Form **990**

Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No. 1545-0047 2018

Open to Public Inspection

Department of the Treasury Internal Revenue Service

► Do not enter social security numbers on this form as it may be made public. ► Go to www.irs.gov/Form990 for instructions and the latest information.

A	For the	ne 2018 calen	dar year, or tax	year beginnir	ng		, 201	8, an	d endin	g			,		
В	Check	f applicable:	C		•						D Employ	er ident	ification number		
	□ Ac	ldress change	Common Cou	insel For	ndatio	m					94-	3214	166		
	\vdash	ame change	COMMICIT CO	HIDCE I OU	inducto	11					E Telepho				
	\vdash														
	H	tial return									(51	0) 8	34-2995		
	Fin	al return/terminated													
	Ar	nended return									G Gross r	eceipts			
	Ap	plication pending	F Name and addre	ess of principal off	ficer:						this a group return for subordinates? Yes X No				
			Same As C	Above						H(b) Are all If "No,"	subordinates	include	d? Yes No		
1	Tax-	exempt status:	X 501(c)(3)	501(c) () ◄ (in	sert no.)	4947(a)(1)	or	527	11 140,	allacii a iist	. (366 111	su ucuons)		
J	We	bsite: ► ww	w.commonco	unsel.or	α					H(c) Group	exemption nu	ımber 🏲	•		
K	Form	of organization:	X Corporation	T T	ssociation	Other >		L Year	of formati	ion: 1988	B Ms	State of I	egal domicile: CA		
Pa	rt I	Summar											-		
	1	Briefly descri	be the organizat	ion's mission	or most s	significant a	ctivities:C	TF a	dvan	res em	iitv a	nd e	nvironmental		
		health t	hrough a c	ombinati	on of	direct	grant n	aki	na ar	d etra	teric	nhi	lanthronic		
ဥ		advising	for clien	t member	funds	and ma	pages r	roi	act s	focuse	d on c	hir	nizational		
nai		developm	ent, leade	rshin su	staina	hility	and dor	CLO	educa	tion	u_on_c	ryai	IIIZacionai		
Ver	2	Check this bo		organization d							5% of its	net as	cots		
ဗိ	3		oting members o									3	8		
ಂಶ	4		dependent votin									4	8		
ies	5		of individuals e									5	11		
Activities & Governance	6	Total number	r of volunteers (e	estimate if ne	cessary).							6	10		
Act	7a		ed business reve									7a	0.		
			d business taxab									7b	0.		
											rior Year		Current Year		
	8	Contributions	and grants (Par	rt VIII, line 1h	1)						,781,7	95	17,414,561.		
Revenue	9		vice revenue (Pa								,544,9		1,757,120.		
Ver	10		ncome (Part VIII,									92.	50,100.		
Be	11		e (Part VIII, colu									00.	925.		
	12		e - add lines 8 t								,334,0		19,222,706.		
	13		imilar amounts p								,958,0		3,904,623.		
	14		I to or for member								, ,,,,,,,	11.	3, 304, 023.		
	15		er compensation			5.5					700 6	20	011 620		
es							0.50 5.0				799,6	39.	811,639.		
Sus			fundraising fees									discontinuos.			
Expenses	b	Total fundrais	sing expenses (F	art IX, colum	nn (D), line	e 25) 🟲		114,	235.						
Ш	17	Other expens	ses (Part IX, colu	umn (A), lines	s 11a-11d,	11f-24e)				. 2	,039,9	76.	2,630,006.		
	18	Total expense	es. Add lines 13	-17 (must equ	ual Part IX	(, column (A), line 25)				,797,6		7,346,268.		
	19	Revenue less	expenses. Sub	tract line 18 f	rom line 1	2					,536,4		11,876,438.		
100											g of Curren		End of Year		
anc anc	20	Total assets	(Part X, line 16)	er paragraphics							,148,9		19,926,636.		
Ass	21		es (Part X, line 2								254,7		156,014.		
Net Assets Fund Balanc	22		fund balances.		21 from li	ino 20				-		10000			
	rt II	Signatur		Subtract line	21 11011111	1116 20					,894,1	84.	19,770,622.		
_															
comp	er penal plete. D	ties of perjury, I de eclaration of prepa	eclare that I have exart arer (other than officer	nined this return,) is based on all i	including acc information of	ompanying sch which prepare	r has any kno	atement wledge.	ts, and to	the best of m	y knowledge	and beli	ief, it is true, correct, and		
											10/2	1.0	3		
c:		Signatu	ire of officer							Da		-//			
Sig	Ju Ju														
пе	re	Type or	r print name and title							Trust	ee				
		Print/Type p	oreparer's name	Pr	reparer's sign	ature	1	Da	ate		Check	_ "	PTIN		
Pa									10/3/2	2019	self-employ	ed	P01432586		
Pre	epare	Firm's name	e >												
Us	e On	ly Firm's addre	ess								Firm's EIN	▶			
											Phone no.				
May	y the I	RS discuss th	nis return with the	e preparer sh	nown abov	e? (see ins	tructions).						. X Yes No		

Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

► Do not enter social security numbers on this form as it may be made public. ► Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

Α	For t	he 2018 calen	dar year, or ta	x year begir	nning		, 2018	3, and endin	g			,			
В	Check	if applicable:	С							D Employ	er identi	fication nun	ıber		
	A	ddress change	Common Co	ounsel F	oundatic	on				94-	3214	166			
	\square_{N}	ame change								E Telepho					
		nitial return								(51	n) 8	34-299	5		
	\vdash	nal return/terminated			_					(31	0) 0.	001 2330			
		mended return								G Gross r	acaints (5 10	222 -	706	
	-	pplication pending	F Name and add	drace of princing	al officer:				G Gross receipts \$ 19,222,7 H(a) Is this a group return for subordinates? Yes						
	Ш^	pplication pending	Same As (ar officer.				H(b) Are all If "No,"			<u> </u>	Yes	X No	
_	Tav	-exempt status:	X 501(c)(3)	501(c) () ▼ (ir	nsert no.)	4947(a)(1)	or 527	If "No,"	attach a list	. (see ins	structions)		Ш	
<u>'</u>						13611 110.)	4347(a)(1)	JI JZ/				_			
K			XW.COMMONO X Corporation		T - T	011	l i	V (()	H(c) Group				C7		
		n of organization:		Trust	Association	Other ►	L	Year of formati	ion: 198	8 IMI	State of le	egal domicile	: CA		
Pa		Summar Priofly desert		ation's miss	ion or most a	cianificant :	activities: CC	'E adrean	~~~		- A	ni m.n			
	1		ibe the organiz											aı	
Se	<u>health through a combination of direct grant making and strategic philanthropic</u> advising for client member funds and manages projects focused on organizational												opic		
Jan			nent, lead							ea on c	<u>Jryar</u>	<u>IIZati</u>	Juar		
Ver	2		ox • if the							5% of its	not ac	cotc			
တ္	3		oting members								3	3013.		8	
৽ၓ	4		ndependent vot								4			8	
ţ <u>i</u>	5	Total number	r of individuals	employed in	n calendar ye	ear 2018 (F	art V, line 2	la)			5			11	
Activities & Governance	6	Total number	r of volunteers	(estimate if	necessary).						6			10	
Ac			ed business re								7a			0.	
	b	Net unrelated	d business taxa	ble income	from Form 9	90-T, line	38				7b			0.	
										rior Year			ent Yea		
Φ	8		s and grants (P							781,7		414,			
Revenue	9	-	vice revenue (F							,544,9		1,	757,		
eve	10		ncome (Part VI		•						292.			100.	
—	11		ie (Part VIII, co								000.			925.	
	12		e – add lines 8							,334,0			222,		
	13		similar amounts		-	•	-			,958,0)17.	3,	904,	<u>623.</u>	
	14		to or for mem												
S	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 799, 639 a Professional fundraising fees (Part IX, column (A), line 11e)						539.		811,	<u>639.</u>				
Expenses	16 a	Professional	fundraising fee	s (Part IX,	column (A),	line 11e)									
ф	b	Total fundrais	sing expenses	(Part IX, co	lumn (D), lin	e 25) 🟲	1	14,235.							
Ш	17	Other expens	ses (Part IX, co	olumn (A), li	nes 11a-11d	, 11f-24e).			. 2	2,039,9	976.	2.	630,	006.	
	18	Total expens	es. Add lines 1	3-17 (must	equal Part IX	K, column (A), line 25).			,797,6			346,		
	19		s expenses. Su							5,536,4			876,		
ъ §										ng of Currer			of Yea		
ets	20	Total assets	(Part X, line 16	5)						3,148,9			926,		
Ass I Ba	21	Total liabilitie	es (Part X, line	26)						254,7			156,		
Net Assets of Fund Balance	22	Net assets or	r fund balances	s. Subtract I	ine 21 from I	ine 20			. 7	,894,1	84.	19.	770,	622.	
Pa	rt II	Signatur								703171	.01.		,,,,	<u> </u>	
				amined this ret	urn, including acc	companying sc	hedules and stat	tements, and to	the best of m	ıv knowledge	and beli	ef. it is true.	correct. a	and	
com	olete. D	eclaration of prepa	eclare that I have ex arer (other than office	er) is based on	all information o	f which prepare	er has any know	ledge.		,g-		, ,	,		
Sic	ın	Signatu	ure of officer						Da	te					
Siç He	re								Trust	tee					
		Type or	r print name and titl	е											
		Print/Type p	preparer's name		Preparer's sign	nature		Date		Check	X if	PTIN			
Ра	id									self-employ		P01432	586		
	epar	er Firm's name	e •												
Us	e Or	ily Firm's addre								Firm's EIN	-				
										Phone no.					
May	/ the	IRS discuss th	nis return with	the preparei	shown abov	/e? (see in:	structions)					. X Yes	5	No	

4 d Other program services (Describe in	Schedule O.)		
(Expenses \$	including grants of \$) (Revenue \$)
4 e Total program service expenses ►	6,906,268.		
AA	TEEA0102L 08/03/18		Form 990 (2018)

Form 990 (2018) Common Counsel Foundation 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	Χ	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	Χ	
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		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If 'Yes,' complete Schedule C, Part II</i>	4	Х	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I	6	Х	
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If 'Yes,' complete Schedule D, Part II</i>	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III.	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV.	9		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If 'Yes,' complete Schedule D, Part V.</i>	10		Х
11	If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If 'Yes,' complete Schedule D, Part VI</i> .	11 a	Х	
b	Did the organization report an amount for investments – other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VII.	11 b	Х	
c	: 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.	11 c		Х
c	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.	11 d		Х
e	Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e		Х
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If 'Yes,' complete Schedule D, Part X</i>	11 f		Х
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI and XII	12a	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		Χ
14 a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If 'Yes,' complete Schedule F, Parts I and IV.	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If 'Yes,' complete Schedule F, Parts II and IV	15		Х
	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If 'Yes,' complete Schedule F, Parts III and IV</i>	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I (see instructions).	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II.	18		X
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		Х
20a	Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20a		X
b	If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II.	21	X	

Form 990 (2018) Common Counsel Foundation Part IV Checklist of Required Schedules (continued)

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals 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	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, that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No, 'go to line 25a	24a		Х
ı	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		
25 a	a Section 501(c)(3), 501(c)(4), and 501(c)(29) 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
I	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	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If 'Yes,' complete Schedule L, Part II.	26		Х
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? <i>If 'Yes,' complete Schedule L, Part III.</i>	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):			
i	A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		Х
ı	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		Х
	c 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		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If 'Yes,' complete Schedule M</i>	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		Х
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, Part II, III, or IV, and Part V, line 1.	34		Х
35	a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
ı	b If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If 'Yes,' complete Schedule R, Part V, line 2</i>	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? <i>If 'Yes,' complete Schedule R, Part VI</i>	37		Х
	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	Х	
Pa	rt V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			· [_]
1	a Enter the number reported in Rev 3 of Form 1006. Enter 0, if not applicable		Yes	No
	a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
	b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
((gambling) winnings to prize winners?	1 c	Х	
BAA		Form		(2018)

Form 990 (2018) Common Counsel Foundation

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

			Yes	No
2 8	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 11			
ŀ	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Χ	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)			
3 8	a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3 a		Х
ŀ	If 'Yes,' has it filed a Form 990-T for this year? <i>If 'No' to line 3b, provide an explanation in Schedule O.</i>	3 b		
4 a	a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4 a		Х
ŀ	n If 'Yes,' enter the name of the foreign country: ►			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5 a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5 a		Х
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5 b		X
(: If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	5с		
6 a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6 a		Х
ŀ	p If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6 b		
7	Organizations that may receive deductible contributions under section 170(c).			
ä	a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and	_		
	services provided to the payor?	7 a		X
	p If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7 b		
•	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7с		Х
(If 'Yes,' indicate the number of Forms 8282 filed during the year			
•	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7 e		Х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 f		X
Ģ	g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7 g		
ł	n If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7 h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring	7		
	organization have excess business holdings at any time during the year?	8		
	Sponsoring organizations maintaining donor advised funds.			
	a Did the sponsoring organization make any taxable distributions under section 4966?	9 a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9 b		
	Section 501(c)(7) organizations. Enter:			
	a Initiation fees and capital contributions included on Part VIII, line 12			
	Section 501(c)(12) organizations. Enter:			
	a Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)			
	a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	olf 'Yes,' enter the amount of tax-exempt interest received or accrued during the year 12b Section 501(c)(29) qualified nonprofit health insurance issuers.			
	a Is the organization licensed to issue qualified health plans in more than one state?	13a		
١	Note. See the instructions for additional information the organization must report on Schedule O.	100		
ŀ	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
	Enter the amount of reserves on hand			
14 a	a Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х
ŀ	If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?	15		Х
	If 'Yes,' see instructions and file Form 4720, Schedule N.			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If 'Yes,' complete Form 4720, Schedule O.	16		X

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. Check if Schedule O contains a response or note to any line in this Part VI. Section A. Governing Body and Management No Yes 1 a Enter the number of voting members of the governing body at the end of the tax year. If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. **b** Enter the number of voting members included in line 1a, above, who are independent . . . 8 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 Χ 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 Χ Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Χ 4 X Did the organization become aware during the year of a significant diversion of the organization's assets?.... 5 Χ Did the organization have members or stockholders?..... 6 7 a 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 Χ **b** Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?..... Χ 7 b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body?..... Χ 8 a X **b** Each committee with authority to act on behalf of the governing body?..... 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 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code. Yes No 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 operations are consistent with the organization's exempt purposes? 10 b 11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?..... Χ b Describe in Schedule O the process, if any, used by the organization to review this Form 990. See Schedule O Χ 12a Did the organization have a written conflict of interest policy? If 'No,' go to line 13...... 12a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise 12b Χ to conflicts?..... **c** Did the organization regularly and consistently monitor and enforce compliance with the policy? *If 'Yes,' describe in Schedule O how this was done* ... See .Schedule .Q Χ 12c 13 Did the organization have a written whistleblower policy?..... 13 Χ Χ **14** Did the organization have a written document retention and destruction policy?..... 14 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.. 0...... 15 a Χ 15 b X 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 taxable entity during the year?..... Χ 16 a **b** If 'Yes,' did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?. 16 b Section C. Disclosure 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 (1024 or 1024-A if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply Own website X Another's website X Upon request Other (explain in Schedule O) Describe in Schedule 0 whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to 19 the public during the tax year. See Schedule O State the name, address, and telephone number of the person who possesses the organization's books and records Common Counsel Foundation

BAA

Form 990 (2018)

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

Check if Schedule O contains a response or note to any line 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.

X Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

		(C)								
(A) Name and Title	(B) Average hours	Pos thar is	ition (n one l s both dire	do no box, an o ector/	truste/	eck mo s pers and a ee)		(D) Reportable compensation from	(E) Reportable compensation from	(F) Estimated amount of other
	per week (list any hours for related organiza- tions below dotted line)	Individual trustee or director	Institutional trustee	Officer	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
Trustee	$-\frac{1}{0}$	Х						0.	0.	0.
Secretary	1	Х		Х				0.	0.	0.
Trustee	- <u>1</u>	Х						0.	0.	0.
President	1	Х		Х				0.	0.	0.
Trustee	1	Х						0.	0.	0.
Trustee	1	Х						0.	0.	0.
	1	Х		Х				0.	0.	0.
Trustee	1	Х						0.	0.	0.
Former CEO	$-\frac{40}{0}$						Х	134,223.	0.	0.
(10)		-						,		
<u>(11)</u>										
(12)										
(13)										
(14)										

TEEA0107L 08/03/18

Part VII Section A. Officers, Directors, Tru	1	Key	Еm	_	_	es, a	anc	d Highest Com	pensated Emp	ployees (continued)
	(B)			(C	-					
(A)	Average hours	box	, unle	ess pe	erson	than o	an	(D) Reportable	(E) Reportable	(F) Estimated
Name and title	per week	offic	cer ar	nd a	direct	or/trust	ee)	compensation from the organization	compensation from related organizations	amount of other compensation
	(list any hours	Individual or director	nstit	Officer	Key	empl Highe	Former	(W-2/1099-MISC)	(W-2/1099-MISC)	from the organization
	for related organiza	recto	ution	œ	empl	est ca	1er			and related organizations
	- tions below	Individual trustee or director	al tro		Key employee	ompe				
	dotted line)	tee	institutional trustee			Highest compensated employee				
						ed				
(15)										
(10)										
(16)										
(17)										
- <i>-</i>	1	1								
(18)										
<u>(19)</u>										
(20)										
(20)										
(21)										
·		•								
(22)										
(00)										
(23)										
(24)										
	1									
(25)										
1 b Sub-total						'	>	134,223.	0.	
c Total from continuation sheets to Part VII, Section d Total (add lines 1b and 1c).							-	0. 134,223.	0.	0.
Total number of individuals (including but not limited							/ed			
from the organization 1				-,				, ,		
										Yes No
3 Did the organization list any former officer, direct	tor, or tru	stee,	key	em/	ploy	yee, d	or h	nighest compensat	ted employee	2 7
on line 1a? If 'Yes,' compléte Schedule J for suc										3 X
4 For any individual listed on line 1a, is the sum of the organization and related organizations greate	f reportab er than \$1	le co 50.00	mpe 00?	ensa If '\	ition ∕ <i>es.</i> '	and <i>com</i>	oth ple	er compensation te Schedule J for	from	
such individual										4 X
5 Did any person listed on line 1a receive or accru for services rendered to the organization? If 'Yes	e comper	satio	n fr	om Jule	any	unrel	ate	ed organization or	individual	5 X
Section B. Independent Contractors	o, compre	10 00	,,,,,,	iaic	3 10	7 340	η ρ	C13011		3 A
1 Complete this table for your five highest compen compensation from the organization. Report compen	sated ind	epen	dent	t cor	ntrac	ctors	tha	t received more th	nan \$100,000 of	
compensation from the organization. Report compen	Sation for	the C	alell	uai	year	enun	ig v	(B)	· · · · · · · · · · · · · · · · · · ·	(C)
Name and business add	ress							Description of	of services	Compensation
								RoadMap Co-Di	r.	181,468.
								Roadmap consu	ltant	112,090.
								Webinar consu		139,402.
								Bookkeeping/F	-	145,005.
2 Total number of independent contractors (including by	out not lim	ited to	the	nse l	istor	l aho	ر ۱ (مر	Roadmap consu		155,580.
\$100,000 of compensation from the organization		ituu ll	J UIC	JJC I	اعادا	. abU\	(5)	THIS ICCEIVED HIGHE	uiaii	

Part VIII Statement of Revenue (B) Related or (A) Total revenue (D) Unrelated Revenue excluded from tax exempt business under sections 512-514 function revenue revenue Contributions, Gifts, Grants and Other Similar Amounts 1 a Federated campaigns 1 a **b** Membership dues..... 1 b 71,445 c Fundraising events..... 1 c d Related organizations 1 d e Government grants (contributions) **f** All other contributions, gifts, grants, and similar amounts not included above . . . 1 f 17,343,116 g Noncash contributions included in lines 1a-1f: \$ 17,414,561 **Business Code** Program Service Revenue 2a Fees___ 561000 1,757,120 1,757,120 f All other program service revenue. . . g Total. Add lines 2a-2f 1,757,120 Investment income (including dividends, interest and other similar amounts) 50,100 50,100 Income from investment of tax-exempt bond proceeds.. ▶ Royalties..... (i) Real (ii) Personal 6a Gross rents..... **b** Less: rental expenses c Rental income or (loss) . . . **d** Net rental income or (loss) (i) Securities (ii) Other 7 a Gross amount from sales of assets other than inventory **b** Less: cost or other basis and sales expenses c Gain or (loss)..... **d** Net gain or (loss)..... 8 a Gross income from fundraising events Other Revenue (not including \$ of contributions reported on line 1c). See Part IV, line 18..... **b** Less: direct expenses..... **b** c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19..... a **b** Less: direct expenses..... **b** c Net income or (loss) from gaming activities..... 10a Gross sales of inventory, less returns and allowances a **b** Less: cost of goods sold..... **b** c Net income or (loss) from sales of inventory..... Miscellaneous Revenue **Business Code** 11a <u>Miscellaneous</u> 561000 925 925 d All other revenue e Total. Add lines 11a-11d 925 **Total revenue.** See instructions..... 19,222 ,706. 808,145 0 0

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).

	Check if Schedule O contains a r				
Do 6b,	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
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	3,904,623.	3,904,623.		·
2	Grants and other assistance to domestic individuals. See Part IV, line 22	2,222,322	2,222,222		
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 5	Benefits paid to or for members	0.	0.	0.	0.
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	689,899.	532,341.	82,528.	75,030.
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	003,033.	332,311.	02,320.	73,030.
9	Other employee benefits	75,078.	45,060.	20,625.	9,393.
10	Payroll taxes	46,662.	37,135.	5,340.	4,187.
11	Fees for services (non-employees):			·	•
ä	a Management				
ı) Legal	7,453.	4,884.	1,849.	720.
(Accounting	158,197.	968.	156,725.	504.
(d Lobbying				
•	e Professional fundraising services. See Part IV, line 17				
	Investment management fees				
	Jother. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule 0.\$Ch. (Advertising and promotion	2,073,823.	2,068,366.	2,329.	3,128.
13		128,877.	95,198.	27,533.	6,146.
14	Information technology	.,	, , , , , , , , , , , , , , , , , , , ,	,	-,
15	Royalties				
16	Occupancy	48,351.	23,418.	17,826.	7,107.
17	Travel	84,011.	75,981.	4,341.	3,689.
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	92,155.	90,377.	1,578.	200.
20	Interest	·	·	·	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	2,233.	1,135.	594.	504.
23	Insurance	3,577.	1,741.	993.	843.
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.)				
ä	Member Fund Expenses	19,007.	19,007.		
I	Misc. Expenses	8,965.	4,300.	2,626.	2,039.
•	Equipment Rental	3,357.	1,734.	878.	745.
	d				
	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	7,346,268.	6,906,268.	325,765.	114,235.
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ► ☐ if following SOP 98-2 (ASC 958-720).				

		Check if Schedule O contains a response or note to any line in this Part X			
			(A) Beginning of year		(B) End of year
	1	Cash — non-interest-bearing.		1	
	2	Savings and temporary cash investments	3,772,195.	2	7,208,717.
	3	Pledges and grants receivable, net		3	7,635,500.
	4	Accounts receivable, net		4	219,600.
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete			,
		Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L		6	
ţ	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use		8	
As	9	Prepaid expenses and deferred charges	774.	9	4,442.
	10 a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D			·
	b	Less: accumulated depreciation		10 c	6,695.
	11	Investments – publicly traded securities.	,,101.	11	0,030.
	12	Investments – other securities. See Part IV, line 11	3,957,791.	12	4,848,224.
	13	Investments – program-related. See Part IV, line 11	0,00.,.02.	13	1,010,221.
	14	Intangible assets.		14	
	15	Other assets. See Part IV, line 11.		15	3,458.
	16	Total assets. Add lines 1 through 15 (must equal line 34)	- ,	16	19,926,636.
_	17	Accounts payable and accrued expenses	185,626.	17	156,014.
	18	Grants payable	38,000.	18	130,011.
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities	· ·	20	
8	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
Liabilities	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
_	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D.		25	
	26	Total liabilities. Add lines 17 through 25	254,742.	26	156,014.
ses		Organizations that follow SFAS 117 (ASC 958), check here ► X and complete lines 27 through 29, and lines 33 and 34.			
ĭ	27	Unrestricted net assets	3,849,857.	27	5,176,011.
39	28	Temporarily restricted net assets.	4,044,327.	28	14,594,611.
P	29	Permanently restricted net assets		29	
Net Assets or Fund Balances		Organizations that do not follow SFAS 117 (ASC 958), check here ► and complete lines 30 through 34.			
ģ	30	Capital stock or trust principal, or current funds		30	
8	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
As	32	Retained earnings, endowment, accumulated income, or other funds		32	
et	33	Total net assets or fund balances	7,894,184.	33	19,770,622.
_	34	Total liabilities and net assets/fund balances	8,148,926.	34	19,926,636.

	, , , , , , , , , , , , , , , , , , , ,	<u> </u>			<u> </u>
Pai	T XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI.				
1	Total revenue (must equal Part VIII, column (A), line 12)		19,2	22,	<u> 106.</u>
2	Total expenses (must equal Part IX, column (A), line 25)	2	7,3	46,2	268.
3	Revenue less expenses. Subtract line 2 from line 1	3	11,8	76,4	138.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	7,8	94,1	184.
5	Net unrealized gains (losses) on investments.	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10	19,7	70,6	<u>522.</u>
Pai	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				. П
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked 'Other,' explain	•			
	in Schedule O.				
2 8	Were the organization's financial statements compiled or reviewed by an independent accountant?		2 a		Х
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed	ed on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
ŀ	Were the organization's financial statements audited by an independent accountant?		2b	Χ	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separa	ite			
	basis, consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
(If 'Yes' to line 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?		0.	Х	
	·		2 c	Λ	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.				
3 a	a 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?		3 a		X
ŀ	If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required audit	it			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits	<u></u>	3 b		
BAA	TEEA0112L 08/03/18		Form	990	(2018)

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

► Attach to Form 990 or Form 990-EZ.

► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2018

Open to Public Inspection

Name	or un	e organization						imployer identifica		er			
Com		n Counsel Foundation						94-3214166					
Par	Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.												
The o	rga	anization is not a private found	lation because it is: (For lines 1 through 12,	check o	nly one	box.)						
1		A church, convention of church	es, or association of cl	nurches described in sect	tion 170(b)(1)(A)((i).						
2	-	A school described in section 1	70(b)(1)(A)(ii). (Attach	Schedule E (Form 990 or	· 990-EZ).)	.,						
3	-	A hospital or a cooperative h		•	•	•	\\;ii\						
	-	<u>'</u>						'L\/1\/A\/!!!\ =	مطله برمالم	h a a m i k a l l a			
4	L	A medical research organiza name, city, and state:		unction with a nospital (a in sec		D)(1)(A)(III).	nier ine	nospitai s -			
5		An organization operated for section 170(b)(1)(A)(iv). (Co		ge or university owned	or oper	ated by	a govern	mental unit de	escribed	in			
6 7		A federal, state, or local gove	ernment or governme	ental unit described in s	ection 1	70(b)(1))(A)(v).						
,	Х	X 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 agricultural research organi											
		or university or a non-land-grar university:		e (see instructions). Enter		-	and state	of the college o	or 				
10		An organization that normally r from activities related to its c investment income and unre June 30, 1975. See section 5	exempt functions—sul lated business taxabl	oject to certain exception exception	ns. and	(2) no r	more than	า 33-1/3% of i	ts suppo	rt ['] from aross			
11		An organization organized ar	nd operated exclusive	ely to test for public safe	ety. See	section	1 509(a)(4).					
12		An organization organized ar or more publicly supported o lines 12a through 12d that de	rganizations describe	ed in section 509(a)(1) c	r sectio	n 509(a))(2). See	section 509(a	ut the pu)(3). Che	rposes of one ck the box in			
а		Type I. A supporting organization organization organization (s) the power to recomplete Part IV, Sections A	on operated, supervise gularly appoint or elect	d. or controlled by its sur	ported o	rganizati	ion(s), tvp	ically by giving	the suppon. You n	oorted uust			
b		Type II. A supporting organiz management of the supporting must complete Part IV. Secti	ation supervised or or organization vested in	controlled in connection the same persons that c	with its ontrol or	support manage	ted organ the suppo	ization(s), by orted organizat	having c ion(s). Y o	ontrol or ou			
С		Type III functionally integrated organization(s) (see instruction		ion operated in connectio	n with, a	nd functio	onally inte	grated with, its	supported	I			
d		Type III non-functionally integrated. The of	rated. A supporting org	anization operated in cor must satisfy a distribu	nection	with its s	supported	organization(s	that is r	ot			
е		instructions). You must com Check this box if the organiz	plete Part IV, Section	s A and D, and Part V.	·				·	•			
f	Fr	integrated, or Type III non-funter the number of supported o	nctionally integrated	supporting organizatior	١.				[
		rovide the following information	-						L				
	(i) Na	ame of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))		s the tion listed loverning ment?	` '	unt of monetary see instructions)		Amount of other (see instructions)			
					Yes	No	-						
(A)													
、,													
<u>(B)</u>													
(C)													
(D)													
(E)													
.													

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							
begi	ndar year (or fiscal year nning in) ►	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants.')	1,480,229.	3,705,219.	2,989,059.	9,816,832.	17852561.	35,843,900.
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0.
3	The value of services or facilities furnished by a governmental unit to the organization without charge						0.
4	Total. Add lines 1 through 3	1,480,229.	3,705,219.	2,989,059.	9,816,832.	17852561.	35,843,900.
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)						2,814,439.
6	Public support. Subtract line 5 from line 4						33,029,461.
Sec	tion B. Total Support						,
Cale begi	ndar year (or fiscal year nning in) ►	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
7	Amounts from line 4	1,480,229.	3,705,219.	2,989,059.	9,816,832.	17852561.	35,843,900.
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	9,774.	209.	3,401.	6,292.	50,100.	69,776.
9	Net income from unrelated business activities, whether or not the business is regularly carried on	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		3, 33 23	0,2020	20,200	0.
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) See Part VI.	3,456.	1,002.	-41,699.	1,000.	925.	-35,316.
11	Total support. Add lines 7 through 10						35,878,360.
12	Gross receipts from related activ	vities, etc. (see ins	structions)			12	5,099,677.
13	First five years. If the Form 990 is organization, check this box and	for the organization stop here	n's first, second, th	ird, fourth, or fifth t	tax year as a sectio	n 501(c)(3)	
Sec	tion C. Computation of Pu						
	Public support percentage for 20						92.06%
15	Public support percentage from	2017 Schedule A,	Part II, line 14			15	80.02 %
16a	33-1/3% support test—2018. If t and stop here. The organization	he organization di qualifies as a pul	d not check the bolicly supported o	oox on line 13, and rganization	d line 14 is 33-1/3	% or more, chec	k this box ► X
b	33-1/3% support test—2017. If the and stop here. The organization	ne organization did i qualifies as a pu	d not check a box blicly supported o	on line 13 or 16a	a, and line 15 is 33	3-1/3% or more,	check this box
17a	10%-facts-and-circumstances to or more, and if the organization the organization meets the 'facts'	meets the 'facts-a	and-circumstance	s' test, check this	box and stop her	e. Explain in Par	t VI how
	10%-facts-and-circumstances te or more, and if the organization organization meets the 'facts-an	meets the 'facts-a d-circumstances'	and-circumstance test. The organiza	s' test, check this ation qualifies as	box and stop her a publicly support	e. Explain in Par ed organization.	t VI how the▶
18	Private foundation. If the organi	zation did not che	ck a box on line	13, 16a, 16b, 17a	, or 17b, check thi	s box and see in	structions >

Part III	Support Schedule for	Organizations Des	scribed in Section 509(a)(2)
----------	----------------------	-------------------	------------------------------

(Complete only if you checked the box on line 10 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.)

Sac	tion A. Public Support	ists listed below,	please complete i	rait II.)			
		(2) 2014	(b) 2015	(c) 2016	(d) 2017	(a) 2010	(f) Total
1 1	lar year (or fiscal year beginning in) Sifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants.')	(a) 2014	(b) 2015	(6) 2010	(d) 2017	(e) 2018	(f) Total
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.						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
	Total. Add lines 1 through 5 Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	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.						
С	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from line 6.)						
	tion B. Total Support						
	dar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
	Amounts from line 6						
10a	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 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 VI.)						
	Total support. (Add lines 9, 10c, 11, and 12.)						
	First five years. If the Form 990 organization, check this box and	stop here		nd, third, fourth, c	or fifth tax year as	a section 501(c)(3)
	tion C. Computation of Pu			10		T T	
15	Public support percentage for 20	•	.,,		•	<u> </u>	%
16	Public support percentage from					16	%
	tion D. Computation of Inv						
17	Investment income percentage f	•	• • •	-			%
18	Investment income percentage f					<u> </u>	%
	33-1/3% support tests—2018. If is not more than 33-1/3%, check	this box and sto	p here. The organ	ization qualifies	as a publicly supp	orted organization	
	33-1/3% support tests—2017. If I line 18 is not more than 33-1/3% Private foundation. If the organi.	6, check this box a	and stop here. Th	e organization qu	ualifies as a public	ly supported organ	ization ►
	The state of the s			,,,			

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If 'No,' describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If 'Yes,' explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).	2		
3а	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If 'Yes,' answer (b) and (c) below.	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If 'Yes,' describe in Part VI when and how the organization made the determination.	3b		
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If 'Yes,' explain in Part VI what controls the organization put in place to ensure such use.	3c		
4a	Was any supported organization not organized in the United States ('foreign supported organization')? If 'Yes' and if you checked 12a or 12b in Part I, answer (b) and (c) below.	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If 'Yes,' describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b		
С	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If 'Yes,' explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If 'Yes,' answer (b) and (c) below (if applicable). Also, provide detail in Part VI , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).	5a		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
С	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If 'Yes,' provide detail in Part VI.</i>	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If 'Yes,' complete Part I of Schedule L (Form 990 or 990-EZ).	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If 'Yes,' complete Part I of Schedule L (Form 990 or 990-EZ).	8		
9а	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If 'Yes,' provide detail in Part VI .	9a		
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If 'Yes,' provide detail in Part VI .	9b		
С	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If 'Yes,' provide detail in Part VI .	9с		
0a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations), and all Type III non-functionally integrated supporting organizations)? If 'Yes,' answer 10b below.	10a		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)	10b		

Part	t IV	Supporting Organizations (continued)			
11	المماا	he agreement in a country of the green and of the following markets		Yes	No
		he organization accepted a gift or contribution from any of the following persons? son who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the			
•	gover	rning body of a supported organization?	11a		
b	A fan	nily member of a person described in (a) above?	11b		
		% controlled entity of a person described in (a) or (b) above? If 'Yes' to a, b, or c, provide detail in Part VI.	11c		
Sect	tion I	B. Type I Supporting Organizations		1	1
1	Did th	disasters, trustees, or membership of any or more supported arganizations have the neguesta regularly appoint		Yes	No
	or ele Part \ If the direct	e directors, trustees, or membership of one or more supported organizations have the power to regularly appoint ct at least a majority of the organization's directors or trustees at all times during the tax year? If 'No,' describe in W how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. organization had more than one supported organization, describe how the powers to appoint and/or remove tors or trustees were allocated among the supported organizations and what conditions or restrictions, if any,	1		
		ed to such powers during the tax year.			
	that o	ne organization operate for the benefit of any supported organization other than the supported organization(s) operated, supervised, or controlled the supporting organization? If 'Yes,' explain in Part VI how providing such fit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the orting organization.	2		
Sect	tion (C. Type II Supporting Organizations			
				Yes	No
	of eac	a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees ch of the organization's supported organization(s)? If 'No,' describe in Part VI how control or management of the orting organization was vested in the same persons that controlled or managed the supported organization(s).	1		
Sect	tion I	D. All Type III Supporting Organizations			
				Yes	No
	organ	ne organization provide to each of its supported organizations, by the last day of the fifth month of the nization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?				
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If 'No,' explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).				
3	By re voice all tin	rason of the relationship described in (2), did the organization's supported organizations have a significant in the organization's investment policies and in directing the use of the organization's income or assets at nes during the tax year? If 'Yes,' describe in Part VI the role the organization's supported organizations played is regard.	3		
Sect	tion I	E. Type III Functionally Integrated Supporting Organizations			
1	Check	k the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).			
a		The organization satisfied the Activities Test. Complete line 2 below.			
b	=	The organization satisfied the Activities rest. Complete line 2 below. The organization is the parent of each of its supported organizations. Complete line 3 below.			
	\equiv	the organization is the parent of each of its supported organizations. <i>Complete line's below.</i> The organization supported a governmental entity. <i>Describe in Part VI how you supported a government entity (see</i>		4:	
С	ш'	The organization supported a governmental entity. Describe in Part VI now you supported a government entity (see in	istruc	lions).	•
2	Activi	ities Test. Answer (a) and (b) below.		Yes	No
	suppo organ	ubstantially all of the organization's activities during the tax year directly further the exempt purposes of the organization(s) to which the organization was responsive? If 'Yes,' then in Part VI identify those supported nizations and explain how these activities directly furthered their exempt purposes, how the organization was possive to those supported organizations, and how the organization determined that these activities constituted			
		tantially all of its activities.	2a		
	the or	ne activities described in (a) constitute activities that, but for the organization's involvement, one or more of rganization's supported organization(s) would have been engaged in? If 'Yes,' explain in Part VI the reasons for rganization's position that its supported organization(s) would have engaged in these activities but for the	2b		
		nization's involvement.	20		
		nt of Supported Organizations. Answer (a) and (b) below.			
	each	ne organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of of the supported organizations? <i>Provide details in Part VI.</i>	3a		
		ne organization exercise a substantial degree of direction over the policies, programs, and activities of each of its ported organizations? If 'Yes,' describe in Part VI the role played by the organization in this regard.	3b		

Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting Org	anizat	tions	3
1	Check here if the organization satisfied the Integral Part Test as a qualifying true instructions. All other Type III non-functionally integrated supporting organization	st on No	ov. 20, 1970 (explain in st complete Sections A	n Part VI). See through E.
Sec	tion A — Adjusted Net Income	(A) Prior Year	(B) Current Year (optional)	
_1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
_ 7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sec	ction B – Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
- 1	Average monthly value of securities	1a		
	Average monthly cash balances	1b		
	Fair market value of other non-exempt-use assets	1c		
	d Total (add lines 1a, 1b, and 1c)	1d		
	Discount claimed for blockage or other factors (explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by .035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sec	ction C — Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-functionally int (see instructions).	egrated	Type III supporting or	ganization

Schedule A (Form 990 or 990-EZ) 2018

10 Line 8 amount divided by line 9 amount

Pai	t V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)						
Sec	ection D — Distributions						
1	Amounts paid to supported organizations to accomplish exempt purposes						
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity						
3	Administrative expenses paid to accomplish exempt purposes of supported organizations						
4	Amounts paid to acquire exempt-use assets						
5	Qualified set-aside amounts (prior IRS approval required)						
6	Other distributions (describe in Part VI). See instructions.						
7	Total annual distributions. Add lines 1 through 6.						
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.						
9	Distributable amount for 2018 from Section C. line 6						

(i) Excess Distributions	(ii) Underdistributions Pre-2018	(iii) Distributable Amount for 2018
	Excess	Excess Underdistributions

BAA

Schedule A (Form 990 or 990-EZ) 2018

Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

Part II, Line 10 - Other Income

Nature and Source		2018	 2017	 2016	 2015	 2014
Other income Unrealized loss on asse	\$ ets	925.	\$ 1,000.	\$ 139.	\$ 1,002.	\$ 3,456.
Tota	L \$	925.	\$ 1,000.	\$ -41,838. -41,699.	\$ 1,002.	\$ 3,456.

Schedule B (Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

► Attach to Form 990, Form 990-EZ, or Form 990-PF. ► Go to www.irs.gov/Form990 for the latest information. OMB No. 1545-0047

2018

Employer identification number

Common Counsel Foundation		94-3214166
Organization type (check one):		
Filers of:	Section:	
Form 990 or 990-EZ	X 501(c)(3) (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a	private foundation
	527 political organization	
	ozi ponticali organization	
Form 990-PF	501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a priva	ate foundation
	501(c)(3) taxable private foundation	ato roundation
Check if your organization is covered by the General	Rule or a Special Rule.	
Note: Only a section 501(c)(7), (8), or (10) orga	anization can check boxes for both the General Rule and a S	pecial Rule. See instructions.
General Rule		
For an organization filing Form 990, 990-EZ	Z, or 990-PF that received, during the year, contributions tota	ling \$5,000 or more (in money or
property) from any one contributor. Comple	te Parts I and II. See instructions for determining a contribute	or's total contributions.
Special Rules		
X For an organization described in section 50	1(c)(3) filing Form 990 or 990-EZ that met the 33-1/3% supp that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 1	ort test of the regulations
received from any one contributor, during the	ne year, total contributions of the greater of (1) \$5,000; or (2)) 2% of the amount on (i)
Form 990, Part VIII, line 1h; or (ii) Form 99	U-EZ, line T. Complete Parts I and II.	
For an organization described in section 50	1(c)(7), (8), or (10) filing Form 990 or 990-EZ that received f than \$1,000 <i>exclusively</i> for religious, charitable, scientific, lit	rom any one contributor,
during the year, total contributions of more	than \$1,000 exclusively for religious, charitable, scientific, lit children or animals. Complete Parts I (entering 'N/A' in colu	erary, or educational
contributor name and address), II, and III.	children of animals. Complete Farts I (entering IVA III con	iniii (b) instead of the
For an organization described in section 50	1(c)(7), (8), or (10) filing Form 990 or 990-EZ that received f	rom any one contributor
	r religious, charitable, etc., purposes, but no such contribution	
\$1,000. If this box is checked, enter here the	e total contributions that were received during the year for a	n <i>exclusively</i> religious,
	ny of the parts unless the General Rule applies to this organi	
it received <i>nonexclusively</i> religious, charitat	ole, etc., contributions totaling \$5,000 or more during the year	ır 💆 🏲
Caution: An organization that isn't covered by t	he General Rule and/or the Special Rules doesn't file Sched	ule B (Form 990, 990-EZ. or
990-PF), but it must answer 'No' on Part IV, lin	e 2, of its Form 990; or check the box on line H of its Form filing requirements of Schedule B (Form 990, 990-EZ, or 990	990-EZ or on its Form 990-PF,
i art i, illie z, to certify that it doesn't meet the	ming requirements of Schedule D (FUIII 330, 330-EZ, 01 330	<i>י</i> יו <i>ו</i> .

BAA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

Schedule B (Form 990, 990-EZ, or 990-PF) (2018)

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service ► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ► Go to www.irs.gov/Form990 for instructions and the latest information.

If the organization answered 'Yes,' on Form 990, Part IV, line 3, or Form 990-EZ, Part V, 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,' on 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,' on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

	xy Tax) (see separate instruc t Section 501(c)(4), (5), or (6) o	tions), then or a line of the result of the	•	,	,
		Counsel Foundation		Employer identific	ation number
				94-321416	
	-	rganization is exempt under section		_	zation.
1	Provide a description of the (see instructions for definition	organization's direct and indirect political on of 'political campaign activities')	ampaign activities in	Part IV.	
2	Political campaign activity ex	xpenditures (see instructions)		▶\$	}
3	Volunteer hours for political	campaign activities (see instructions)			
Pai	t I-B Complete if the or	rganization is exempt under section	on 501(c)(3).		
1	Enter the amount of any exc	ise tax incurred by the organization under	section 4955	▶\$	0.
2	Enter the amount of any exc	cise tax incurred by organization managers	under section 4955.	▶\$	0.
3	If the organization incurred a	a section 4955 tax, did it file Form 4720 for	this year?		Yes No
4 8	Was a correction made?				Yes No
ŀ	If 'Yes,' describe in Part IV.				
Pai	t I-C Complete if the or	rganization is exempt under section	on 501(c), excep	t section 501(c)(3).	•
1	Enter the amount directly ex	pended by the filing organization for section	n 527 exempt function	n activities ►\$	
2	Enter the amount of the filing 527 exempt function activities	g organization's funds contributed to other	organizations for sec	tion ► \$	s
3	Total exempt function expen line 17b.	ditures. Add lines 1 and 2. Enter here and	on Form 1120-POL,	▶\$	5
4	Did the filing organization file	e Form 1120-POL for this year?			Yes No
5	amount of political contribution	and employer identification number (EIN) s. For each organization listed, enter the all so received that were promptly and directly delal action committee (PAC). If additional spanning	ivered to a separate po	olitical organization, such	ı as a separate
	(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
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					

BAA

Schedule C (Form 990 or 990-EZ) 2018	S Common Cour	nsel Foundation		94-321	4166 Page 2
Part II-A Complete if t section 501()	the organization)).	on is exempt under s	ection 501(c)(3) and	l filed Form 5768 (e	lection under
`	**	ngs to an affiliated group (ar	nd list in Part IV each affili	ated group member's nam	ne.
		nd share of excess lobbying		atou group momber o man	,
_	•	ecked box A and 'limited o			
	'expenditures' me	ying Expenditures ans amounts paid or incu	<u>*</u>	(a) Filing organization's totals	(b) Affiliated group totals
1 a Total lobbying expenditu	•		, ,,		
b Total lobbying expenditu	ires to influence a	legislative body (direct lol	bbying)	37,000.	
c Total lobbying expenditu	•	•		37,000.	0.
d Other exempt purpose e	•			7,309,268.	
e Total exempt purpose ex	kpenditures (add li	ines 1c and 1d)		7,346,268.	0.
f Lobbying nontaxable am both columns		mount from the following t		517,313.	
If the amount on line 1e, colu	ımn (a) or (b) is:	The lobbying nontaxable	e amount is:	31773131	
Not over \$500,000	(4) 0. (2) 10.	20% of the amount on line 1e.			
Over \$500,000 but not over \$1,0	000,000	\$100,000 plus 15% of the exces	ss over \$500,000.		
Over \$1,000,000 but not over \$1		\$175,000 plus 10% of the exces			
Over \$1,500,000 but not over \$1		\$225,000 plus 5% of the excess			
Over \$17,000,000	, ,	\$1,000,000.	. , ,		
g Grassroots nontaxable a	mount (enter 25%	. , ,	I	129,328.	0.
h Subtract line 1g from line	•	· · · · · · · · · · · · · · · · · · ·		100/000.	0.
i Subtract line 1f from line		·		0.	0.
					0.
		r line 1h or line 1i, did the o			Yes No
		4-Year Averaging Period			
(Some		at made a section 501(h) elow. See the separate in			
	Lob	bying Expenditures Durin	g 4-Year Averaging Per	iod	
Calendar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) Total
2 a Lobbying nontaxable amount	308,16	345,701	. 389,882.	517,313.	1,561,065.
b Lobbying ceiling amount (150% of line 2a, column (e))					2,341,598.
c Total lobbying expenditures	7,00	00. 1,000	. 44,000.	37,000.	89,000.
d Grassroots nontaxable amount	77,04	42. 86,425	. 97,471.	129,328.	390,266.
e Grassroots ceiling amount (150% of line 2d, column (e))					585,399.
f Grassroots lobbying	5 00	nn	8 000		13 000

| 13,000. Schedule C (Form 990 or 990-EZ) 2018

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)).

(election under section 50 I(n)).						
	(a)		(b)		
For each 'Yes' response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.	es	No	A	Amoun	t	
 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?		7				
d Mailings to members, legislators, or the public?						
e Publications, or published or broadcast statements?						
g Direct contact with legislators, their staffs, government officials, or a legislative body?						_
j Total. Add lines 1c through 1i						_
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) section 501(c)(6).	(5) ,	or				_
				Ye	s No	0
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 carry over lobbying and political campaign activity expenditures from the price	or ye	ear?		3		
Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c) (6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered 'No,' OR (b) Part answered 'Yes.' 1 Dues, assessments and similar amounts from members.	irt I	or se II-A, li	ection ne 3,	501(d	:)	
		ı				
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).						
a Current year		2 a				
b Carryover from last year.		2 b				
c Total	L	2 c				
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

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (see instructions); and Part II-B, line 1. Also, complete this part for any additional information.

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

Supplemental Financial Statements

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

► Attach to Form 990.

► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

Open to Public Inspection
Employer identification number

Common Councol Foundation

	Common Counsel Foundation			94-3214166
Par	Organizations Maintaining Donor Complete if the organization answ	Advised Funds or Other Sered 'Yes' on Form 990, Pa	Similar Fun art IV, line	ds or Accounts. 6.
		(a) Donor advised funds	S	(b) Funds and other accounts
1	Total number at end of year		11	
2	Aggregate value of contributions to (during year)	2	25,000.	
3	Aggregate value of grants from (during year)		48,587.	
4	Aggregate value at end of year	5	92,420.	
5	Did the organization inform all donors and donor are the organization's property, subject to the o	r advisors in writing that the asse rganization's exclusive legal cont	ets held in do	nor advised funds X Yes No
6	Did the organization inform all grantees, donors for charitable purposes and not for the benefit of impermissible private benefit?	, and donor advisors in writing the fithe donor or donor advisor, or f	at grant fund for any other	s can be used only purpose conferring X Yes No
Par	<u> </u>			
ı aı	Complete if the organization answ	ered 'Yes' on Form 990. Pa	art IV. line	7.
1	Purpose(s) of conservation easements held by			
	Preservation of land for public use (e.g., red			f a historically important land area
	Protection of natural habitat	Pı	reservation o	f a certified historic structure
	Preservation of open space			
2	Complete lines 2a through 2d if the organization he last day of the tax year.	ld a qualified conservation contribut	ion in the forn	n of a conservation easement on the
				Held at the End of the Tax Year
	a Total number of conservation easements			
	b Total acreage restricted by conservation easem			
(c Number of conservation easements on a certifie	ed historic structure included in (a	a)	2c
(d Number of conservation easements included in structure listed in the National Register	(c) acquired after 7/25/06, and no	ot on a histor	ic 2 d
3	Number of conservation easements modified, transtax year ►	ferred, released, extinguished, or ter	rminated by th	ne organization during the
4	Number of states where property subject to conserv	vation easement is located ►		
5	Does the organization have a written policy rega			
6	and enforcement of the conservation easements Staff and volunteer hours devoted to monitoring, ins			<u> </u>
7	Amount of expenses incurred in monitoring, inspect ►\$	ting, handling of violations, and enfo	orcing conserv	ration easements during the year
8	Does each conservation easement reported on and section 170(h)(4)(B)(ii)?	line 2(d) above satisfy the require	ements of sec	ction 170(h)(4)(B)(i) Yes No
9	In Part XIII, describe how the organization reports of include, if applicable, the text of the footnote to conservation easements.	conservation easements in its revent the organization's financial state	ue and expens ments that d	se statement, and balance sheet, and escribes the organization's accounting for
Par	Organizations Maintaining Collec Complete if the organization answ	tions of Art, Historical Trea ered 'Yes' on Form 990, Pa	asures, or art IV, line	Other Similar Assets. 8.
1 8	a If the organization elected, as permitted under sart, historical treasures, or other similar assets held in Part XIII, the text of the footnote to its finance	I for public exhibition, education, or	research in fu	nue statement and balance sheet works of rtherance of public service, provide,
I	b If the organization elected, as permitted under shistorical treasures, or other similar assets held for following amounts relating to these items:	public exhibition, education, or rese	earch in furthe	rance of public service, provide the
	(i) Revenue included on Form 990, Part VIII, li			
	(ii) Assets included in Form 990, Part X			
2	amounts required to be reported under SFAS 1	16 (ASC 958) relating to these ite	ems:	
	a Revenue included on Form 990, Part VIII, line 1			
	h Accate included in Form 900 Part Y			▶ \$

Part III Organizations Maintaining Colle	ections of Art, Histo	ricai i reasures, oi	Other Similar Ass	ets (continuea)
3 Using the organization's acquisition, accession, a items (check all that apply):	and other records, check a	ny of the following that ar	re a significant use of its	collection
a Public exhibition	d Loan o	or exchange programs		
b Scholarly research	e Other			
c Preservation for future generations				
4 Provide a description of the organization's collect Part XIII.	ions and explain how they	further the organization's	s exempt purpose in	
5 During the year, did the organization solicit or to be sold to raise funds rather than to be ma	intained as part of the o	rganization's collection	?	Yes No
Part IV Escrow and Custodial Arranger line 9, or reported an amount on	nents. Complete if t Form 990, Part X,	he organization and line 21.	swered 'Yes' on Fo	rm 990, Part IV,
1 a Is the organization an agent, trustee, custodia on Form 990, Part X?	an or other intermediary	for contributions or othe	er assets not included	Yes No
b If 'Yes,' explain the arrangement in Part XIII a	and complete the following	ng table:		
				Amount
c Beginning balance			1c	
d Additions during the year			1 d	
e Distributions during the year			1 e	
f Ending balance			1f	
2a Did the organization include an amount on Fo	rm 990, Part X, line 21,	for escrow or custodial	account liability?	Yes No
b If 'Yes,' explain the arrangement in Part XIII.				
2 in 100, oxplain the arrangement in 1 arrytim	oncon noro il uno expiai	iadion nao 2001 proma		
Part V Endowment Funds. Complete if	the organization an	swered 'Yes' on Fo	orm 990 Part IV lin	ne 10
(a) Current				(e) Four years back
1 a Beginning of year balance	(b) Thoryean	(C) Two years back	(u) Tillee years back	(e) Four years back
b Contributions				_
b Contributions				
c Net investment earnings, gains, and losses				
d Grants or scholarships				_
e Other expenditures for facilities and programs				
f Administrative expenses				
g End of year balance	1 1 1 20	4		
2 Provide the estimated percentage of the curre	•	e 1g, column (a)) held	as:	
a Board designated or quasi-endowment ►	ૄ૾ૺ			
b Permanent endowment ►				
c Temporarily restricted endowment	%			
The percentages on lines 2a, 2b, and 2c should e	equal 100%.			
3 a Are there endowment funds not in the possession organization by:	n of the organization that a	re held and administered	for the	Yes No
(i) unrelated organizations				3a(i)
(ii) related organizations				3a(ii)
b If 'Yes' on line 3a(ii), are the related organiza	tions listed as required of	on Schedule R?		3b
4 Describe in Part XIII the intended uses of the	organization's endowme	ent funds.		<u> </u>
Part VI Land, Buildings, and Equipmen				
Complete if the organization ans		n 990 Part IV line	11a See Form 99	0 Part X line 10
	1			
Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1 a Land	(IIIVOStillOlit)	basis (otiloi)	acpicciation	
b Buildings.				
<u> </u>				
c Leasehold improvements		05 400	10 505	F 045
d Equipment		25,432.	19,585.	5,847
e Other	15 200 5 111	2,034.	1,186.	848
Total. Add lines 1a through 1e. (Column (d) must e	quai Form 990, Part X, c	coiumn (B), line 10c.)	·····	6,695

BAA Schedule D (Form 990) 2018

Part VII Investmen	if the organization answered	d 'Yes' on Form 99	0 Part IV line 11h) See Form 990 Part X line II
	or category (including name of security)	(b) Book value		luation: Cost or end-of-year market value
(1) Financial derivatives.				
(2) Closely-held equity in	terests			
(3) Other Various	fixed income		End of Year Ma	arket Value
(A)				
(B)				
(C)				
(D)				
(E)				
<u>(F)</u>				
(G)				
(H)				
(l) =				
	Form 990, Part X, column (B) line 12.)	4,848,224	27./2	
Part VIII Investmen	ts - Program Related.	Yes' on Form 90	N/A 0 Part IV line 11c	c. See Form 990, Part X, line 13
	on of investment	(b) Book value		tion: Cost or end-of-year market value
(1)		(-, 200 raido	(-)saisa oi vaidai	The state of the s
(2)				
(3)				
(4)				
(5)				
(6)				
1111				
(7)				
(7) (8)				
(7) (8) (9)				
(7) (8) (9) (10)	Form 990, Part X, column (B) line 13.) •	•		
(7) (8) (9) (10) Total. (Column (b) must equal Part IX Other Assi	ets.	N/	A Doubly line 11a	d Con Farms 2000 Part V line 1
(7) (8) (9) (10) Total. (Column (b) must equal Part IX Other Assi	ets. If the organization answered	N/I d 'Yes' on Form 99	A 0, Part IV, line 11d	d. See Form 990, Part X, line 15
(7) (8) (9) (10) Total. (Column (b) must equal H Part IX Other Asso	ets. If the organization answered	N/	A 0, Part IV, line 11c	d. See Form 990, Part X, line 19
(7) (8) (9) (10) Total. (Column (b) must equal H Part IX Other Ass Complete i	ets. If the organization answered	N/I d 'Yes' on Form 99	A 0, Part IV, line 11d	
(7) (8) (9) (10) Total. (Column (b) must equal H Part IX Other Asso	ets. If the organization answered	N/I d 'Yes' on Form 99	A 0, Part IV, line 11d	
(7) (8) (9) (10) Total. (Column (b) must equal Part IX Other Assac Complete in (1) (2) (3) (4)	ets. If the organization answered	N/I d 'Yes' on Form 99	A 0, Part IV, line 11d	
(7) (8) (9) (10) Total. (Column (b) must equal Part IX Other Assac Complete in (1) (2) (3) (4) (5)	ets. If the organization answered	N/I d 'Yes' on Form 99	A 0, Part IV, line 11c	
(7) (8) (9) (10) Total. (Column (b) must equal F Part IX Other Ass Complete i (1) (2) (3) (4) (5) (6)	ets. If the organization answered	N/I d 'Yes' on Form 99	A 0, Part IV, line 11c	
(7) (8) (9) (10) Total. (Column (b) must equal F Part IX Other Assonate Complete in (1) (2) (3) (4) (5) (6) (7)	ets. If the organization answered	N/I d 'Yes' on Form 99	O, Part IV, line 11c	
(7) (8) (9) (10) Total. (Column (b) must equal F Part IX Other Assonate Complete in (1) (2) (3) (4) (5) (6) (7) (8)	ets. If the organization answered	N/I d 'Yes' on Form 99	A 0, Part IV, line 11c	
(7) (8) (9) (10) Total. (Column (b) must equal R Part IX Other Associated Complete in (1) (2) (3) (4) (5) (6) (7) (8) (9)	ets. If the organization answered	N/I d 'Yes' on Form 99	A 0, Part IV, line 11d	
(7) (8) (9) (10) Total. (Column (b) must equal H Part IX Other Asson Complete in (1) (2) (3) (4) (5) (6) (7) (8) (9) (10)	ets. If the organization answered (a) De	N/id 'Yes' on Form 99	0, Part IV, line 11c	(b) Book value
(7) (8) (9) (10) Total. (Column (b) must equal F Part IX Other Ass Complete i (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must	ets. If the organization answered (a) De (a) De	N/id 'Yes' on Form 99	0, Part IV, line 11c	(b) Book value
(7) (8) (9) (10) Total. (Column (b) must equal H Part IX Other Asson Complete i (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must Part X Other Liab	ets. If the organization answered (a) De (a) De equal Form 990, Part X, column (a) De illities.	N/id 'Yes' on Form 99 escription	0, Part IV, line 11c	(b) Book value
(7) (8) (9) (10) Total. (Column (b) must equal F Part IX Other Ass Complete i (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must Part X Other Liab Complete if the	ets. If the organization answered (a) De (a) De	N/id 'Yes' on Form 99 escription	0, Part IV, line 11c	(b) Book value
(7) (8) (9) (10) Total. (Column (b) must equal F Part IX Other Ass Complete i (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must Part X Other Liab Complete if th (a) De (1) Federal income tax	ets. If the organization answered (a) De equal Form 990, Part X, column (a) illities. The organization answered 'Yes' on Escription of liability	N/id 'Yes' on Form 99 escription (B) line 15.)	0, Part IV, line 11c	(b) Book value
(7) (8) (9) (10) Total. (Column (b) must equal F Part IX Other Ass Complete i (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must Part X Other Liab Complete if th (a) De (1) Federal income taxic	ets. If the organization answered (a) De equal Form 990, Part X, column (a) illities. The organization answered 'Yes' on Escription of liability	N/id 'Yes' on Form 99 escription (B) line 15.)	0, Part IV, line 11c	(b) Book value
(7) (8) (9) (10) Total. (Column (b) must equal Ferritian Complete in Complete	ets. If the organization answered (a) De equal Form 990, Part X, column (a) illities. The organization answered 'Yes' on Escription of liability	N/id 'Yes' on Form 99 escription (B) line 15.)	0, Part IV, line 11c	(b) Book value
(7) (8) (9) (10) Total. (Column (b) must equal Report IX Other Asson Complete in (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must Part X Other Liab Complete if the (a) Decentification (1) (1) Federal income taxed (2) (3) (4)	ets. If the organization answered (a) De equal Form 990, Part X, column (a) illities. The organization answered 'Yes' on Escription of liability	N/id 'Yes' on Form 99 escription (B) line 15.)	0, Part IV, line 11c	(b) Book value
(7) (8) (9) (10) Total. (Column (b) must equal Report IX Other Asson Complete in (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must Part X Other Liab Complete if the (a) De (1) Federal income tax (2) (3) (4) (5)	ets. If the organization answered (a) De equal Form 990, Part X, column (a) illities. The organization answered 'Yes' on Escription of liability	N/id 'Yes' on Form 99 escription (B) line 15.)	0, Part IV, line 11c	(b) Book value
(7) (8) (9) (10) Total. (Column (b) must equal R Part IX Other Asson Complete in the complete	ets. If the organization answered (a) De equal Form 990, Part X, column (a) illities. The organization answered 'Yes' on Escription of liability	N/id 'Yes' on Form 99 escription (B) line 15.)	0, Part IV, line 11c	(b) Book value
(7) (8) (9) (10) Total. (Column (b) must equal R Part IX Other Asson Complete in the complete	ets. If the organization answered (a) De equal Form 990, Part X, column (a) illities. The organization answered 'Yes' on Escription of liability	N/id 'Yes' on Form 99 escription (B) line 15.)	0, Part IV, line 11c	(b) Book value
(7) (8) (9) (10) Total. (Column (b) must equal H Part IX Other Asson Complete i (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must Part X Other Liab Complete if th (a) De (1) Federal income taxion (2) (3) (4) (5) (6) (7) (8)	ets. If the organization answered (a) De equal Form 990, Part X, column (a) illities. The organization answered 'Yes' on Escription of liability	N/id 'Yes' on Form 99 escription (B) line 15.)	0, Part IV, line 11c	(b) Book value
(7) (8) (9) (10) Total. (Column (b) must equal H Part IX Other Asson Complete i (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must Part X Other Liab Complete if the Complete in Complete if the Complete in Comple	ets. If the organization answered (a) De equal Form 990, Part X, column (a) illities. The organization answered 'Yes' on Escription of liability	N/id 'Yes' on Form 99 escription (B) line 15.)	0, Part IV, line 11c	(b) Book value
(7) (8) (9) (10) Total. (Column (b) must equal Ferrity) (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must Part X Other Liab Complete if the Complete in the Com	ets. If the organization answered (a) De equal Form 990, Part X, column (a) illities. The organization answered 'Yes' on Escription of liability	N/id 'Yes' on Form 99 escription (B) line 15.)	0, Part IV, line 11c	(b) Book value
(7) (8) (9) (10) Total. (Column (b) must equal From IX Other Associated Complete is a complete if the complete is a complete in a complete is a complete is a complete is a complete in	ets. If the organization answered (a) De equal Form 990, Part X, column (a) illities. The organization answered 'Yes' on Escription of liability	M/Zes' on Form 999 escription (B) line 15.) Form 990, Part IV, line (b) Book value	0, Part IV, line 11c	(b) Book value

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.		
1 Total revenue, gains, and other support per audited financial statements	1	19,660,706.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:		, ,
a Net unrealized gains (losses) on investments		
b Donated services and use of facilities		
c Recoveries of prior year grants		
d Other (Describe in Part XIII.) See Part XIII 2d 438,000.		
e Add lines 2a through 2d.	2 e	438,000.
3 Subtract line 2e from line 1.	3	19,222,706.
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 7b		
b Other (Describe in Part XIII.) 4b		
c Add lines 4a and 4b	4 c	
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.).	5	19,222,706.
Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per	Retur	n.
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.		
1 Total expenses and losses per audited financial statements	1	7,784,268.
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a Donated services and use of facilities		
b Prior year adjustments		
c Other losses		
d Other (Describe in Part XIII.) See Part XIII 2d 438,000.		
e Add lines 2a through 2d.	2 e	438,000.
3 Subtract line 2e from line 1	3	7,346,268.
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 7b		
b Other (Describe in Part XIII.) 4b		
c Add lines 4a and 4b.	4 c	
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.).	5	7,346,268.
Part XIII Supplemental Information.		
Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Paine 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any	rt V, y additio	onal information.
Schedule D, Part XI, Line 2d Other Revenue Included In F/S But Not Included On Form 990		
Internal grants	<u>\$</u> al <u>\$</u>	438,000. 438,000.
Schedule D, Part XII, Line 2d Other Expenses And Losses Per Audited F/S		
Internal grants Tota	<u>\$</u>	438,000. 438,000.

BAA Schedule D (Form 990) 2018

SCHEDULE J (Form 990)

Compensation Information

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

Complete if the organization answered 'Yes' on Form 990, Part IV, line 23.

► Attach to Form 990.

► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Common Counsel Foundation

Employer identification number 94-3214166

Pai	rt I Questions Regarding Compensation			
			Yes	No
1 a	a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (such as maid, chauffeur, chef)			
ı	b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If 'No,' complete Part III to explain	1 b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2		
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.			
	Compensation committee Written employment contract			
	Independent compensation consultant Compensation survey or study			
	Form 990 of other organizations Approval by the board or compensation committee			
4	During the year, did any person listed on 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?	4 a		Х
	b Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4 b		X
•	c Participate in, or receive payment from, an equity-based compensation arrangement?	4 c		Х
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:			
ä	a The organization?	5 a		Х
I	b Any related organization?	5 b		X
	If 'Yes' on line 5a or 5b, describe in Part III.			
6	For persons listed on 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?	6 a		Х
I	b Any related organization?	6 b		X
	If 'Yes' on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If 'Yes,' describe in Part III.	7		Х
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If 'Yes,' describe in Part III.	8		Х
9	If 'Yes' on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?	9		

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

Schedule J (Form 990) 2018

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on 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 aren't listed on Form 990, Part VII.

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

-		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Potizoment (D) Nentavable (E) Total e			(E) Compensation		
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	(C) Retirement and other deferred compensation	(D) Nontaxable benefits		(F) Compensation in column (B) reported as deferred on prior Form 990		
	(i)	134,223.	0.	0.	0.	0.	134,223.	0.		
1 Former CEO	(ii)	0.	0.	0.	0.	0.	0.	0.		
	(i)		 				L			
2	(ii)									
	(i)									
3	(ii)									
	(j)		 		 		 			
4	(ii) (i)									
5	(i) (ii)		 		 		 			
	(i)									
6	(ii)		 		 		 			
	(i)									
7	(ii)		†				†			
	(i)									
8	(ii)		T				T			
	(i)									
9	(ii)									
	(i)		 		L		↓			
10	(ii)									
11	(j)		 		 		 			
11	(ii)									
12	(i) (ii)		 		 		+			
12	(i)									
13	(ii)		 				 			
·	(i)							,		
14	(ii)		†				†			
	(i)									
15	(ii)		T				†	1		
	(i)		<u> </u>		L		L			
16	(ii)									
BAA			TEE \(\lambda \) 10/20	1/10		-	Calaaduda	L/Farm 000\ 2010		

BAA

TEEA4102L 10/29/18

Schedule J (Form 990) 2018

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

SCHEDULE 0 (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ. ► Go to www.irs.gov/Form990 for the latest information.

2018

Open to Public Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

Common Counsel Foundation

Employer identification number

94-3214166

Form 990, Part III, Line 1 - Organization Mission

Common Counsel Foundation advances equity and environmental health through a combination of direct grant making and strategic philanthropic advising for client member funds and manages projects focused on organizational development, leadership sustainability, and donor education.

Form 990, Part III, Line 4a - Program Service Accomplishments

Strategic and Values-Driven Grantmaking

In 2018, Common Counsel Foundation (Common Counsel) managed over \$6 million in grants to charitable organizations that are advancing effective solutions to longstanding social and environmental inequities, through its direct grantmaking and influencing independent foundations.

Founded in 1988, Common Counsel advances equity and environmental health through a combination of direct grant making and strategic philanthropic advising for client member funds and manages projects focused on organizational development, leadership training and sustainability and donor education. Common Counsel partners with families and individual donors to expand philanthropic resources for grassroots groups composed of and led by members of vulnerable communities and social movements. In order to expand the scale of philanthropic resources for community-led groups, Common Counsel utilizes two guiding principles for its strategic grantmaking. First, Common Counsel invests in community leadership to advance meaningful solutions to critical social, economic and ecological challenges. Second, Common Counsel supports increased collaboration through shared campaigns and long-term alliances that serve to amplify the effectiveness of local efforts. For decades, these two strategies have allowed groups to develop community leadership, to advance systemic solutions defined by community members themselves, and to ensure health and equity for everyone.

Form 990, Part III, Line 4a - Program Service Accomplishments

hub of progressive public philanthropy on the West Coast and beyond, while entering into a phase of bold visioning for the future.

Below are a few examples of CCF grant recipients, which demonstrate the range of organizations and issues that we support.

Economic Justice:

The Awood Center | Minneapolis, MN

The Awood Center was founded in 2017 to build economic and political power for workers in East African communities in Minnesota. The Awood Center has spearheaded a nation-leading organizing effort with the 3,500 Amazon warehouse workers in the Twin Cities, of which the majority are East African. The Awood Center's agenda is about improving conditions for workers but also about elevating the issue of corporate responsibility with the goal of getting Amazon to invest back into the Black and East African community. The campaign has already garnered big wins for workers including securing back wages, respect and support for their religious practices, the dismissal of multiple disciplinary charges against workers, and the removal of several abusive managers. Most important, it is a creating a line for open communications and negotiations with Amazon directly - which had been unprecedented. The Awood Center was the first group that has gotten Amazon to come to the negotiating table, knowing that it would be nearly impossible to replace such a pivotal workforce in Minnesota. Native Rights & Environmental Justice:

Honor the Earth | Callaway, MN

Honor the Earth is an indigenous-led environmental organization based in White Earth Band of Ojibwe reservation in northern Minnesota that challenged the fossil fuel industry for nearly 25 years. They have worked successfully with Indigenous

Form 990, Part III, Line 4a - Program Service Accomplishments

communities to oppose nuclear waste dumps (Skull Valley Goshute), mega dam projects (James Bay 2), and many mining projects nationally and internationally. A current campaign is the fight against Line 3, a 915,000 barrel a day tar sands pipeline through Minnesota, which is also the largest pipeline proposal in the state. Line 3 is being proposed by by Enbridge Corporation, the same owners of the Dakota Access Pipeline. Honor the Earth has built a citizen's movement that is now preparing to fight Enbridge Line 3 through resistance camps, litigation, and community engagement. These "Water Protector Camps" empower local youth and allies though trainings focused on pipeline education, renewable energy, food systems, media, and coordination with allies who do nonviolent resistance trainings.

Housing Justice & Tenants Rights:

Right to the City Alliance | Brooklyn, NY

At the local and regional levels, housing justice issues are continuing to build momentum and power. 2018 saw the success of major local victories, such as: Oakland's Proposition Y which passed with 75% support, paving the way to expand Just Cause Eviction protections for thousands of tenants; San Francisco's Proposition C which taxes big corporations to house people experiencing homelessness; and, Los Angeles County's Rent Stabilization Ordinance, which the Board of Supervisors approved, that implements a 6-month rent control and just cause eviction policy. In 2019, local and statewide campaigns for rent control and tenant protections are gearing up in Oregon, Washington, Colorado, New York, Nevada, Illinois, and Rhode Island. Tenants are finding strength in numbers and building power for themselves. 2018 saw rent strikes throughout the country, from the East Bay to Los Angeles and from Rochester to Minneapolis. The momentum only continues to build as housing rights take center stage in 2019 and beyond.

Form 990, Part III, Line 4b - Program Service Accomplishments

Fiscal Sponsorship-

Common Counsel Foundation's fiscal sponsorship program ensures the health and vitality of the sponsored community-led organizations, and promotes strategic coordination in the philanthropic sector. In 2018, CCF acted as fiscal sponsor for the Kindle Project, The Windcall Institute, RoadMAP, and Justice Funders. The Kindle Project seeks to foster creative ideas to inspire and support possibilities for transformational change.

The Windcall Institute supports the development and sustainability of leaders, which is a key to ensuring strong, healthy visionary organizations.

RoadMAP is a national network of organizational-development consultants dedicated to serving social-justice organizations. Roadmap serves as a forum for peer exchange and innovation among organizational-development consultants.

Justice Funders promotes learning and coordination among donors to strengthen grantmaking for social justice.

Form 990, Part III, Line 4c - Program Service Accomplishments

Philanthropic Services -

Common Counsel Foundation provides strategic philanthropic advice, grants management and administration, and accounting support to independent foundations that share a commitment to equity and environmental health. CCF assists its clients in streamlining their grantmaking processes and deepening their impact. In addition to the services already noted, CCF helps clients refine their grantmaking strategy and provides research, due diligence, grant recommendations, trustee support, and legal compliance.

CCF taps community advisors, each of whom has deep connections to community-led organizations and whose knowledge and expertise adds to the knowledge and expertise of CCF's staff. CCF's community advisors and staff ensure that the organization is

Form 990, Part III, Line 4c - Program Service Accomplishments

aware of the latest innovations emerging from local communities and of pioneering solutions developed by local leaders. CCF's staff and advisors are able to identify community leaders who have exciting vision and organizations with promising new models and approaches.

Form 990, Part VI, Line 11b - Form 990 Review Process

Form 990 is prepared by the foundation's outside auditor after the completion of the annual audit. The draft Form 990 is reviewed by staff before being forwarded to the Board Chair and Treasurer, who review the Form 990 and make comments or corrections prior to the filing of the return. When completed, the Form 990 is distributed to the full Board of Trustees.

Form 990, Part VI, Line 12c - Explanation of Monitoring and Enforcement of Conflicts

All Trustees of the CCF Board have read and understood the conflict of interest policy as indicated by their signature on the form. Trustees are asked to renew their commitment to the policy and to re-sign the form annually at the first meeting of the Board of Trustees each year.

Form 990, Part VI, Line 15a - Compensation Review & Approval Process - CEO & Top Management

The Board of Trustees reviews salary surveys from various sources, including the Council on Foundations and Exponent Philanthropy and determines the salary for the CEO based on comparable data and the CEO's experience.

Form 990, Part VI, Line 15b - Compensation Review & Approval Process - Officers & Key Employees

The CEO follows a similar process for determining the salaries of key staff, reviewing salary surveys from a variety of sources, including the Council on Foundations and Exponent Philanthropy.

Form 990, Part VI, Line 19 - Other Organization Documents Publicly Available

CCF makes its governing documents, conflict of interest policy, and financial statements available to the public by request.

Name of the organization	Employer identification number
Common Counsel Foundation	94-3214166

Form 990, Part IX, Line 11g Other Fees For Services

		(A)	(B) Program	(C) Management	(D) Fund-
	_	Total	Services	& General	raising
Consultants	Total 3	2,073,823. 2,073,823.	2,068,366. \$ 2,068,366.	2,329. \$ 2,329.	3,128. \$ 3,128.