ Check if Schedule O contains a response to any question in this Part VI Section A. Governing Body and Management Yes No 9 1a Enter the number of voting members of the governing body at the end of the tax year if there are material differences in voting rights among members 1a of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O 9 b Enter the number of voting members included in line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other 2 Χ officer, director, trustee or key employee? Did the organization delegate control over management duties customarily performed by or under the direct supervision Х 3 of officers, directors or trustees, or key employees to a management company or other person? Did the organization make any significant changes to its governing documents Δ since the prior Form 990 was filed? 5 Did the organization become aware during the year of a significant diversion of the organization's assets? 6 6 Did the organization have members or stockholders? 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? 7 a X b Are any governance decisions of the organization reserved to (or subject to approval by) members, X stockholders, or other persons other than the governing body 7 b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following Х a The governing body? 8a 8b Х **b** Each committee with authority to act on behalf of the governing body? Is there any officer, director or 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 Q 9 Х Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes Nο 10 a Did the organization have local chapters, branches, or affiliates? 10 a Χ b If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their 10b operations are consistent with the organization's exempt purposes? Χ 11 a 11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? b Describe in Schedule O the process, if any, used by the organization to review this Form 990 See Schedule O 12a Did the organization have a written conflict of interest policy? If 'No.' go to line 13 12 a Х b Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise 12b Х c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this is done 12 c Х See Schedule O Х 13 13 Did the organization have a written whistleblower policy? 14 Did the organization have a written document retention and destruction policy? 14 Х 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official See Schedule O 15a 15b X b Other officers of key employees of the organization See Schedule O If 'Yes' to line 15a or 15b, describe the process in Schedule O (See instructions) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a 16a taxable entity during the year? Χ 44 b If 'Yes,' did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure 17 List the states with which a copy of this Form 990 is required to be filed ► _ CA Section 6104 requires an organization to make its Forms 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 X Another's website Upon request 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 during the tax year. See Schedule O State the name, physical address, and telephone number of the person who possesses the books and records of the organization Layla Cooper 678 13th Street, Suite 100 Oakland CA 94612 (510) 834-2995

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Form 990 (2011)	Common	Counsel	Foundation

94-3214166

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

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

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

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

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

		(C)								
(A) Name and title	(B) Average hours	unles	Position (do not check more than one box, unless person is both an officer and a director/trustee)					(D) Reportable compensation from	(E) Reportable compensation from	(F) Estimated amount of other
	per week (describe hours for related organiza- tions in Schedule O)	Individual trustee or director	Institutional trustee		Key employee	Highest compensated employee	Former	the organization (W 2/1099-MISC)	related organizations (W·2/1099·MISC)	compensation from the organization and related organizations
(1) Patricia St. Onge President] 37.5	х		X				0.	0.	0.
				_			-	0.		
(2) Michelle Natividad Rodr Secretary	1 1	х		x				0.	0.	0.
(3) Dan Ringer Barwick							-			
Treasurer	11	Х		X				0.	0.	0.
(4) Stephen Kimball										
Director	11	Х						0.	0.	0.
_(5)_Linda_Burnham	_			١						
Director	11	Х						0,	0.	0.
_(6) Mark Kelley	-	'			[•
Director	1_1_	Х	\sqcup					0.	0.	0.
(7) Rosi Reyes	-	, ,			Í					0
Director	1	X	\vdash		_			0.	0.	0.
(8) Marcos Vargas		_,,_								
Director Walls	1	_X_						0.	0.	0.
_(9) George Wells Director	-	v		- 1				0.	0.	0.
(10) Ron Rowell	1 1	<u>X</u>						<u> </u>		<u> </u>
Executive Direc	35			х	- 1	1		85,800.	0.	10,852.
(11)							_	- 03,000.		
	1 1			1	l				ŀ	
(12)										
	<u> </u>									
(14)										

FART VIR Section A. Officers, Directors, Trust		(Cy	<u> </u>		C)	<u> </u>	4110	I riigiiest con	ipensacea un	inployees (eerily
(A) Name and title	(B) Average hours per	box,	unle er an	heck ss pe	Position neck more than or ss person is both a director/trusted		an	(D) Reportable compensation from	(E) Reportable compensation from	(F) Estimated amount of other compensation
	week (describ e hours for related organi-	individu or direc	nutusni	Officer	Key employee	Highest employ	Former	the organization (W-2/1099-MISC)	related organization (W 2/1099-MISC)	from the organization and related organizations
	for related organi-	al truste	Institutional trust		ployee	Highest compensated employee				organizations
	zations in Sch O)	ee	stee			sated				
(15)			-							
(16)										
(17)	-			_						
(18)	<u> </u>				-					
(19)	-									
(20)										
(21)										
(22)	 			-						
(23)	-						_			
(24)										
(25)										
1 b Sub-total	<u> </u>	لــــا			L		>	85,800.		0. 10,852
c Total from continuation sheets to Part VII, Section d Total (add lines 1b and 1c)	A						▶	85,800.		0. 0. 0 0. 10,852
Total number of individuals (including but not limite from the organization 0	d to the	ose I	ste	d ab	ove)	who	re			
				_						Yes N
3 Did the organization list any former officer, director on line 1a? If 'Yes,' complete Schedule J for such in	ndıvıdu	al			_					3 >
4 For any individual listed on line 1a, is the sum of re the organization and related organizations greater to such individual	portabl han \$1	e co: 50,00	mpe 00?	nsa If 'Y	tion 'es'	and comp	oth olet	er compensation e Schedule J for	from	4
5 Did any person listed on line 1a receive or accrue c for services rendered to the organization? If 'Yes,' or	ompen comple	satio	n fre chea	om i lule	any <i>J foi</i>	unrel r <i>suci</i>	late h p	ed organization or erson	ındıvıdual	5 ×
Section B. Independent Contractors										
1 Complete this table for your five highest compensation from the organization. Report compe	ed indensation	pen for	the	cale	ntrac	tors yea	tha r er	nding with or with	in the organizati	on's tax year
Name and business addres	s				-			Description of		(C) Compensation
				_						
										
2 Total number of independent contractors (including \$100,000 in compensation from the organization ►		t lımı	ted	to ti	nose	liste	ed a	above) who receive	ed more than	

Par	t 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	1 a Federated campaigns b Membership dues c Fundraising events d Related organizations. e Government grants (contributions) f All other contributions, gifts, grants, and similar amounts not included above g Noncash contributions included in lns 1a-1f: h Total. Add lines 1a-1f	•	4,187,185.	,		
PROGRAM SERVICE REVENUE	2a Fees 561000 b		222,417.	222,417.		
PROG	f All other program service revenue g Total. Add lines 2a-2f	•	222,417.		×y	
	 3 Investment income (including dividends, interest and other similar amounts) 4 Income from investment of tax-exempt bond proceeds 5 Royalties 	A	3,116.			3,116.
	(i) Real (ii) Personal 6a Gross rents b Less: rental expenses c Rental income or (loss) d Net rental income or (loss) 7a Gross amount from sales of assets other than inventory 466,806.	•		8 4 7 3 3		,
	b Less cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss)	•	-27,280.		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	-27,280.
OTHER REVENUE	8a Gross income from fundraising events (not including \$		-			
OT	c Net income or (loss) from fundraising events	•	-			
	9a Gross income from gaming activities See Part IV, line 19 b Less direct expenses c Net income or (loss) from gaming activities	>		* 1	,	
	10a Gross sales of inventory, less returns and allowances b Less cost of goods sold c Net income or (loss) from sales of inventory	>				
	Miscellaneous Revenue Business Code 11 a Misc. 900099 b	•	4,879.	4,879.		
	d All other revenue e Total. Add lines 11a-11d	•	4,879.			04.164
	12 Total revenue. See instructions.	_ ►	4,390,317.	227,296.	0.	_24,164.

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)

	Check if Schedule O contains a re	esponse to any question	in this Part IX	<u> </u>	
	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
	Grants and other assistance to governments and organizations in the United States See Part IV, line 21	669,100.	669,100.		
2	Grants and other assistance to individuals in the United States See Part IV, line 22				•
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16			*	
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	96,652.	19,330.	28,996.	48,326.
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.
7	Other salaries and wages	240,645.	170,258.	51,242.	19,145.
8	Pension plan accruals and contributions (include section 401(k) and section 403(b) employer contributions)				
9	Other employee benefits	24,100.	19,639.	4,119.	342.
10	Payroll taxes	27,321.	16,775.	6,445.	4,101.
11	Fees for services (non-employees)				
	a Management				
1	b Legal				
	c Accounting	10,870.		10,870.	
	d Lobbying				
	e Professional fundraising services See Part IV, line 17		4	* * * *	
	Investment management fees				
	g Other	232,918.	192,583.	145.	40,190.
	Advertising and promotion	202/3201			
13	Office expenses	24,295.	14,842.	4,956.	4,497.
14	Information technology	12,060.	11,365.	414.	281.
15	Royalties	12,000.	11,303.		201.
16	Occupancy	19,290.	12,282.	4,364.	2,641.
17	Travel	23,434.	22,972.	306.	156.
	Payments of travel or entertainment expenses for any federal, state, or local public officials			300.	
19 20	Conferences, conventions, and meetings Interest	15,230.	15,230.		·
	Payments to affiliates.				
22		903.	534.	201.	168.
23		1,765.	1,034.	484.	247.
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)	,			
	Misc. Expenses	13,295.	12,023.	896.	376.
	On-site Coordination	8,040.	8,040.		
	Sponsorship Expenses	7,700.	7,700.		
C	Member Fund Expenses	3,489.	_3,489.		
6	All other expenses	5,927.	5,927.		
25	Total functional expenses Add lines 1 through 24e	1,437,034.	1,203,123.	113,438.	120,473.
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here				
	SOP 98-2 (ASC 958-720)				
BAA					Form 990 (2011)

Pa	ırt X	Balance Sheet				· · · · · · · · · · · · · · · · · · ·
				(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing		121,322.	1	526,569
	2	Savings and temporary cash investments		146,892.	2	1,241,226
	3	Pledges and grants receivable, net		441,700.	3	482,639
	4	Accounts receivable, net		3,116.	4	10,086
	_	,		2 2 1 2 2 4 19 1	٠,٠	\$ T
	5	Receivables from current and former officers, director and highest compensated employees. Complete Part	II of Schedule L	ces,	5	
	6	Receivables from other disqualified persons (as defin persons described in section 4958(c)(3)(B), and contributions organizations of section 501(c)(9) volunta organizations (see instructions).	y			
ASSETS	7	Notes and loans receivable, net			7	
Ē	8	Inventories for sale or use			8	
S	9	Prepaid expenses and deferred charges		2,479.	9_	2,527
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a 8,5	36.	anipa.	Capital Carlo
	Ь	Less accumulated depreciation	10b 6,1		10c	2,389
		Investments — publicly traded securities	0/1	2,012.	11	1,453,338
1	1	Investments – other securities See Part IV, line 11			12	1, 100, 550
	13	•			13	
1		Investments — program-related. See Part IV, line 11 Intangible assets			14	
	14	3		1 520		1 530
	15	Other assets See Part IV, line 11	24)	1,539.	15	1,539 3,720,313
_	16 17	Total assets. Add lines 1 through 15 (must equal line	34)	719,689. 31,819.	16 17	79,160
	18	Accounts payable and accrued expenses Grants payable	31,613.	18	19,100	
	19	Deferred revenue	 	19	 	
.		Tax-exempt bond liabilities			20	
Ì	21	·	V of Cabadula D		21	
A B I		Escrow or custodial account liability Complete Part I Payables to current and former officers, directors, tru	stees, kev emplovees.	* * * * * * * * * * * * * * * * * * * *	,	, -
ţ		highest compensated employees, and disqualified per of Schedule L	rsons Complete Part II		22	
Ė	23	Secured mortgages and notes payable to unrelated the	nird parties		23	
S	24	Unsecured notes and loans payable to unrelated third	l parties		24	
	25	Other liabilities (including federal income tax, payable and other liabilities not included on lines 17-24) Com	es to related third parties plete Part X of Schedule	s, e D	25	
	26	Total liabilities. Add lines 17 through 25		31,819.	26	79,160
ZET	_	Organizations that follow SFAS 117, check here ► 27 through 29 and lines 33 and 34.	X and complete lines			
	27			عالمت الأنساء الله الله الله الله الله الله الله ال	27	2 992 296
ASSET S		Unrestricted net assets		467,354.		2,882,286 758,867
Ī	28	Temporarily restricted net assets		467,354.	28_	130,001
P	29_	Permanently restricted net assets	ere > and complete		_29	
		Organizations that do not follow SFAS 117, check he			_# ₄ y ₊ -4 ~ * /	
FUZD		lines 30 through 34.				<u> </u>
ĎΙ		Capital stock or trust principal, or current funds		 	30_	
片		Paid-in or capital surplus, or land, building, or equipm		31_		
BALANCES		Retained earnings, endowment, accumulated income,	or other funds		32	
Ë	33	Total net assets or fund balances		687,870.	33_	3,641,153
8 I	34	Total liabilities and net assets/fund balances		719,689.	34	3,720,313.

Forn	n 990 (2011) Common Counsel Foundation	94-3214166	Page) 12
Pai	TXI Reconciliation of Net Assets			
	Check if Schedule O contains a response to any question in this Part XI			
1	Total revenue (must equal Part VIII, column (A), line 12)	1	4,390,31	
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,437,03	
3	Revenue less expenses Subtract line 2 from line 1	3	2,953,28	
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	687,87	0.
5	Other changes in net assets or fund balances (explain in Schedule O)	5		0.
_6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	3,641,15	3.
Pai	t XII⊮ Financial Statements and Reporting			
	Check if Schedule O contains a response to any question in this Part XII			Ш
1	Accounting method used to prepare the Form 990			No_
2 8	Were the organization's financial statements compiled or reviewed by an independent accountant?			Χ
ł	Were the organization's financial statements audited by an independent accountant?		2b X	
(If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversigh 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	t of the audit,	2c	<u>X</u> _
	ın Schedule O			^ 4
(If 'Yes' to line 2a or 2b, check a box below to indicate whether the financial statements for the year were separate basis, consolidated basis, or both X Separate basis Consolidated basis Both consolidated and separate basis	issued on a		•
3 8	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in Audit Act and OMB Circular A-133?	the Single	3a	<u>X</u> _
t	of 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the or audits, explain why in Schedule O and describe any steps taken to undergo such audits	required audit	30	
BAA			Form 990 (20)11)

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SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

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

OMB No 1545 0047

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

Name o	f the organization							Employe	r identifica	tion number	
Com	non Counsel Four								214166		
Part	I Reason for Pub	lic Charity Status	(All organizations	must o	comple	te this	part.)	See i	<u>nstruct</u>	ions.	
The o	rganization is not a priva	ate foundation becaus	se it is (For lines 1 thro	ugh 11,	check o	nly one	box)				
1	A church, convention	n of churches or asso	ciation of churches des	cribed ir	section	170(b)	(1)(A)(i).	•			
2	A school described i	n section 170(b)(1)(A	(Attach Schedule	E)							
3	A hospital or a coop	erative hospital service	ce organization describe	ed in sec	ction 17	0(b)(1)(<i>A</i>	λχiii).				
4	A medical research	organization operated	I in conjunction with a h	nospital e	describe	d in sec	tion 17	0(b)(1)(<i>i</i>	A)(iii) Er	nter the hospital's	
	name, city, and state	=									
5	An organization oper 170(b)(1)(A)(iv). (Co	rated for the benefit omplete Part II)	of a college or university	y owned	or oper	ated by	a gover	nmenta	l unit de:	scribed in section	
6 7	X An organization that		overnmental unit descri substantial part of its su rt II)					t or fron	n the ger	neral public describe	ed
8	A community trust d	escribed in section 1 7	70(b)(1)(A)(vi). (Comple	te Part I	II)						
9	from activities relate investment income a	d to its exempt functi) more than 33-1/3% o ons – subject to certair s taxable income (less mplete Part III)	n except	ions, an	d (2) no	more t	han 33.	1/3% of	its support from arc	oss
10			exclusively to test for pu		-		• •	• •			
11	An organization orga more publicly support describes the type of	anized and operated e rted organizations des f supporting organiza	exclusively for the bene- scribed in section 509(a tion and complete lines	fit of, to i)(1) or s ille thre	perform section 5 ough 11	the fun 609(a)(2 h	ctions o). See s	of, or ca section !	rry out tl 509(a)(3)	ne purposes of one . Check the box the	or at
	a Type I	b Type II	c ☐ Type II						d 🗌	Type III - Other	
е	By checking this box other than foundation section 509(a)(2)	n, I certify that the org n managers and othe	anization is not control r than one or more pub	led direc licly sup	tly or in	directly organiza	by one tions de	or more escribed	disquali in section	fied persons on 509(a)(1) or	
f	If the organization re check this box	eceived a written dete	rmination from the IRS	that is a	a Type I	Type II	or Type	e III sup	porting	organization,	
g	Since August 17, 20	06, has the organizati	on accepted any gift o	r contrib	oution fro	om any	of the fo	ollowing	persons	,?	
										Yes N	lo
	(i) A person who	directly or indirectly c	ontrols, either alone or pported organization?	together	r with pe	ersons d	escribed	d ın (ıı)	and (III)	11 g (i)	
	•	per of a person descri								11 g (ii)	_
	• • •	•	described in (i) or (ii) a	boyo?						11 g (iii)	—
h	• •		e supported organization							119(11)	
		·	1			4354	44				
	(i) Name of supported organization	(II) EIN	(III) Type of organization (described on lines 1-9 above or IRC section (see instructions))	column (i	Is the zation in in listed in overning ment?	the organ columi your su	ou notify lization in n (i) of ipport?	organiz colur organize	s the ration in in (i) ed in the S ?	(vii) Amount of support	1
				Yes	No	Yes	No	Yes	No		
<u>(A)</u>											
<u>(B)</u>										· · · · · · · · · · · · · · · · · · ·	
				}							
(C)											
))		
<u>(D)</u>	 										
(E) _											
<u>_/_</u> _											_
Total											

BAA

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

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III) Section A. Public Support Calendar year (or fiscal year beginning in) ► (d) 2010 (e) 2011 (f) Total (a) 2007 **(b)** 2008 (c) 2009Gifts, grants, contributions, and membership fees received (Do not include any 'unusual grants') 7,742,701. 628,476 664,213. 1,489,969. 4,187,185 772,858. Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 0. The value of services or facilities furnished by a governmental unit to the Ο. organization without charge Total. Add lines 1 through 3 772,858 628,476 664. 213 489,969 4,187,185 7.742, 701. 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) 4,800,559. Public support. Subtract line 5 2,942,142. from line 4 Section B. Total Support Calendar year (or fiscal year (a) 2007 **(b)** 2008 (c) 2009 (d) 2010 (e) 2011 (f) Total beginning in) 7,742,701. 772,858 628,476 664,213 1,489,969 4,187,185 7 Amounts from line 4 Gross income from interest, dividends, payments received on securities loans, rents, rovalties and income from 798 similar sources 3,457 4,924 1,759 3,116 14,054. Net income from unrelated business activities, whether or not the business is regularly 0. carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) See Part IV 15,856 5,533 4,879 26,268. - 3 11 Total support. Add lines 7 through 10 7,783,023. 884,967. 12 Gross receipts from related activities, etc (see instructions) 12 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop** here Section C. Computation of Public Support Percentage 14 Public support percentage for 2011 (line 6, column (f) divided by line 11, column (f)) 14 37.80% 15 53.04% Public support percentage from 2010 Schedule A, Part II, line 14 16a 33-1/3% support test – 2011. If the organization did not check the box on line 13, and the line 14 is 33-1/3% or more, check this box b 33-1/3% support test - 2010. If the organization did not check a box on line 13 or 16a, and line 15 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10%-facts-and-circumstances test - 2011. 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 - 2010. 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

Schedule A (Form 990 or 990-EZ) 2011

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

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

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II If the organization fails to qualify under the tests listed below, please complete Part II.)

Sec	tion A. Public Support						
	dar year (or fiscal yr beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1	Gifts, grants, contributions and membership fees received (Do not include any unusual grants.)						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the						
	organization without charge						
	Total. Add lines 1 through 5 Amounts included on lines 1, 2, and 3 received from disqualified persons						
t	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c	: Add lines 7a and 7b						
	Public support (Subtract line 7c from line 6)						
	tion B. Total Support				· · · · · · · · · · · · · · · · · · ·		
	dar year (or fiscal yr beginning in)►	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
10 a	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
	: Add lines 10a and 10b _Net_income_from_unrelated_business						
_1_1_	activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)					_	
13	Total support. (Add Ins 9, 10c, 11, and 12)						
14	First five years. If the Form 990 organization, check this box and	is for the organiza	ation's first, secor	d, third, fourth, o	or fifth tax year as	a section 501(c)(3	³⁾ ► □
Sec	tion C. Computation of Pul	blic Support P	ercentage				
15	Public support percentage for 20	11 (line 8, columr	n (f) divided by lin	e 13, column (f)))	15	%
	Public support percentage from					16	%
Sec	tion D. Computation of Inv	estment Incon	ne Percentage	<u> </u>			· · · · · · · · · · · · · · · · · · ·
	Investment income percentage for	•	,,	•	ımn (f))	17	%
	Investment income percentage f					18	%
	33-1/3% support tests — 2011. If is not more than 33-1/3%, check	this box and stop	o here. The organ	ızatıon qualıfıes a	as a publicly supp	orted organization	▶ ∐
	33-1/3% support tests — 2010. If line 18 is not more than 33-1/3%	, check this box a	and stop here. The	e organization qu	ialifies as a public	ly supported organ	3-1/3%, and sization ►
20	Private foundation. If the organi	zation did not che	ck a box on line	4, 19a, or 19b, o	theck this box and	see instructions	<u> </u>

Schedule A (Form 990 or 990-EZ) 2011	Common Counsel	Foundation	94-3214166 Pa	age 4
Part IV Supplemental Informa Part II, line 17a or 17b (See instructions).	tion. Complete this p ; and Part III, line 12	part to provide the explanations 2. Also complete this part for any	required by Part II, line 10; additional information	
(CCC Wish detterrs).				
				-
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				-
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lient COMMON				nental Info		Page
		Common	Counsel Four	ndation		94-321416
						08 43P
Part II, Line 10 - Other Ir	ncome					
Nature and Source		2011	2010	2009	2008	2007
Special Events Fire Insurance Sett	lement					
Misc.	LICMCIIC	1 279	5 533			15,856.
mise.	Cotal 🕏	4,879.	5,533. 5,533.	\$ 0.	\$ 0.	\$ 15,856.

SCHEDULE D (Form 990)

Supplemental Financial Statements

► Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

Co	mmon Counsel Foundation				94-3214166	
Pa		r Advised Funds or Other S	Similar Fund			e if
	the organization answered 'Yes' t	o Form 990, Part IV, line 6.			,	
		(a) Donor advised fun-	ds	(b) Fu	unds and other acc	ounts
1	Total number at end of year		5			
2	Aggregate contributions to (during year)	3,	296,158.			
3			566,594.			
4			823,142.			
5	Did the organization inform all donors and doi funds are the organization's property, subject	nor advisors in writing that the ass	sets held in do	nor advised	X Yes	No
6	Did the organization inform all grantees, dono used only for charitable purposes and not for	rs, and donor advisors in writing	that grant fund	s can be any other	_	
	purpose conferring impermissible private bene	efit?			X Yes	No
Pa	rt II Conservation Easements. Compl	ete if the organization answ	vered 'Yes'	o Form 99	0, Part IV, line	7.
1	Purpose(s) of conservation easements held by	y the organization (check all that	apply).		-	
	Preservation of land for public use (e.g., i	ecreation or education)	Preservation of	an historica	lly important land	area
	Protection of natural habitat	<u> </u>	Preservation of	a certified h	istoric structure	
	Preservation of open space	_				
2	Complete lines 2a through 2d if the organization last day of the tax year	on held a qualified conservation o	contribution in t	he form of a	conservation ease	ment on the
				He	eld at the End of th	ne Tax Year
	a Total number of conservation easements			2a		
	b Total acreage restricted by conservation ease	ments		2 b		
	c Number of conservation easements on a certi	fied historic structure included in	(a)	2 c		
	d Number of conservation easements included in structure listed in the National Register	n (c) acquired after 8/17/06, and i	not on a histori	c 2d		
3	Number of conservation easements modified, tax year ►	transferred, released, extinguishe	ed, or terminate	ed by the org	anization during th	ie
4	Number of states where property subject to co	onservation easement is located	•			
5	Does the organization have a written policy re and enforcement of the conservation easemer	garding the periodic monitoring, in	nspection, han	dling of viola	tions, Yes	No
6	Staff and volunteer hours devoted to monitorii	ng, inspecting, and enforcing cons	servation easei	ments during	the year	
7	Amount of expenses incurred in monitoring, in \$	specting, and enforcing conserva	ition easement	s during the	year	
8	Does each conservation easement reported or 1.70(h)(4)(B)(i).and.section.1.70(h)(4)(B)(i)?		rements of sec	tion	Yes	No-
9	In Part XIV, describe how the organization reports include, if applicable, the text of the footnote conservation easements	conservation easements in its reve to the organization's financial stat	nue and expens ements that de	e statement, escribes the o	and balance sheet, a organization's acco	and ounting for
Pa	rt III Organizations Maintaining Colle Complete if the organization ansi				ilar Assets.	
1;	a If the organization elected, as permitted under art, historical treasures, or other similar assets in Part XIV, the text of the footnote to its finar	SFAS 116 (ASC 958), not to reps held for public exhibition, educa	ort in its reven	ue statemen	t and balance shee	et works of ce, provide,
į	 If the organization elected, as permitted under historical treasures, or other similar assets he following amounts relating to these items 	SFAS 116 (ASC 958), to report and for public exhibition, education,	n its revenue s or research in	tatement and furtherance	d balance sheet wo of public service, i	orks of art, provide the
	(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 a amounts required to be reported under SFAS	rt, historical treasures, or other si 116 (ASC 958) relating to these it	mılar assets fo ems	r financial ga	nn, provide the foll	owing
ā	Revenues included in Form 990, Part VIII, line	1			► \$	
	Assets included in Form 990, Part X				▶\$	

Schedule D (Form 990) 2011 Commo			orical Treasures o	94-321		ontini	Page 2
						_	
3 Using the organization's acquisit items (check all that apply)	ion, accession,	and other records, ch	neck any of the followin	g that are a significant t	ise or it	s collec	tion
a Public exhibition		d Loan	or exchange programs				
b Scholarly research		e 💹 Other					
c Preservation for future gener			(I -	and the state of t			
4 Provide a description of the orga Part XIV					se in		
5 During the year, did the organiza assets to be sold to raise funds in	ation solicit or re	ceive donations of a	rt, historical treasures, of the organization's co	or other similar	Yes	. [No
Part IV: Escrow and Custodia line 9, or reported an	l Arrangeme	nts. Complete if	the organization ar				t IV,
1a Is the organization an agent, true included on Form 990, Part X?	stee, custodian,	or other intermediary	y for contributions or ot	her assets not	Yes	 ; [No
b If 'Yes,' explain the arrangement	in Part XIV and	I complete the follow	ing table	r 			
					Amoun	ıt	
c Beginning balance				1c			
d Additions during the year				1d			
e Distributions during the year		•		1e			
f Ending balance		000 Dank V June 211	2	1f	□ Vac		No
2a Did the organization include an a b If 'Yes,' explain the arrangement		990, Part X, line 21:	{		Yes	· L	
Part V Endowment Funds. Co		organization and	swered 'Yes' to Fo	rm 990 Part IV line	- 10		
Tare Vi Lindovinicite I dilasi oc	(a) Current ye					Four year	rs back
1 a Beginning of year balance	(a) carrone ye	(5) 11101)00	307 7.00 302.00 00.00	, , , , , , , , , , , , , , , , , , ,	1000	3,8°	
b Contributions					24-04	gar.	
c Net investment earnings, gains, and losses							
d Grants or scholarships					333,15-1		
e Other expenditures for facilities and programs						*	
f Administrative expenses					1 1		
g End of year balance					\$	%	
2 Provide the estimated percentag	e of the current	year end balance (lir	ne 1g, column (a)) held	las			
a Board designated or quasi-endov	vment ►	8					
b Permanent endowment ▶	%						
c Temporarily restricted endowmer	nt 🕨	<u> </u>					
The percentages in lines 2a, 2b,	and 2c should e	qual 100%.					
3a Are there endowment funds not a organization by	in the possessio	n of the organization	that are held and adm	inistered for the	ļ	Yes	No
(i) unrelated organizations					3a(i)		
(ii) related organizations	<u></u> -				3a(ii)		
b If 'Yes' to 3a(ii), are the related of	organizations lis	ted as required on So	chedule R?		3b		
4 Describe in Part XIV the intended	_	·					•
Part VI Land, Buildings, and	Equipment. S	See Form 990, Pa	art X, line 10.				
Description of property	(a	Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d)	Book va	alue
1 a Land				的 中心性的 的			
b Buildings							
c Leasehold improvements							
d Equipment	<u>_</u>		7,885.	6,100.		1	<u>,785.</u>
e Other			651.	47.			604.
Total. Add lines 1a through 1e. (Colum	nn (d) must equa	al Form 990, Part X,	column (B), line 10(c)				,389.
BAA				Sched	.ule D (F	orm 99	90) 2011

	Common Counsel For		 		94-321	4166	Page 3
	- Other Securities. See		line 12. I	V/A			
(a) Description of s (including nan	ecurity or category ne of security)	(b) Book value		(c) Meth Cost or end-	od of valuat of-year marl	ion ket value	
(1) Financial derivatives							
(2) Closely-held equity interes	sts						
(3) Other							
(A)							
(B)		<u></u>					
<u>(C)</u>							
(D)							
(E)				 			
<u>(F)</u>							
(H)			<u> </u>				
(l)							
Total (Column (b) must equal Form	990 Part X. column (B) line 12)						
	- Program Related. See	Form 990, Part X.	line 13.	N/A			
(a) Description of		(b) Book value		(c) Meth	od of valuat	ion.	
				Cost or end-	of-year mark	ket value	
(1)							
(2)							
(3)							
(5)							
(6)			_				
(7)	<u> </u>		<u> </u>				
(8)		- 					
(9)							
(10)							
Total. (Column (b) must equal Form 9	90, Part X, column (B) line 13)						
Part IX Other Assets.	See Form 990, Part X, I				·		
	(a) Des	scription				(b) Book va	lue
(1)		-	·				
(2)							
(3) (4)							
(5)							
(6)							
(7)							
(8)	<u></u>						
(9)							
(10)							
Total. (Column (b) must equa					>		
	es. See Form 990, Part						
	tion of liability	(b) Book value					
(1) Federal income taxes	- -						
(2)			٠				
(3)	- · · · - · · · · · · · · · · · · · · ·						
(4)							
(5) (6)							
(7)							
(8)							
(9)		- 				,	
(10)							

▶

Total. (Column (b) must equal Form 990, Part X, column (B) line 25)

² FIN 48 (ASC 740) Footnote In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740)

Sch	edule D (Form 990) 2011 Common Counsel Foundation	94-3214166	Page 4
	Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements		
	Total revenue (Form 990, Part VIII, column (A), line 12)	4	,390,317.
2	Total expenses (Form 990, Part IX, column (A), line 25)		,437,034.
3	Excess or (deficit) for the year Subtract line 2 from line 1.		,953,283.
4	Net unrealized gains (losses) on investments	<u> </u>	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
5	Donated services and use of facilities		
6	Investment expenses	•	
7	Prior period adjustments		
, 8	Other (Describe in Part XIV)		
٥	Total adjustments (net) Add lines 4 through 8		
10		<u> </u>	,953,283.
	tt.XII. Reconciliation of Revenue per Audited Financial Statements With Reven		, 333, 203.
			,390,317.
1	Total revenue, gains, and other support per audited financial statements	2	, 390, 311.
	Amounts included on line 1 but not on Form 990, Part VIII, line 12.		
	a Net unrealized gains on investments . 2a		
	b Donated services and use of facilities.		
	Recoveries of prior year grants		
	d Other (Describe in Part XIV.)		
•	e Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1		,390,317.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1.		
i	a Investment expenses not included on Form 990, Part VIII, line 7b		
	Other (Describe in Part XIV)		
	Add lines 4a and 4b	4c	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5 4	,390,317.
	**XIII Reconciliation of Expenses per Audited Financial Statements With Expe	nses per Return	
	Total expenses and losses per audited financial statements		,437,034.
	Amounts included on line 1 but not on Form 990, Part IX, line 25	725.	·
	a Donated services and use of facilities 2a		
	Prior year adjustments 2b		
	C Other losses 2c		
	d Other (Describe in Part XIV)		
	Add lines 2a through 2d	2e	
	Subtract line 2e from line 1		,437,034.
A	Amounts included on Form 990, Part IX, line 25, but not on line 1:	3 - 1	, 431, 034.
~.		5.1	
	a Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIV)		
	Add lines 4a and 4b	4c	
	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)		,437,034.
	Supplemental Information		, 431, 031.
Part	plete-this-part-to-provide-the-descriptions-required-for-Part-II,-Iines-3,-5,-and-9;-Part-III,-Iines-1a-and V, line 4, Part X, line 2; Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b Al additional information	d.4,-Part.IV,_lines_1b_and.; so complete this part to p	2b,rovide

Schedule D (Form 990) 2011 Common Counsel Foundation	94-3214166	Page 5
Part XIV Supplemental Information (continued)		

SCHEDULE I (Form 990)

Department of the Treasury nternal Revenue Service

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

Complete if the organization answered 'Yes' to Form 990, Part IV, lines 21 or 22. ► Attatch to Form 990.

201

OMB No 1545-0047

Open to Public

Housing/Homeles **2** Social Justice (h) Purpose of grant or assistance Empower Asian Rights/C1v11 sness/Tenant Civil Rights Scholarships Build Civil Islanders Economic Justice Pacific Employer identification number Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Society rights X Rights Human Rand Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered 'Yes' to 94-3214166 (g) Description of non-cash assistance 1 Does the organization maintain records to substantiale the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? (f) Method of valuation (book, FMV, appraisal, other) See Part IV 0 Ö, 0 0 。 Ö Ö ö (e) Amount of non-cash assistance Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States 20,000 25,000 10,000 20,000 20,000 25,000 20,000 25,000 (d) Amount of cash grant 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table (c) IRC section if applicable Part II can be duplicated if additional space is needed 94-0279770 501 (c) (3) 94-3261846 501 (c) (3) 23-7404756 501 (c) (3) 94-3080408 501 (c) (3) 55-0883038 501 (c) (3) 22-6082880 501 (c) (3) 13-1760098 501 (c) (3) 22-2584370 501 (c) (3) Common Counsel Foundation Rants and Assistance (b) EIN (1) ACLU Foundation of North Cali (2) American Jewish World Service 131 Steuart Street, Suite 200 CA Coalition Women Prisoners (6) Center for Constitutional Rig 1042 Grant Avenue, 5th Floor 160 Convent Ave., Shepard Hal Chinese Progressive Associati ____<u>666_Broadway, 7th_Floor___</u> (3) Asian Pacific Environmental 1 (a) Name and address of organization __310_8th_Street,_Suite_309_ San Francisco, CA 94105 San Francisco, CA 94102 San Francisco, CA 94133 San Francisco, CA 94111 (8) City College Fund ___ 1540 Marjet Street New York, NY 10012 New York, NY 10031 Oakland, CA 94607 Oakland, CA 94609 __ 39 Drumm_Street (5) Causa Justa ___ Name of the organization PO Box 3596 € \mathbb{C}_{l}

Schedule I (Form 990) (2011)

TEEA3901L 06/01/11

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

3 Enter total number of other organizations listed in the line 1 table

Schedule I (Form 990) (2011) **Parill Grants and Other Assistance to Individuals in the United States.** Complete if the organization answered 'Yes' to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed. (f) Description of non-cash assistance Partion Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information. 94-3214166 (e) Method of valuation (book, FMV, appraisal, other) ___receive_grants. The grantees are required to submit financial reports back to CCF to Grant selection team determines that the recipients of the grants are qualified to (d) Amount of non cash assistance Part I, Line 2 - Procedures for Monitoring Use of Grants Funds in U.S. (c) Amount of cash grant Common Counsel Foundation (b) Number of recipients __indicate how the funds were spent. (a) Type of grant or assistance Schedule 1 (Form 990) (2011) BAA က 4 ß 9 7

		Continuation	Continuation Sheet for Schedule I (Form 990) Attach to Form 990 to list additional information for	I (Form 990)			2011
		Sched	Schedule I (Form 990), Part II and Part III.	art III.		Continuat	Continuation Page 1 of 3
Name of the organization Common Counsel Found	Foundation					Employer identification number 94-3214166	n number
ontinuatio	irants and Other Ass	sistance to Govern	ments and Organization	s in the United Stat	tes (Schedule I	(Form 990), Part	rt 11.)
(a) Name and address of organization or government	ization or (b) EIN	(c) IRC section if applicable	on if (d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CUAV Community United Against Vi 170A Capp Street San Francisco. CA 94110		94-2758154 501 (c) (3)	20.000				1.GBT Rights
Dakota Rural Action PO Box 549							
		(0) (0) 100 000000					Environmental
Winslow, AZ 86047		86-0670809 501 (c) (3)	10,000.				Justice
EBASE East Bay Alliance for a Su 1814 Franklin Street Suite 325 Oakland, CA 94612	<u>al I</u>	94-3314108 501 (c) (3)	20,000.				Economic Justice
Institute for Policy Studies 1112 16th Street NW, Suite 600 Washington D.C., DC 20036	1 1	52-0788947 501 (c) (3)	. 55,000.				Policy/Resear ch
Institute for Public Accuracy 65 Ninth Street, Suite 3 San Francisco, CA 94013	1 1	94-3281861 501 (C) (3)	10,000.				Film/Document ary/Publicati on
Legal Svs for Prisoners w Chi 1540 Market Street. Ste 490 San Franciscfo, CA 94102	1 1	94-3080408 501 (C) (3)	20,000.				Legal Services
Movement Strategy Ctr - AYPAL 436 14th Street, Ste 500 Oakland, CA 94612		20-1037643 501 (c) (3)	20,000.				Racial Justice
		23-7159949 501 (C) (3)	10,000.				Environmental Justice
Mvmt Strat Ctr Oakland Rising 570 14th Street, Ste. 6 Oakland, CA 94612	1 1	20-1037643 501 (c) (3)	20,000.				Economic Justice
			TEEA4001L 08/25/11			Schedule 1 Co	Schedule I Cont (Form 990) 2011

2011	Continuation Page 2 of 3	Employer identification number 94–3214166	90), Part II.)	ption of (h) Purpose of ash grant or assistance	Peace &	Justice	Environmental Justice	2 2 2 2	Justice	Economic	Justice		Economic		Environmental	Justice	Women's	Issues	Film/Document	ary/Publicati	110	Economic	Justice		LGBT Rights	Schedule I Cont (Form 990) 2011
		Employer identificati	l (Form 990), Part	(g) Description of non-cash assistance				i			!															Sche
			ites (Schedule	(f) Method of valuation (book, FMV, appraisal, other)													-1							-		
(1 (Form 990)	art III.		s in the United Sta	(e) Amount of non-cash assistance																						
inuation Sheet for Schedule I (Form 990) Attach to Form 990 to list additional information for	Form 990), Part II and P		s and Organization	(d) Amount of cash grant		25,000.	10,000.		10,000.		20,000.		000			10,000.		7,500.		i i	, 500.		10,000.		20,000.	TEEA4001L 08/25/11
Continuation She	Schedule I (ce to Government	(c) IRC section if applicable		501 (c) (3)	[501 (c) (3)		(S) (C) (3)		7 501 (c) (3)		(5) (5)			1 501 (c) (3)		9 501 (c) (4)			8 501 (C) (3)		5 501 (c) (3)		9 501 (c) (3)	
<u> </u>			Other Assistan	(b) EIN		94-2607722 501 (c)	74-2682311 501 (c)		51-0198509 501 (c)		94-3305957 501 (c)		05-4730606	606611-06		20-4949871 501 (c)		27-2504119 501 (c)			94-2854068 501 (C)		27-1481855 501 (c)		42–1559699 501 (c)	
		Name of the organization Counsel Foundation		(a) Name and address of organization or government	New Israel Fund 703 Market Street, Suite 1503	94103	PODER (Earth & Resources) PO Box 6237 Austin, TX 78762	PODER (Economic & Environment	FU BOX 29703	POWER People Organized to Win Em	San Francisco, CA 94103	Progressive Jewish Alliance	409 Liberty Street		605 West 2nd Avenue	Archorage, AK 99501	Sally's List PO Box 18327	Oklahoma City, OK 73154	San Francisco Jewish Film Festiv	145 Ninth Street, Suite 200	San Francisco, CA 94103 Texas Organizing Project Educ	2955 Guld Freeway Suite B	Houston , TX 77003	Transgender, Gender Variant,	San Francisco, CA 94103	

	ပိ	ntinuation She	Continuation Sheet for Schedule I (Form 990)	I (Form 990)			2011
		Schedule I (F	Schedule I (Form 990), Part II and Part III.	ת III.	į	Continual	Continuation Page 3 of 3
Name of the organization Common Counsel Foundation						Employer identification number 94-3214166	n number
	Assistance	e to Governments	and Organizations	in the United Stat	1	(Form 990), Part II.)	rt II.)
ι Ψ	(p) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance		(g) Description of non-cash assistance	(h) Purpose of grant or assistance
<u>1ance</u>							Environmental
e, WY 82514	77-059/135 501 (c) (3)	501 (c) (3)	10,000.				Justice
Youth Together 449 15th Street #302 30akland, CA 94612	35-2201239 501 (c) (3)	501(c) (3)	20,000.				Youth Organizing Leaders
	-						
		F	TEEA4001L 08/25/11			Schedule I Co	Schedule I Cont (Form 990) 2011

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

Department of the Treasury Internal Revenue Service Name of the organization

environment.

Common Counsel Foundation

OMB No 1545 0047 2011 Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

► Attach to Form 990 or 990-EZ. ☼ Open to Públic Inspection Employer identification number 94-3214166 Form 990, Part III, Line 1 - Organization Mission Founded in 1988, Common Counsel Foundation partners with families and individual donors to expand philanthropic resources for progressive social movements. Through our strategic philanthropic services, we prioritize support for community-based organizations engaged directly with low-income people, women, youth, people of color _ and others working to advance justice, equity, and build a healthy, sustainable Form 990, Part III, Line 4b - Program Service Accomplishments

Fiscal Sponsorship - Common Counsel acts as the fiscal sponsor for various projects. Currently, Common Counsel is the fiscal sponsor for Windcall Institute, Bay Area Justice Funders Network (BAJF) and RoadMAP.

Windcall Institute and the Windcall Residency Program help organizers and leaders in the social, economic and environmental justice movements stay in their work for the long haul, maximizing their contribution to solving the nation's pressing issues.

Bay Area Justice Funders Network (BAJFN) is an alliance of funders working to help advance a justice agenda and strengthen grantmaking for social justice movements in the Bay Area and beyond.

RoadMAP is a national network of organizational development consultants dedicated to serving social justice organizations. In addition to providing consulting services, RoadMAP serves as a forum for peer exchange and innovation, developing and testing new strategies to build healthier and sustainable social justice organizations, networks, coalitions and alliances. RoadMAP is the progeny of the French American

Charitable Trust (FACT) Management Assistance Program (MAP).

Schedule O (Form 990 or 990-EZ) 2011	Page 2
Name of the organization Common Counsel Foundation	Employer identification number 94-3214166
Form 990, Part III, Line 4b - Program Service Accomplishments	
close down, RoadMAP was created to the continue delivering c	apacity building
services to social justice organizations.	
Form 990, Part VI, Line 11b - Form 990 Review Process	
The CCF's policy requires that the 990 receive approval from	the board treasurer
and/or president before it is filed with the IRS. A copy of	the tax return is also
e-mailed to the full board.	.
Form 990, Part VI, Line 12c - Explanation of Monitoring and Enforcement of C	Conflicts
All members of the board have signed a form indicating that	they have read and
understood our conflict of interest policy and will disclose	any changes as needed.
Form 990, Part VI, Line 15a - Compensation Review & Approval Process for CEC), Exec. Dir., or Top Mgtment
Review of salary survey by the Association of Small Foundation	ons; salaries and raises
receive board approval.	
Form 990, Part VI, Line 15b - Compensation Review & Approval Process for Office	cers & Key Employees
Review of salary survey by the Association of Small Foundation	ons; salaries and raises
receive board approval.	
Form 990, Part VI, Line 19 - Other Organization Documents Publicly Available	e
The organization makes their governing documents, conflict o	f interest policy, and
financial statements available to the public by request.	· <u></u>
	-
	· _ =