PUBLIC DISCLOSURE COPY

EXTENDED TO NOVEMBER 15, 2021

Return of Organization Exempt From Income Tax

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.

Open to Public Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

AF	or the	e 2020 calendar year, or tax year beginning	and	enaing							
3 c	heck if pplicabl	C Name of organization			D Employ	er identific	cation number	_			
	Addre										
	Name chang	e Doing business as			94-	<u>321416</u>	56	_			
	Initial return	Number and street (or P.O. box if mail is not delivered to street address		Room/suite							
	Final return	1624 FRANKLIN STREET		1022	510.834.2995						
	termin ated Amen		code		G Gross rece	ipts\$	41,302,609	<u>. </u>			
	return	OARLAND, CA 94012			H(a) Is this						
	tion pendi	F Name and address of principal officer: FEGGI BAIKA			1	bordinates?)			
	SAME AS C ABOVE H(b) Are all subordinates included? Yes No										
			4947(a)(1)	or 527	1		list. See instructions				
		te: WWW.COMMONCOUNSEL.ORG		1			n number	_			
K F	orm of	organization: X Corporation Trust Association Other	r▶	L Year	of formation:	1988 W	State of legal domicile: C	<u>A</u>			
Pa		Summary	COE	3 D773 NC	DO DOII	T (1137 3 3 3	ID.	_			
ě	1	Briefly describe the organization's mission or most significant activities:						_			
Activities & Governance		ENVIRONMENTAL HEALTH THROUGH A COMBI						_			
ern	l	Check this box if the organization discontinued its operations				1 1		2			
Š	l							<u>3</u> 3			
∞ ∞		Number of independent voting members of the governing body (Part VI)					19				
ies		Total number of individuals employed in calendar year 2020 (Part V, line				·····					
Ęï		Total number of volunteers (estimate if necessary)					0.	_			
Ac		Total unrelated business revenue from Part VIII, column (C), line 12 Net unrelated business taxable income from Form 990-T, Part I, line 11					0				
	B	Net differenced business taxable income from Form 990-1, Fart 1, line 11		······	Prior Ye		Current Year	<u>.</u>			
Revenue	8	Contributions and grants (Part VIII, line 1h)			7,169		40,127,356	_			
	l	Contributions and grants (Part VIII, line 1h) Program service revenue (Part VIII, line 2g)			1,571		1,092,865				
ver	l	Investment income (Part VIII, column (A), lines 3, 4, and 7d)				,195.	78,533				
Re	I	Other revenue (Part VIII, column (A), lines 5, 4d, and 7d) Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)				,907.	3,855				
	l	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A),			8,852		41,302,609				
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)			6,606		9,793,262				
	I	Benefits paid to or for members (Part IX, column (A), line 4)			0,000	0.	0,				
	4-	Salaries, other compensation, employee benefits (Part IX, column (A), lir			788	,579.	1,404,678	_			
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)				0.	0.				
ben	b	Total fundraising expenses (Part IX, column (D), line 25)	1 (0	85.							
Ĕ	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)			8,971	,305.	2,030,091	-			
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25			16,366		13,228,031				
	l	Revenue less expenses. Subtract line 18 from line 12			-7,514		28,074,578				
or		•			ginning of Cu	rent Year	End of Year	_			
sets	20	Total assets (Part X, line 16)			12,395		40,793,744				
Net Assets or und Balances	21	Total liabilities (Part X, line 26)			139	,018.	1,353,087	<u>-</u>			
		Net assets or fund balances. Subtract line 21 from line 20			12,256	,510.	39,440,657	_			
Pa	art II	Signature Block						_			
		alties of perjury, I declare that I have examined this return, including accompanyin	-			-	knowledge and belief, it is				
rue,	correc	ct, and complete. Declaration of preparer (other than officer) is based on all inform	nation of wh	nich preparer			24	_			
		Signature of officer				/11/202	21	_			
Sigr		'			Dat	E					
Her	е	PEGGY SAIKA, EXECUTIVE DIRECTOR Type or print name and title						_			
		,		П	Date	Check	PTIN	_			
) v : 4	ı	Print/Type preparer's name			1/10/2	a if	L 0.1.00 = 1.1.1				
Paid Pren	arer	Firm's name BAKER TILLY US, LLP		<u> </u>			39-0859910	_			
	Only	Firm's address 50 FREMONT STREET, SUITE 40	000		FILL	II S EIIV 📂 🧸		_			
J 3 G	Jilly	SAN FRANCISCO, CA 94105	, 0 0		Dh	ne no 41 5	5.781.2500				
May	the II	RS discuss this return with the preparer shown above? See instructions				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	X Yes No	_			
	01 12-2		instruction	ons.			Form 990 (2020	_			

Pai	Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's 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
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
	revenue, if any, for each program service reported.
4a	(Code:) (Expenses 9,797,664. including grants of 9,793,262.) (Revenue \$ 1,092,865.
	STRATEGIC AND VALUES-DRIVEN GRANTMAKING -
	IN 2020, COMMON COUNSEL FOUNDATION (COMMON COUNSEL) MANAGED OVER \$8.2
	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.
	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
4b	1 007 020
40	(Code:) (Expenses \$1,867,939 including grants of \$) (Revenue \$)
	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 2020,
	CCF ACTED AS FISCAL SPONSOR FOR THE KINDLE PROJECT, THE WINDCALL
	INSTITUTE, AND ROADMAP.
	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
4c	(Code:) (Expenses \$1, 065, 574. including grants of \$) (Revenue \$)
	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
4d	Other program services (Describe on Schedule O.)
	(Expenses \$ including grants of \$) (Revenue \$)
4e	Total program service expenses ► 12,731,177.

Form 990 (2020) 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	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
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		X
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? If "Yes," complete Schedule C, Part II	4	X	
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		X
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	X	
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			,,
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X
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		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		X
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? If "Yes," complete Schedule D,			
	Part VI	11a	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	11b	Х	
С	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	11c		Х
d	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	11d		Х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f				
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		Х
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes." complete			
	Schedule D, Parts XI and XII	12a	Х	
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		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
	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		X
16	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? If "Yes," complete Schedule F, Parts III and IV	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	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		Х
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	•	20a		Х
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	Х	L

	1990 (2020) COMMON COUNSEL FOUNDATION 94-32	<u> 14166</u>	Р	age ⁴
Pa	rt 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			l
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
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? If "Yes," complete			
	Schedule J	. 23	X	_
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			\ _{3,7}
	Schedule K. If "No," go to line 25a			X
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?			
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 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		X
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		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			l
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
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):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			l
	"Yes," complete Schedule L, Part IV			X
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
С	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If			
	"Yes," complete Schedule L, Part IV			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? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I			X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	. 32		X
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		X
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
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?			Х
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?	?		
	If "Yes," complete Schedule R, Part V, line 2	. 36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
	Note: All Form 990 filers are required to complete Schedule O	38	Х	
Pa				
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	19		
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b	0		
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			

(gambling) winnings to prize winners?

020) COMMON COUNSEL FOUNDATION
Statements Regarding Other IRS Filings and Tax Compliance (continued) Part V

22 Enter the number of employees reported on From W3. Transmittal of Wage and Tax Statements, go 19 bit at least one is reported on line 2a, did the organization file all required federal employment tax returns? 32 bit 4 least one is reported on line 2a, did the organization file all required federal employment tax returns? 33 bit the organization have unrelated business gross income of \$1,000 or more curring the year? 34 bit 1 was a file of prome 901 for this year? // "Y0" to fire 3b, provide an explanation on Schadule 0 35 bit 1 was a file all form 9901 for this year? // "Y0" to fire 3b, provide an explanation on Schadule 0 36 bit 1 was a file all form 9901 for this year? // "Y0" to fire 3b, provide an explanation on Schadule 0 36 bit 1 was a file of prome 901 for this year? // "Y0" to fire 3b, provide an explanation on Schadule 0 37 bit 1 was a file file and prome 901 for this year? // "Y0" to fire 3b, provide an explanation on Schadule 0 38 bit 1 was been granization aparty to a prohibited tax shelter transaction and the year? 59 bit 1 was been granization aparty to a prohibited tax shelter transaction at any time during the tax year? 50 bit any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 50 bit 1 was a file of the organization in the granization in Schadule of the granization of the was a party to a prohibited tax shelter transaction? 50 bit 1 was a file of the organization induse with every solicitation an express statement that such contributions origins were not tax deductibles or antitable contributions? 50 bit 1 was a file of the organization induse with every solicitation and express statement that such contributions or grits were not tax deductibles and state shall be a file organization shall an express the granization shall was a file organization shall an express the file of t						Yes	No		
bill fall least one is reported on line 2a, did the organization file all required federal employment tax returns? Note: if the sum of lines 1a and 2a is greater than 250, you may be required to e_file (see instructions) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? 3b Did they shall filed a form \$60 for this year? If "No" is line 3b, provide an explanation on Schedule O 3b I*Yes, 'has it filed a form \$60 for this year? If "No" is line 3b, provide an explanation on Schedule O 3c I*Yes, 'has it filed a form \$60 for the form \$60 for the sum of lines and l	2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,							
Note: If the sum of lines 1a and 2a is greater than 250, you may be required to _e/lip (see instructions) 3a		filed for the calendar year ending with or within the year covered by this return	2a	19					
3a Did the organization have unrelated business gross income of \$1,000 or more during the year? bit "Yes," has it filled a Form 990-T for this year? If "No" to fine 35, provide an explanation on Schedule O 4a At any time during the calendary 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(in the financial account) of the financial account in a foreign country. Such as a bank account, securities account, or other financial account(in the financial account). The financial accounts of the fining requirements for FinCEN Form 114, Report of Foreign Bank and Financial accounts (FBAR). b Id any taxable party notify the organization that it was or is a party to a prohibeted tax shelter transaction? bit if "Yes," to line 5a or 5b, did the organization that it was or is a party to a prohibeted tax shelter transaction? bit "Yes," did the organization are annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible? bit "Yes," did the organization include with every solicitation an exposes statement that such contributions or gifts were not tax deductible? contributions that may receive deductible contributions under section 170(c). bit the organization shall expense the expense of the expense statement that such contributions or gifts were not tax deductible? contributions that may receive deductible contributions under section 170(c). bit the organization shall expense to the value of the poops of services provided to the payor? bit the organization shall expense to the value of the poops of services provided? contribution of the organization shall be expensed to the first organization shall be the organization shall be the value of the poops to services and benefit contract? contribution of the organization shall be expensed to the shall be expensed to the first organization t	b	If at least one is reported on line 2a, did the organization file all required federal employment tax return	ns?		2b	X			
b if Yes,* *inas if flied a Form 990-T for this year? if Yes* to line 3b, provide an explanation on Schedule O 44 At any time during the calendary year, did the organization have an interest in, or a signature or other authority over, a financial accountry in a foreign country (such as a behal account accountry). 45 If Yes,* *enter the name of the foreign country (such as a behal account accountry). 56 Was the organization a party to a prohibitote tax shelter transaction at any time during the tax year? 57 See instructions for filing requirements for FincEM Form 114, Report of Foreign Bank and Financial Accounts (FBAF). 58 Was the organization a party to a prohibitote tax shelter transaction? 59 Lax Y. 50 Lif Yes,* *to line 5a or 5b, did the organization file Form 8886-7? 50 Lif Yes* to line 5a or 5b, did the organization file Form 8886-7? 51 Press,* *to did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 50 Lif Yes,* *did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 50 Lif Yes,* *did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 50 Lif Yes,* *did the organization notify the donor of the value of the goods or services provided? 51 Life Yes,* *did the organization notify the donor of the value of the goods or services provided? 52 Life Form 8282? 53 Life Yes,* *did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 54 Life Yes,* *did the organization received any funds, directly or indirectly, to pay premiums on a personal benefit contract? 55 Life Form 8282? 56 Life the organization received any funds, directly or indirectly, to pay premiums on a personal benefit contract? 57 Life Hill Yes,* *life the organization has pay premiums, directly por indirectly, or a personal benefit contract? 57 Lif			s)						
4a 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)? 4b if "Yes," enter the name of the foreign country (such as a bank account, securities account, or other financial accounts (FBAR). 5c Was the organization in the organization that it was or is a party to a prohibited tax shelter transaction? 5c If "Yes" is line Sar of Sb, diff the organization file Form 888-67? 6c 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? 6c JX 6d If "Yes" is did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6d Organizations that may receive deductible contributions under section 170(c). 8d If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 9d Organizations that may receive deductible contributions under section 170(c). 10 If the organization receive a payment in excess of \$75 made partly as contribution and partly for goods and services provided to the payor? 11 If "Yes," indicate the number of Forms 8282 filed during the year 12 If "Yes," indicate the number of Forms 8282 filed during the year 12 If the organization received a contribution of qualified intellectual property, did the organization file Form 889-0 as required? 12 If the organization received a contribution of qualified intellectual property, did the organization file Form 1098-0? 13 Section \$901(x)? organizations maintaining donor advised funds. 14 If the organization file Form \$1000 and							X		
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a Initiation fees and capital contributions included on Part VIII, line 12					9b		X		
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b Section 501(c)(12) organizations. Enter: a Gross income from members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note: See the instructions for additional information the organization must report on Schedule O. b 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 c Enter the amount of reserves on hand 13b c Enter the amount of reserves on hand 13c 14a Did the organization receive any payments for indoor tanning services during the tax year? 14a X b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O 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 X If "Yes," see instructions and file Form 4720, Schedule N.			مد ا	ı					
Section 501(c)(12) organizations. Enter: a Gross income from members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 112a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If "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? Note: See the instructions for additional information the organization must report on Schedule O. b 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 c Enter the amount of reserves on hand 13c Is the organization receive any payments for indoor tanning services during the tax year? 14a X b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O 14b 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 X If "Yes," see instructions and file Form 4720, Schedule N.									
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Note: See the instructions for additional information the organization must report on Schedule O. b 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 c Enter the amount of reserves on hand 13c 14a	13	Section 501(c)(29) qualified nonprofit health insurance issuers.							
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If "Yes," see instructions and file Form 4720, Schedule N. Is the organization an educational institution subject to the section 4968 excise tax on net investment income? 16 X	.5				15		Х		
16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? 16 X		· · · · · · · · · · · · · · · · · · ·							
,	16		incon	ne?	16		X		

Form 990 (2020) COMMON COUNSEL FOUNDATION 94-3214100 Pag
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 on Schedule O. See instructions.

	Check if Schedule O contains a response or note to any line in this Part VI			X							
Sec	tion A. Governing Body and Management										
			Yes	No							
1a	Enter the number of voting members of the governing body at the end of the tax year	3									
	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 on Schedule O.										
b	Enter the number of voting members included on line 1a, above, who are independent 1b	3									
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		Х							
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision										
	of officers, directors, trustees, or key employees to a management company or other person?	3		Х							
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х							
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х							
6	6 Did the organization have members or stockholders?										
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or										
	more members of the governing body?	7a		Х							
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or										
	persons other than the governing body?	7b		Х							
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:										
а	The governing body?	8a	Х								
b	Each committee with authority to act on behalf of the governing body?	8b	Х								
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the										
	organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		Х							
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)										
	· · · · · · · · · · · · · · · · · · ·		Yes	No							
10a	Did the organization have local chapters, branches, or affiliates?	10a		Х							
	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?	10b									
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х								
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.										
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X								
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X								
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes." describe										
	in Schedule O how this was done	12c	X								
13	Did the organization have a written whistleblower policy?	13	X								
14	Did the organization have a written document retention and destruction policy?	14	X								
15	Did the process for determining compensation of the following persons include a review and approval by independent										
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?										
а	The organization's CEO, Executive Director, or top management official	15a	Х								
	Other officers or key employees of the organization	15b	Х								
	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?	16a		Х							
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?	16b									
Sec	tion C. Disclosure										
17	List the states with which a copy of this Form 990 is required to be filed ▶CA										
18	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)	availa	ble							
	for public inspection. Indicate how you made these available. Check all that apply.										
	Own website X Another's website X Upon request Other (explain on Schedule O)										
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, an	d finan	cial								
	statements available to the public during the tax year.										
20	State the name, address, and telephone number of the person who possesses the organization's books and records										
	COMMON COUNSEL FOUNDATION - (510) 834-2995										
	1624 FRANKLIN ST., STE 1022, OAKLAND, CA 94612										

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- 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.

See instructions for the order in which to list the persons above.

Check this box if neither the organization n	or any related	orga	niza	tion	con	nper	sate	ed any current officer, di	rector, or trustee.			
(A)	(B)			_ (0	C)			(D)	(E)	(F)		
Name and title	Average	(do	Position (do not check more than one box, unless person is both an officer and a director/trustee)		Reportable	Reportable	Estimated					
	hours per	box			box, unless person is both an			s both	n an	compensation	compensation	amount of
	week (list any							from the	from related organizations	other		
	hours for	direct						organization	(W-2/1099-MISC)	compensation from the		
	related	ee or	stee			nsate		(W-2/1099-MISC)	(,	organization		
	organizations	Itrust	nal tr		oyee	ed mos				and related		
	below	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations		
	line)	pul	lus	90	Ke	Hig e	For					
(1) PEGGY SAIKA	40.00	-		,,				150 000	_	F1.4		
EXECUTIVE DIRECTOR	1 00			Х				150,000.	0.	514.		
(2) DENNIS QUIRIN	1.00	.,		,,					_	0		
PRESIDENT	1 00	Х		Х				0.	0.	0.		
(3) MICHELLE NATIVIDAD RODRIGUEZ	1.00	3,7		٦,					_	0		
SECRETARY	1.00	Х		Х				0.	0.	0.		
(4) GARRETT COLLINS TREASURER	1.00	v		-					_	0		
(5) ED LEE	1.00	Х		Х				0.	0.	0.		
TRUSTEE	1.00	Х						0.	0.	0.		
(6) CARLY HARE	1.00	Λ						0.	0.	0.		
TRUSTEE	1.00	Х						0.	0.	0.		
(7) CHINA CHING	1.00	Λ						0.	0.	0.		
TRUSTEE	1.00	Х						0.	0.	0.		
(8) ALEX TOM	1.00							•	•	•		
TRUSTEE	1,00	х						0.	0.	0.		
(9) VANESSA DANIEL	1.00	T-							0.1			
TRUSTEE		х						0.	0.	0.		
								-	-	-		
		1										
		1										
		-										

032007 12-23-20 Form **990** (2020)

I all	Section A. Officers, Directors, Trus	tees, Key Em	oloy	<u>ees,</u>	and	l Hig	ghes	t C	ompensated Employee	s (continued)			
	(A)	(B) (C)							(D)	(E)		(F	·)
	Name and title	Average Position (do not check more than one box, unless person is both an		Reportable	Reportable		Estim						
		week		, unles icer an					compensation from	compensation from related	- 1	amou oth	
		(list any	tor						the	organization		comper	
		hours for	r direc				ted		organization	(W-2/1099-MIS		from	
		related	stee o	rustee			ensat		(W-2/1099-MISC)			organi	
		organizations below	Individual trustee or director	Institutional trustee		Key employee	Highest compensated employee					and re	
		line)	pivipu	stitut	Officer	ey em	ighesi	Former				organiz	ations
		,	=	=	0	×	王 =	Œ			-		
				igsqcup									
											-		
			-										
											$\overline{}$		
			-										
									150 000				F1 4
	Subtotal								150,000.		0.		514.
	Total from continuation sheets to Part VII								150,000.		0.		0. 514.
	Total (add lines 1b and 1c) Total number of individuals (including but no							0 rc		200 of roportable			714.
2	compensation from the organization	ot illilited to til	036	11316	u al	JOVE	<i>y</i>	016	cerved more than \$100,	ooo or reportable	,		1
	compensation from the organization											Ye	s No
3	Did the organization list any former officer,	director, trust	ee, k	сеу е	empl	oye	e, or	hig	hest compensated empl	oyee on			
	line 1a? If "Yes," complete Schedule J for si	uch individual										3	X
	For any individual listed on line 1a, is the su												
	and related organizations greater than \$150),000? If "Yes,	" co	mple	ete S	Sche	edule	J f	or such individual			4 X	:
5	Did any person listed on line 1a receive or a	ccrue comper	ısati	on fr	om	any	unre	elate	ed organization or individ	ual for services			
0 1	rendered to the organization? If "Yes," com	plete Schedul	e J f	or su	ıch r	oers:	on .					5	X
	tion B. Independent Contractors								t : t	100,000 - 1			
	Complete this table for your five highest control the organization. Report compensation for the organization for the complete this table for your five highest control to the organization.										ensat	ion from	
	(A)	irie caleridar ye	ear e	Hull	ig w	IUI C	ועע וכ	11111	(B)	ear.		(C)	
	Name and business	address							Description of s	ervices	С	ompensa	tion
SHI	NING STAR CONSULTING,	LLC							ACCOUNTING A	1D			
232	O OAK STREET, BERKELEY	, CA 94	70	8					BOOKKEEPING			149,	528.
								_					
								\dashv					
								\dashv					
2	Total number of independent contractors (in	ncluding but n	ot lir	nitec	to 1	thos	se lis	ted	above) who received mo	re than			
		<u> </u>											

1

\$100,000 of compensation from the organization

94-3214166

			Check if Schedule O	contain	s a respons	e or note to any lin	e in this Part VIII			
							(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
ervice Contributions, Gifts, Grants and Other Similar Amounts		b c d e f g h	Fundraising events Related organizations Government grants (contributions, gifts, similar amounts not included Noncash contributions included in Total. Add lines 1a-1f PROGRAM FEES	ibution grants, above	1b 1c 1d s) 1e and 1f 1g \$	40,127,356. Business Code 561000	40,127,356. 1,092,865.	1,092,865.		sections 512 - 514
Program Service Revenue			All other program service Total. Add lines 2a-2f				1,092,865.			
	3	3	Investment income (include other similar amounts)	of tax-ex	xempt bond	>	78,533.			78,533.
	5 6	b	Gross rents Less: rental expenses Rental income or (loss)	6a 6b 6c	(i) Real	(ii) Personal				
Ф	7	а	Net rental income or (loss) Gross amount from sales of assets other than inventory Less: cost or other basis	7a	(i) Securities	s (ii) Other				
Other Revenue	8	d a	Net gain or (loss)	ng event	ts (not of c). See	>				
	9	c a	Part IV, line 18 Less: direct expenses Net income or (loss) from Gross income from gamin Part IV, line 19	fundrai g activ	ising events)a				
		c a b	Less: direct expenses Net income or (loss) from Gross sales of inventory, I and allowances Less: cost of goods sold Net income or (loss) from	g activities urns 1	0a 0b					
Miscellaneous Revenue	11	a b c	Net income or (loss) from : MISCELLANEOUS INCOME	3		Business Code 999999	3,855.			3,855.
Misc	12	е	Total. Add lines 11a-11d Total revenue. See instruction			>	3,855. 41,302,609.	1,092,865.	0.	82,388.

Form 990 (2020) COMMON COUNSEL FOUNDATION Part IX Statement of Functional Expenses

Secti	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 response or note to any line in this Part IX										
	not include amounts reported on lines 6b, 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	9,793,262.	9,793,262.								
2	Grants and other assistance to domestic										
	individuals. See Part IV, line 22										
3	Grants and other assistance to foreign										
	organizations, foreign governments, and foreign										
	individuals. See Part IV, lines 15 and 16										
4	Benefits paid to or for members										
5	Compensation of current officers, directors,										
	trustees, and key employees	150,000.	103,646.	41,987.	4,367.						
6	Compensation not included above to disqualified										
	persons (as defined under section 4958(f)(1)) and										
	persons described in section 4958(c)(3)(B)	074 004	056 271	11 000							
7	Other salaries and wages	974,204.	956,371.	11,080.	6,753.						
8	Pension plan accruals and contributions (include	E E1 <i>C</i>	4 570	057	٥٥						
_	section 401(k) and 403(b) employer contributions)	5,516. 183,753.	4,570. 167,123.	857. 15,057.	89. 1,573.						
9	Other employee benefits	91,205.	85,980.	4,320.	905.						
10	Payroll taxes	91,205.	03,900.	4,320.	905.						
11	Fees for services (nonemployees):										
a	Management	25,783.		25,783.							
D	Legal	188,061.	2,947.	185,018.	96.						
4	Accounting	100,001.	2,5416	103,010.							
u	Lobbying Professional fundraising services. See Part IV, line 17				_						
f	Investment management fees										
g											
9	column (A) amount, list line 11g expenses on Sch 0.)	1,614,013.	1,488,100.	125,018.	895.						
12	Advertising and promotion	, ,	, ,	,							
13	Office expenses	86,198.	60,008.	25,701.	489.						
14	Information technology										
15	Royalties										
16	Occupancy	47,909.	34,541.	12,025.	1,343.						
17	Travel	19,298.	17,272.	1,713.	313.						
18	Payments of travel or entertainment expenses										
	for any federal, state, or local public officials										
19	Conferences, conventions, and meetings	15,652.	5,869.	9,747.	36.						
20	Interest										
21	Payments to affiliates										
22	Depreciation, depletion, and amortization	0.000	006	2 222	26						
23	Insurance	2,862.	806.	2,030.	26.						
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)										
а	MISCELLANEOUS EXPENSE	17,573.	2,940.	14,633.							
b	MEMBER FUND EXPENSE	12,742.	7,742.	5,000.							
С											
d											
е	All other expenses										
25	Total functional expenses. Add lines 1 through 24e	13,228,031.	12,731,177.	479,969.	16,885.						
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)				F 990 (2000)						

Form 990 (2020)
Part X Balance Sheet

Pai	rt X	Balance Sneet					
		Check if Schedule O contains a response or no	te to an	y 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			5,132,809.	2	33,133,527.
	3	Pledges and grants receivable, net			1,930,000.	3	270,000.
	4	Accounts receivable, net	479,708.	4	1,792,106.		
	5	Loans and other receivables from any current of					
		trustee, key employee, creator or founder, subs	stantial o	contributor, or 35%			
		controlled entity or family member of any of the	se pers	ons		5	
	6	Loans and other receivables from other disqual	ified pe	rsons (as defined			
		under section 4958(f)(1)), and persons describe	tion 4958(c)(3)(B)		6		
छ	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use				8	
ĕ	9	5			3,136.	9	10,686.
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a	26,788.			
	b	Less: accumulated depreciation	10b	25,094.	3,989.	10c	1,694.
	11	Investments - publicly traded securities			11		
	12	Investments - other securities. See Part IV, line	4,842,428.	12	5,582,273.		
	13	Investments - program-related. See Part IV, line		13			
	14	Intangible assets		14			
	15	Other assets. See Part IV, line 11	3,458.	15	3,458.		
	16	Total assets. Add lines 1 through 15 (must equ	ual line 3	33)	12,395,528.	16	40,793,744.
	17	Accounts payable and accrued expenses		139,018.	17	335,072.	
	18	Grants payable		18			
	19	Deferred revenue			0.	19	869,915.
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete				21	
S	22	Loans and other payables to any current or for					
Liabilities		trustee, key employee, creator or founder, subs					
ia de		controlled entity or family member of any of the				22	
_	23	Secured mortgages and notes payable to unrel		· · · · · · · · · · · · · · · · · · ·		23	
	24	Unsecured notes and loans payable to unrelate				24	
	25	Other liabilities (including federal income tax, p.					
		parties, and other liabilities not included on line	s 17-24)	. Complete Part X	0		140 100
		of Schedule D			120 019	25	148,100.
	26	Total liabilities. Add lines 17 through 25		▶ ▼	139,018.	26	1,353,087.
S		Organizations that follow FASB ASC 958, ch	eck her	e ▶ ∆			
JCe		and complete lines 27, 28, 32, and 33.			E 622 404		7 205 005
<u>a</u>	27				5,623,404. 6,633,106.	27	7,285,085. 32,155,572.
e B	28	Net assets with donor restrictions			0,033,100.	28	32,133,372.
ڃَ		Organizations that do not follow FASB ASC	958, cne	eck nere			
P		and complete lines 29 through 33.				00	
Net Assets or Fund Balances	29	Capital stock or trust principal, or current funds				29	
SSE	30	Paid-in or capital surplus, or land, building, or e				30	
et A	31	Retained earnings, endowment, accumulated in			12,256,510.	31	39,440,657.
ž	32	Total liabilities and not assets/fund balances			12,395,528.	32 33	40,793,744.
	33	Total liabilities and net assets/fund balances			14,333,340.	<i>ა</i> ა	1 40,133,144.

Form **990** (2020)

Form	990 (2020) COMMON COUNSEL FOUNDATION	94	-3214166	Pa	_{ge} 12
Pai	rt 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)	1	41,302	2,6	09.
2	Total expenses (must equal Part IX, column (A), line 25)	2	13,228	3,0	31.
3	Revenue less expenses. Subtract line 2 from line 1	3	28,074	1,5	78.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	12,256	5,5	10.
5	Net unrealized gains (losses) on investments	5	11	L,4	94.
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8	-901	L,9	25.
9	Other changes in net assets or fund balances (explain on Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	39,440),6	<u>57.</u>
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				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	Э.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a			
	separate basis, consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,			
	consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
С	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?		2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain on Sche	dule C).		
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single	gle Au	dit		
	Act and OMB Circular A-133?		3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ed auc	lit		
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b		

Form **990** (2020)

SCHEDULE A

Department of the Treasury

Internal Revenue Service

Total

(Form 990 or 990-EZ)

Public Charity Status and Public Support

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

► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2020

Open to Public Inspection

Employer identification number Name of the organization COMMON COUNSEL FOUNDATION 94-3214166 Reason for Public Charity Status. (All organizations must complete this part.) See instructions. Part I The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 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.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or 10 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 11 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations Provide the following information about the supported organization(s). (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) No above (see instructions))

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.)

Sec	ction A. Public Support	71		,			
Cale	ndar year (or fiscal year beginning in)	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	2989059.	9816832.	17414561.	7169987.	40127356.	77517795.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge	0000000	0016000	45444564	E4.6000E	40405056	8854888
	Total. Add lines 1 through 3	2989059.	9816832.	17414561.	7169987.	40127356.	77517795.
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,						00770010
	column (f)						28778018.
	Public support. Subtract line 5 from line 4.						48739777.
	ndar year (or fiscal year beginning in)	(a) 2016	(b) 2017	(c) 2018	(4) 2010	(2) 2020	(f) Total
	Amounts from line 4	(a) 2016 2989059.	(b) 2017 9816832	17414561.	(d) 2019 7169987	(e) 2020 40127356.	(f) Total
	Gross income from interest,	2505055.	J010032.	T/414301.	71055076	<u> </u>	77317733.
0	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources	3,401.	6,292.	50,100.	99,195.	78,533.	237,521.
a	Net income from unrelated business	3,1010	0,2320	30,1000	33,1330	707333	237,3211
3	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)	-41,699.	1,000.	925.	11,907.	3,855.	-24,012.
11	Total support. Add lines 7 through 10	,	,		,		77731304.
12	Gross receipts from related activities,	etc. (see instruction	ons)			12 6	,658,029.
13	First 5 years. If the Form 990 is for th	ne organization's fir				i01(c)(3)	
	organization, check this box and stop	here					
Sec	ction C. Computation of Publi	c Support Per	centage				
14	Public support percentage for 2020 (li	ine 6, column (f), d	ivided by line 11, o	column (f))		14	62.70 %
15						15	93.72 %
16a	33 1/3% support test - 2020. If the o						
	stop here. The organization qualifies	as a publicly supp	orted organization				> X
b	33 1/3% support test - 2019. If the o	-					
	and stop here. The organization quali						
17a	10% -facts-and-circumstances test	-					
	and if the organization meets the facts					VI how the organiz	zation
	meets the facts-and-circumstances te	-	•	*	-		
b	10% -facts-and-circumstances test	-					10% or
	more, and if the organization meets the				-		. —
	organization meets the facts-and-circu						▶;;;
18	Private foundation. If the organizatio	n did not check a	box on line 13, 16	a, 16b, 1/a, or 17b	, cneck this box a	na see instructions	S ▶∟

Part III | Support Schedule for Organizations Described 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.)

Se	ction A. Public Support	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					
Cale	ndar year (or fiscal year beginning in)	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions,						
	merchandise sold or services per-						
	formed, 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 bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
	ization'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						
6	Total. Add lines 1 through 5						
78	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
k	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						
(Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)						
Se	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
9	Amounts from line 6						
10a	Gross income from interest,						
	dividends, payments received on securities loans, rents, royalties,						
	and income from similar sources						
k	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.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First 5 years. If the Form 990 is for the	ne organization's fi	rst, second, third,	fourth, or fifth tax	year as a section 5	01(c)(3) organization	on,
	check this box and stop here						>
Se	ction C. Computation of Publi	c Support Per	centage				
15	Public support percentage for 2020 (I	ine 8, column (f), d	livided by line 13, o	column (f))		15	%
	Public support percentage from 2019					16	%
	ction D. Computation of Inves					 	
17	Investment income percentage for 20					17	%
18	Investment income percentage from					18	%
198	33 1/3% support tests - 2020. If the	organization did r	not check the box	on line 14, and line	e 15 is more than 3	3 1/3%, and line 1	7 is not
	more than 33 1/3%, check this box ar	nd stop here. The	organization quali	fies as a publicly s	supported organiza	tion	▶□
k	33 1/3% support tests - 2019. If the	organization did r	not check a box on	line 14 or line 19a	a, and line 16 is mo	ore than 33 1/3%, a	and
	line 18 is not more than 33 1/3%, che	ck this box and st	t op here. The orga	nization qualifies a	as a publicly suppo	orted organization	▶∐
20	Private foundation. If the organization	n did not check a	box on line 14, 19a	a, or 19b, check th	nis box and see ins	tructions	

Part IV | Supporting Organizations

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

Section A. All Supporting Organizations

- 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.
- 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).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.
- **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.
- c 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.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.
- **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.
- c 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.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c 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).
- **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?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 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? If "Yes," provide detail in Part VI.
- 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).
- 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).
- 9a 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.
- **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.**
- c 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.
- 10a 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 line 10b below.
 - **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.)

	Yes	No
1		
•		
2		
3a		
3.5		
3b		
3с		
4a		
4b		
4c		
5a		
5b		
5c		
6		
<u> </u>		
7		
8		
00		
9a		
9b		
9c		
10a		
405		
10b n 990 or 99	0-EZ)	2020

Par	rt IV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described in line 11a above?	11b		
С	A 35% controlled entity of a person described in line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detail in Part VI.	11c		
Sect	ction B. Type I Supporting Organizations	•		
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of	one or		
	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's of			
	directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s)			
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supp			
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	g the 1		
	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sect	ction C. Type II Supporting Organizations			
	71 11 3 3		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors		103	140
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
		1		
Sect	the supported organization(s). ction D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the		103	140
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (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?	1		
	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			
	, ,	2		
	the organization maintained a close and continuous working relationship with the supported organization(s). By reason of the relationship described in line 2, above, did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
		3		
Sect	supported organizations played in this regard. Stion E. Type III Functionally Integrated Supporting Organizations			
	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see ins	tructions)		
a				
b				
c		tity (see instruction	(e)	
	Activities Test. Answer lines 2a and 2b below.	ity (See instruction	Yes	No
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
	one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in			
	Part VI the reasons for the organization's position that its supported organization(s) would have engaged in			
	these activities but for the organization's involvement.	2b		
	Parent of Supported Organizations. Answer lines 3a and 3b below.			
	trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.	3a		
		33		
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		

Pai	t V Type III Non-Functionally Integrated 509(a)(3) Supporti	ng Organi	zations		
1	Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). See instructions.				
	All other Type III non-functionally integrated supporting organizations must		•		
Sect	on 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			
Sect	on 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):				
а	Average monthly value of securities	1a			
b	Average monthly cash balances	1b			
С	Fair market value of other non-exempt-use assets	1c			
d	Total (add lines 1a, 1b, and 1c)	1d			
е	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 0.015 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 0.035.	6			
7	Recoveries of prior-year distributions	7			
8	Minimum Asset Amount (add line 7 to line 6)	8			
Sect	on C - Distributable Amount			Current Year	
1	Adjusted net income for prior year (from Section A, line 8, column A)	1			
2	Enter 0.85 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-functional	ally integrated	Type III supporting orga	nization (see	
	instructions).				

Schedule A (Form 990 or 990-EZ) 2020

Par	t v Type III Non-Functionally Integrated 509(a)(3) Supporting Orga	nizations (continu	<u>ıed) </u>	
Secti	on D - Distributions				Current Year
1	Amounts paid to supported organizations to accomplish exer	mpt purposes		1	
2	Amounts paid to perform activity that directly furthers exemp	t purposes of supported			
	organizations, in excess of income from activity			2	
3	Administrative expenses paid to accomplish exempt purpose	es of supported organizations	3	3	
4	Amounts paid to acquire exempt-use assets	4			
5	Qualified set-aside amounts (prior IRS approval required - pro	5			
6	Other distributions (describe in Part VI). See instructions.	6			
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which the	ne organization is responsive			
	(provide details in Part VI). See instructions.		8		
9	Distributable amount for 2020 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistribution Pre-2020	ıs	(iii) Distributable Amount for 2020
1	Distributable amount for 2020 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2020 (reason-				
	able cause required - explain in Part VI). See instructions.				
3	Excess distributions carryover, if any, to 2020				
<u>a</u>	From 2015				
<u>b</u>	From 2016				
<u> </u>	From 2017				
<u>d</u>	From 2018				
e	From 2019				
f_	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
<u>h</u>	Applied to 2020 distributable amount				
<u>i_</u>	Carryover from 2015 not applied (see instructions)				
<u>j_</u>	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2020 from Section D,				
	line 7: \$				
<u>a</u>	Applied to underdistributions of prior years				
<u>b</u>	Applied to 2020 distributable amount				
<u> </u>	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2020, if				
	any. Subtract lines 3g and 4a from line 2. For result greater				
	than zero, explain in Part VI. See instructions.				
6	Remaining underdistributions for 2020. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				
7	Excess distributions carryover to 2021. Add lines 3j				
	and 4c.				
8	Breakdown of line 7:				
	Excess from 2016				
	Excess from 2017				
	Excess from 2018				
	Excess from 2019				
<u>e</u>	Excess from 2020				

Schedule A (Form 990 or 990-EZ) 2020

Down M. O. J. J. L. C.
Part VI 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.)
SCHEDULE A, PART II, LINE 10, EXPLANATION FOR OTHER INCOME:
OTHER INCOME
2016 AMOUNT: \$ 139.
2017 AMOUNT: \$ 1,000.
2018 AMOUNT: \$ 925.
2019 AMOUNT: \$ 11,907.
2020 AMOUNT: \$ 3,855.
UNREALIZED LOSS ON ASSETS
2016 AMOUNT: \$ -41,838.
2019 AMOUNT: \$ 0.

Schedule B

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

► Attach to Form 990, Form 990-EZ, or Form 990-PF.

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

Name of the organization

Employer identification number

OMB No. 1545-0047

COMMON COUNSEL FOUNDATION

94-3214166

Organization type (check one):						
Filers of:	Section:					
Form 990 or 990-E	Z X 501(c)(3) (enter number) organization					
	4947(a)(1) nonexempt charitable trust not treated as a private foundation					
	527 political organization					
Form 990-PF	501(c)(3) exempt private foundation					
	4947(a)(1) nonexempt charitable trust treated as a private foundation					
	501(c)(3) taxable private foundation					
	nization is covered by the General Rule or a Special Rule . on 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.					
property)	ganization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.					
Special Rules						
sections any one	ganization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; m 990-EZ, line 1. Complete Parts I and II.					
contribut literary, c	ganization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one or, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, reducational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering column (b) instead of the contributor name and address), II, and III.					
year, con is checke purpose.	ganization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the tributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box ed, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively charitable, etc., contributions totaling \$5,000 or more during the year					
but it must answe	nization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), r "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to n't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).					

LHA 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) (2020)

Name of organization

Employer identification number

COMMON COUNSEL FOUNDATION 94-3214166

Parti	Contributors (see instructions). Use duplicate copies of Part I if addition	nai space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$ 25,000,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		- \$\1,134,912.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$ 888,595.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4		- - s <u>1,743,468.</u>	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5		- - \$ 1,451,206.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		- _ \$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization Employer identification number

COMMON COUNSEL FOUNDATION

94-3214166

Part II	Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.				
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received		
		\$			
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received		
		\$			
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received		
		\$			
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received		
		\$			
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received		
		\$			
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received		
		\$			

Page 4 Schedule B (Form 990, 990-EZ, or 990-PF) (2020) Name of organization **Employer identification number** COMMON COUNSEL FOUNDATION 94-3214166 Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) Use duplicate copies of Part III if additional space is needed. (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

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

•	Section 501(c)(4), (5), or (6) organizat	tions: Complete Part III.			
Nan	ne of organization			Emp	loyer identification number
	COMMON	COUNSEL FOUNDATI	ON		94-3214166
Pa	art I-A Complete if the org	janization is exempt und	ler section 501(c) o	or is a section 527 or	ganization.
2 3	Provide a description of the organize Political campaign activity expendite Volunteer hours for political campaigns.	ures ign activities		>	\$
		janization is exempt und		·	
1	Enter the amount of any excise tax	incurred by the organization und	der section 4955		\$
	Enter the amount of any excise tax				
	If the organization incurred a section				
	a Was a correction made? b If "Yes," describe in Part IV.				tes No
	art I-C Complete if the org	janization is exempt und	ler section 501(c).	except section 501(c)(3).
2	Enter the amount directly expended Enter the amount of the filing organ exempt function activities	d by the filing organization for se ization's funds contributed to of	ection 527 exempt functi ther organizations for se	ion activities	\$
3	Total exempt function expenditures		•		•
	line 17b				
	Did the filing organization file Form				
5	Enter the names, addresses and en made payments. For each organiza contributions received that were propolitical action committee (PAC). If	tion listed, enter the amount pai omptly and directly delivered to	d from the filing organiz a separate political orga	ation's funds. Also enter thanization, such as a separa	ne amount of political
	(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

Schedule C (Form 990 or 990-EZ) 2020	COMMON COU	NSEL FOUNDAT	ION	94-3	214166 Page 2
Part II-A Complete if the org	ganization is ex	empt under sectior	n 501(c)(3) and file	ed Form 5768 (ele	ction under
section 501(h)).					
A Check ▶ ☐ if the filing organiza	ation belongs to an	affiliated group (and list ir	Part IV each affiliated	group member's name	e, address, EIN,
expenses, and sha	re of excess lobbyir	g expenditures).			
B Check ▶ if the filing organiza	ation checked box A	and "limited control" pro	visions apply.		_
	its on Lobbying Ex ditures" means an	penditures ounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to infl	uence public opinio	n (grassroots lobbying)		7,000.	
b Total lobbying expenditures to infl	·			0.	
c Total lobbying expenditures (add I	•	, , , , , , , , , , , , , , , , , , , ,		7,000.	
d Other exempt purpose expenditur				12,719,775.	
e Total exempt purpose expenditure				12,726,775.	
f Lobbying nontaxable amount. Ent	er the amount from	the following table in bot	n columns.	786,339.	
If the amount on line 1e, column (a)	or (b) is: The	obbying nontaxable am	ount is:		
Not over \$500,000	20%	of the amount on line 1e.			
Over \$500,000 but not over \$1,00	0,000 \$100	,000 plus 15% of the exc	ess over \$500,000.		
Over \$1,000,000 but not over \$1,5	500,000 \$175	,000 plus 10% of the exc	ess over \$1,000,000.		
Over \$1,500,000 but not over \$17	,000,000 \$225	,000 plus 5% of the exce	ss over \$1,500,000.		
Over \$17,000,000	\$1,0	00,000.			
				105 505	
g Grassroots nontaxable amount (er	•			196,585.	
h Subtract line 1g from line 1a. If zer	•			0.	
i Subtract line 1f from line 1c. If zer				0.	
j If there is an amount other than ze		or line 1i, did the organiza	ation file Form 4720	-	
reporting section 4911 tax for this					Yes No
(Some organizations t	hat made a section	Averaging Period Under n 501(h) election do not parate instructions for li	have to complete all	of the five columns be	elow.
	Lobbying Ex	penditures During 4-Yea	ar Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) Total
2a Lobbying nontaxable amount	389,882	517,313.	968,334.	786,339.	2,661,868.
b Lobbying ceiling amount (150% of line 2a, column(e))					3,992,802.
c Total lobbying expenditures	44,000	37,000.	6,000.	7,000.	94,000.
d Grassroots nontaxable amount	97,471	129,328.	242,084.	196,585.	665,468.
 Grassroots ceiling amount 					

0.

0.

8,000.

Schedule C (Form 990 or 990-EZ) 2020

7,000.

998,202.

15,000.

(150% of line 2d, column (e))

f Grassroots lobbying expenditures

Schedule C (Form 990 or 990-EZ) 2020 COMMON COUNSEL FOUNDATION 94-32141 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)).

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:	Yes			
local legislation, including any attempt to influence public opinion on a legislative matter	163	No	Am	ount
local legislation, including any attempt to influence public opinion on a legislative matter				
or referendum, through the use of				
or referendum, unrough the use of.				
a Volunteers?				
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
c Media advertisements?				
d Mailings to members, legislators, or the public?				
e Publications, or published or broadcast statements?				
f Grants to other organizations for lobbying purposes?				
g Direct contact with legislators, their staffs, government officials, or a legislative body?				
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?i Other activities?				
j Total. Add lines 1c through 1i				
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
b If "Yes," enter the amount of any tax incurred under section 4912				
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?		<u></u>		
art III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	on 501(c)(5), or se	ction	
00 1(0)(0)1			Yes	N
Were substantially all (90% or more) dues received nondeductible by members?		1		
, , , , , , , , , , , , , , , , , , , ,				
Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the art III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(4).	ne prior year on 501(c)(2 ? 3 (5), or se		3, is
Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the art 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 answered "Yes."	ne prior year on 501(c)("No" OR	2 3 5), or se (b) Part		e 3, is
Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the art 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 answered "Yes." Dues, assessments and similar amounts from members	ne prior year on 501(c)("No" OR	2 3 5), or se (b) Part		e 3, is
Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the art 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 answered "Yes." Dues, assessments and similar amounts from members	ne prior year on 501(c)("No" OR	2 3 5), or se (b) Part		e 3, is
Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the art 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 answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).	ne prior year on 501(c)("No" OR	2 7 3 5), or se (b) Part		9 3, is
Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the last 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 answered "Yes." Dues, assessments and similar amounts from members 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	ne prior year on 501(c)("No" OR	2 7 3 5), or se (b) Part		3, is
Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the art 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 answered "Yes." Dues, assessments and similar amounts from members 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 b Carryover from last year	ne prior year on 501(c)("No" OR	2 3 5), or se (b) Part		e 3, is
Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the art 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 answered "Yes." Dues, assessments and similar amounts from members 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 b Carryover from last year c Total	ne prior year on 501(c)("No" OR	2 3 5), or se (b) Part 1 2a 2b 2c		3, is
Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the art 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 answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Carrover from last year	ne prior year on 501(c)("No" OR	2 3 5), or se (b) Part 2a 2b 2c 3		3, is
Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the art 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 answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Carryover from last year Carryover from last year Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	ne prior year on 501(c)("No" OR ical	2 3 5), or se (b) Part 2a 2b 2c 3		9 3, is
Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the art 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 answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid). Current year Carryover from last year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exception is a content of the exception of the exception in the exception is a content of the exception in the exception is a content of the exception in the exception is a content of the exception in the exception is a content of the exception in the exception is a content of the exception in the exception is an exception in the exception in the exception is an exception in the exception in the exception is an exception in the exception in the exception is an exception in the exception in the exception is a content of the exception in the exception in the exception in the exception is an exception in the exception in the exception is an exception in the exception in the exception is an exception in the exception in the exception is an exception in the exception in the exception is an exception in the exception in the exception is an exception in the exception in the exception is a content of the exception in the exception is an exception in the exception in the exception is an exception in the exception in the exception is an exception in the exception in the exception is an exception in the exception in the exception is an exception in the exception in the exception is an exception in the exce	ne prior year on 501(c)("No" OR ical	2 3 5), or se (b) Part 2a 2b 2c 3		9 3, is

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

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

Name of the organization

COMMON COUNSEL FOUNDATION

Employer identification number 94-3214166

Par			er Similar Funds	or Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, line	6. (a) Donor ac	vised funds	(b) Funds and other accounts
1	Total number at end of year	(2) 20101 80	10	(2). 225 and other docounts
2	Aggregate value of contributions to (during year)		6,797,749.	
3	Aggregate value of grants from (during year)		3,155,716.	
4	Aggregate value at end of year		5,190,870.	
5	Did the organization inform all donors and donor advisors in w			ed funds
-	are the organization's property, subject to the organization's ex	-		
6	Did the organization inform all grantees, donors, and donor adv			
	for charitable purposes and not for the benefit of the donor or			
	impermissible private benefit?	•		·
Par	t II Conservation Easements. Complete if the orga	anization answered	"Yes" on Form 990, F	Part IV, line 7.
1	Purpose(s) of conservation easements held by the organization			
	Preservation of land for public use (for example, recreation	on or education)	Preservation of	f a historically important land area
	Protection of natural habitat		Preservation of	f a certified historic structure
	Preservation of open space			
2	Complete lines 2a through 2d if the organization held a qualifie	ed conservation cor	tribution in the form	of a conservation easement on the last
	day of the tax year.			Held at the End of the Tax Year
а	Total number of conservation easements			2a
b	Total acreage restricted by conservation easements			2b
С	Number of conservation easements on a certified historic struc	cture included in (a)		2c
d	Number of conservation easements included in (c) acquired aff	ter 7/25/06, and no	t on a historic structu	ıre
	listed in the National Register			2d
3	Number of conservation easements modified, transferred, release	ased, extinguished	or terminated by the	organization during the tax
	year ▶			
4	Number of states where property subject to conservation ease	•		
5	Does the organization have a written policy regarding the period	•	pection, handling of	
	violations, and enforcement of the conservation easements it h			
6	Staff and volunteer hours devoted to monitoring, inspecting, ha	andling of violation	s, and enforcing cons	servation easements during the year
_	<u> </u>			
7	Amount of expenses incurred in monitoring, inspecting, handling	ng of violations, an	d enforcing conservat	tion easements during the year
•	> \$	1 - 6 - 11		L-)/4/(D)/()
8	Does each conservation easement reported on line 2(d) above			
0	and section 170(h)(4)(B)(ii)?			
9	In Part XIII, describe how the organization reports conservation balance sheet, and include, if applicable, the text of the footno		•	
	organization's accounting for conservation easements.	•	on s imanciai stateme	ents that describes the
Par	t III Organizations Maintaining Collections of	Art. Historical	Treasures, or Ot	her Similar Assets.
	Complete if the organization answered "Yes" on Form 9			
	If the organization elected, as permitted under FASB ASC 958,		revenue statement a	nd balance sheet works
	of art, historical treasures, or other similar assets held for publi	•		
	service, provide in Part XIII the text of the footnote to its finance	•	*	•
b	If the organization elected, as permitted under FASB ASC 958,			
	art, historical treasures, or other similar assets held for public e	•		
	provide the following amounts relating to these items:	,	·,	,
	(i) Revenue included on Form 990, Part VIII, line 1			> \$
				L A
2	If the organization received or held works of art, historical treas			
	the following amounts required to be reported under FASB AS			
а	Revenue included on Form 990, Part VIII, line 1	-		> \$
	Assets included in Form 990, Part X			

Par	t III Organizations Maintaining C	ollections of Ar	t, Histo	orical Tre	easures, o	r Othei	r Simil	ar Assets	s (contin	ued)	
3	Using the organization's acquisition, accession								•	,	
	collection items (check all that apply):										
а	Public exhibition	d	ı 🗌	Loan or exc	change progra	am					
b	Scholarly research	е		Other							
С	Preservation for future generations										
4	Provide a description of the organization's co	ollections and explain	n how th	ey further th	ne organizatio	n's exen	npt purp	ose in Part	XIII.		
5	During the year, did the organization solicit o	r receive donations of	of art, his	storical trea	sures, or othe	er similar	assets				
	to be sold to raise funds rather than to be ma	aintained as part of t	he orgar	nization's co	llection?				Yes		No
Par	t IV Escrow and Custodial Arrang	gements. Comple	ete if the	organizatio	n answered '	"Yes" on	Form 9	90, Part IV,	line 9, or		
	reported an amount on Form 990, Par	t X, line 21.									
1a	Is the organization an agent, trustee, custodia	an or other intermed	iary for o	contribution	s or other ass	sets not i	included	I			
	on Form 990, Part X?								Yes		No
b	If "Yes," explain the arrangement in Part XIII a										
									Amount		
С	Beginning balance						. 1c				
	Additions during the year										
е	Distributions during the year										
f	Ending balance						- 1				
2a	Did the organization include an amount on Fo								Yes		No
b	If "Yes," explain the arrangement in Part XIII.	Check here if the ex	planatio	n has been	provided on l	Part XIII]
Par	t V Endowment Funds. Complete i	f the organization an	swered	"Yes" on Fo	orm 990, Part	IV, line 1	10.				
		(a) Current year	(b) F	rior year	(c) Two year	rs back	(d) Thre	e years back	(e) Four	years l	back
1a	Beginning of year balance										
b	Contributions										
С	Net investment earnings, gains, and losses										
d	Grants or scholarships										
е	Other expenditures for facilities										
	and programs										
f	Administrative expenses										
g	End of year balance										
2	Provide the estimated percentage of the curr	ent year end balance	e (line 1d	a, column (a)) held as:	•			•		
а	Board designated or quasi-endowment	•	%	,	,,						
b	Permanent endowment										
	. · · · · · · · · · · · · · · · · · · ·	<u></u> - %									
	The percentages on lines 2a, 2b, and 2c show	uld equal 100%.									
За	Are there endowment funds not in the posses	·	ation tha	t are held a	nd administer	ed for th	e organ	ization			
	by:	J					Ü			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 requir	ed on S	chedule R?							
4	Describe in Part XIII the intended uses of the									•	
Par	t VI Land, Buildings, and Equipm	ent.									
	Complete if the organization answered	d "Yes" on Form 990), Part IV	, line 11a. S	See Form 990	, Part X,	line 10.				
	Description of property	(a) Cost or o			t or other		ccumula	ated	(d) Book	c value	
		basis (investr		` ,	(other)		preciation		(,		
1a	Land										
b	Buildings										
c	Leasehold improvements										
d	Equipment			2	5,432.		23,	973.	1	L,45	59.
	Other				1,356.			121.			35.
	. Add lines 1a through 1e. (Column (d) must e		X colum	n (R) line 1	· ·		,	•	1	1,69	

Schedule D (Form 990) 2020

	ISEL FOUNDATION	94	-3214166 Page
Part VII Investments - Other Securities.			
Complete if the organization answered "Yes" (a) Description of security or category (including name of security)	on Form 990, Part IV, line 1 (b) Book value	1b. See Form 990, Part X, line 12. (c) Method of valuation: Cost or end	of year market value
	(b) book value	(c) Method of Valuation. Cost of end	or-year market value
(1) Financial derivatives			
(2) Closely held equity interests (3) Other			
(A) VARIOUS FIXED INCOME	5,382,273.	END-OF-YEAR MARKET	VALUE
(B)	3/302/2/31		<u> </u>
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)	5,382,273.		
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes"	on Form 990, Part IV, line 1	1c. See Form 990, Part X, line 13.	
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end	of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets.			
Complete if the organization answered "Yes"		1d. See Form 990, Part X, line 15.	(le) De els velve
	Description		(b) Book value
(1)			
(2)			
(3)			
(5)			
<u>(6)</u> (7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990. Part X. col. (B) lin	15)	•	
Part X Other Liabilities.	<u>e 13.,1 </u>		
Complete if the organization answered "Yes"	on Form 990, Part IV, line 1	1e or 11f. See Form 990, Part X, line 25.	
1. (a) Description of liability			(b) Book value
(1) Federal income taxes			
(2) PPP LOAN			148,100.
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			

Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) 2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII

148,100.

(9)

Par	t XI	Reconciliation of Revenue per Audited Financial	Statements With F	Revenue per Ret	urn.	
		Complete if the organization answered "Yes" on Form 990, Part	IV, line 12a.			
1	Total	revenue, gains, and other support per audited financial statements	s		1	41,314,103.
2	Amou	unts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net u	nrealized gains (losses) on investments	2a	11,494.		
b	Dona	ted services and use of facilities	2b			
С		veries of prior year grants				
d		r (Describe in Part XIII.)				
е		ines 2a through 2d			2e	11,494. 41,302,609.
3	Subtr	ract line 2e from line 1			3	41,302,609.
4		unts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Invest	tment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other	r (Describe in Part XIII.)	4b			
С		ines 4a and 4b			4c	0.
5	Total	revenue. Add lines 3 and 4c. (This must equal Form 990. Part I. lin	ne 12.)		5	41,302,609.
Pai	rt XII	Reconciliation of Expenses per Audited Financia	I Statements With	Expenses per R	eturi	n.
		Complete if the organization answered "Yes" on Form 990, Part	IV, line 12a.			
1	Total	expenses and losses per audited financial statements			1	13,228,031.
2	Amou	unts included on line 1 but not on Form 990, Part IX, line 25:				
а	Dona	ted services and use of facilities	2a			
b		year adjustments				
С		rlosses				
d	Other	r (Describe in Part XIII.)	2d			
е	Add li	ines 2a through 2d			2e	0.
3		ract line 2e from line 1			3	13,228,031.
4		unts included on Form 990, Part IX, line 25, but not on line 1:				
а	Invest	tment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other	r (Describe in Part XIII.)	4b			
С	Add li	ines 4a and 4b			4c	0.
5	Total	expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, I	line 18.)		5	13,228,031.
Pai	rt XIII	Supplemental Information.				
		descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1ad 4b; and Part XII, lines 2d and 4b. Also complete this part to provi			rait /	A, IIIIe Z, Fait AI,

SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

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

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

► Attach to Form 990.

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

2020

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

COMMON CO	UNSEL FOU	NDATION					94-3214166
Part I General Information on Grants a	nd Assistance						
1 Does the organization maintain records		-			~		
criteria used to award the grants or assis							X Yes No
2 Describe in Part IV the organization's pro							
Part II Grants and Other Assistance to	=				anization answered "\	es" on Form 990, Part	IV, line 21, for any
recipient that received more than S		•			(f) Method of	1 (15 : :: (T 435
Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
ACCE INSTITUTE							PROJECT SUPPORT TO
3655 S GRAND AVE STE 250							FURTHER ORGANIZATIONAL
LOS ANGELES, CA 90007	27-1487442	501(C)3	12,000.	0.			MISSION IN BAY AREA
ACCE INSTITUTE							
3655 S GRAND AVE STE 250							
LOS ANGELES, CA 90007	27-1487442	501(C)3	45,000.	0.			CAPACITY BUILDING
ACCE INSTITUTE							PROJECT SUPPORT TO
3655 S GRAND AVE STE 250							FURTHER ORGANIZATIONAL
LOS ANGELES, CA 90007	27-1487442	501(C)3	60,000.	0.			MISSION
ACCE INSTITUTE							
3655 S GRAND AVE STE 250							
LOS ANGELES, CA 90007	27-1487442	501(C)3	100,000.	0.			GENERAL OPERATING SUPPORT
ACCE INSTITUTE							
3655 S GRAND AVE STE 250							
LOS ANGELES, CA 90007	27-1487442	501(C)3	65,000.	0.			CAPACITY BUILDING
ACCE INSTITUTE							
3655 S GRAND AVE STE 250							
LOS ANGELES, CA 90007	27-1487442	501(C)3	50,000.	0.			CAPACITY BUILDING
2 Enter total number of section 501(c)(3) a	nd government or	ganizations listed in th	e line 1 table				▶248.
3 Enter total number of other organization	s listed in the line	1 table					. 0.

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)								
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	
ACCE INSTITUTE 3655 S GRAND AVE STE 250 LOS ANGELES, CA 90007	27-1487442	501(C)3	50,000.	0.			PROJECT SUPPORT TO FURTHER ORGANIZATIONAL MISSION IN BAY AREA	
ACLU FOUNDATION OF SOUTHERN CALIFORNIA - 1313 W EIGHTH STREET - LOS ANGELES, CA 90017	95-2673361	501(C)3	10,000.	0.			PROJECT SUPPORT TO FURTHER ORGANIZATIONAL MISSION IN INLAND EMPIRE	
ADVANCEMENT PROJECT 1220 L STREET NW, SUITE 850 WASHINGTON, DC 20005	95-4835230	501(C)3	20,000.	0.			PROJECT SUPPORT FOR	
ADVOCATES FOR INDIGENOUS CALIFORNIA LANGUAGE SURVI - P.O. BOX 26357 - FRESNO, CA 93729	72-1584619	501(C)3	15,000.	0.			GENERAL OPERATING SUPPORT	
ADVOCATES FOR INDIGENOUS CALIFORNIA LANGUAGE SURVI - P.O. BOX 26357 - FRESNO, CA 93729	72-1584619	501(C)3	6,000.	0.			GENERAL OPERATING SUPPORT	
ADVOCATES FOR INDIGENOUS CALIFORNIA LANGUAGE SURVI - P.O. BOX 26357 - FRESNO, CA 93729	72-1584619	501(C)3	10,000.	0.			PROJECT SUPPORT TO FURTHER ORGANIZATIONAL MISSION	
AFRORESISTANCE 409 MORRIS PARK AVE BRONX, NY 10460	20-0440935	501(C)3	8,000.	0.			GENERAL OPERATING SUPPORT	
AHA KANE FOUNDATION FOR THE ADVANCEMENT - 677 ALA MOANA BLVD STE 1015 - HONOLULU , HI 96813	27-0502942	501(C)3	15,000.	0.			PROJECT SUPPORT FOR CULTURAL EDUCATION	
AKWKU OHSK'HE YUKWAYTE 6012 MAYBEE ROAD NEDROW , NY 13120	83-4498385	501(C)3	18,000.	0.			GENERAL OPERATING SUPPORT	

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)								
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	
ALASKA COMMUNITY ACTION ON TOXICS 1225 E INTL AIRPORT RD ANCHORAGE, AK 99518-1410	92-0177082	501(C)3	10,000.	0.			GENERAL OPERATING SUPPORT	
ALASKA COMMUNITY ACTION ON TOXICS 1225 E INTL AIRPORT RD ANCHORAGE, AK 99518-1410	92-0177082	501(C)3	1,000.	0.			CAPACITY BUILDING	
ALASKA COMMUNITY ACTION ON TOXICS 1225 E INTL AIRPORT RD ANCHORAGE, AK 99518-1410	92-0177082	501(C)3	15,000.	0.			GENERAL OPERATING SUPPORT	
ALLIANCE FOR A JUST SOCIETY 3518 S EDMUNDS ST SEATTLE, WA 98118	91-1635554	501(C)3	10,000.	0.			PROJECT SUPPORT FOR WE ARE DOWN HOME	
ALLIANCE FOR A JUST SOCIETY 3518 S EDMUNDS ST SEATTLE, WA 98118	91-1635554	501(C)3	10,000.	0.			PROJECT SUPPORT FOR NEVADA NATIVE VOTE PROJECT	
ALLIANCE FOR A JUST SOCIETY 3518 S EDMUNDS ST SEATTLE, WA 98118	91-1635554	501(C)3	25,000.	0.			PROJECT SUPPORT FOR NATIVE ORGANIZERS ALLIANCE	
ALLIANCE FOR A JUST SOCIETY 3518 S EDMUNDS ST SEATTLE, WA 98118	91-1635554	501(C)3	10,000.	0.			PROJECT SUPPORT FOR NATIVE ORGANIZERS ALLIANCE	
ALLIANCE OF CALIFORNIANS FOR COMMUNITY EMPOWERMENT INSTITUTE - 3655 S GRAND AVE STE 250 - LOS ANGELES , CA 90007	27-1487442	501(C)3	50,000.	0.			PROJECT SUPPORT TO FURTHER ORGANIZATIONAL MISSION IN LA	
ALTERNATE ROOTS INC. 1270 CAROLINE ST BOX D120353 ATLANTA, GA 30307	58-1318198	501(C)3	10,000.	0.			PROJECT SUPPORT FOR SPIRITHOUSE	

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ALTERNATE ROOTS INC. 1270 CAROLINE ST BOX D120353 ATLANTA, GA 30307	58-1318198	501(C)3	10,000.	0.			PROJECT SUPPORT FOR SOUTHERN POWER FUND
AMERICAN INDIAN CENTER OF CHICAGO 3401 W AINSLIE ST CHICAGO, IL 60625	36-2382840	501(C)3	12,500.	0.			GENERAL OPERATING SUPPORT
AMERICAN INDIAN CENTER OF CHICAGO 3401 W AINSLIE ST CHICAGO, IL 60625	36-2382840	501(C)3	15,000.	0.			GENERAL OPERATING SUPPORT
AMERICAN INDIANS IN TX AT SPANISH COLONIAL MISSION - 1313 GUADALUPE ST. SUITE 204 - SAN ANTONIO,, TX 78207	74-2717029	501(C)3	12,500.	0.			GENERAL OPERATING SUPPORT
AMERICAN INDIANS IN TX AT SPANISH COLONIAL MISSION - 1313 GUADALUPE ST. SUITE 204 - SAN ANTONIO,, TX 78207	74-2717029	501(C)3	15,000.	0.			GENERAL OPERATING SUPPORT
ARISE, INC. 38 SCHOOL ST PO BOX 5423 SPRINGFIELD, MA 01101	04-2914511	501(C)3	25,000.	0.			PROJECT SUPPORT FOR COMPOST COOPERATIVE
ARTORG STUDIOS, INC. 214 4TH ST N CANNON FALLS, MN 55009	81-2567456	501(C)3	50,000.	0.			GENERAL OPERATING SUPPORT
ASSOCIACION DE MEXICANOS EN CAROLINA - PO BOX 2744 - GREENVILLE,, NC 27836-0744	94-3421627	501(C)3	10,000.	0.			GENERAL OPERATING SUPPORT
B.H. BRILLIANT MINDS PROJECT PO BOX 23552 OAKLAND, CA 94623	80-0016516	501(C)3	12,000.	0.			PROJECT SUPPORT FOR JUNETEENTH CELEBRATION

Part II Continuation of Grants and Other	Assistance to Do	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	ruge
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BELOVED COMMUNITY CENTER OF GREENSBORO INC 417 ARLINGTON ST - GREENSBORO, NC 27406	56-1877250	501(C)3	7,000.	0.			GENERAL OPERATING SUPPORT
BIG VALLEY BAND OF POMO INDIANS 2726 MISSION ROAD LAKEPORT, CA 95453		7871	17,000.	0.			ROUND HOUSE RESTORATION
BLACK FAMILY LAND TRUST INC PO BOX 2087 DURHAM, NC 27702-2087	04-3797149	501(C)3	10,000.	0.			GENERAL OPERATING SUPPORT
BLACK FARMER FUND INC 2161 PROSPECT AVE BRONX, NY 10457-2759	84-2310349	501(C)3	25,000.	0.			GENERAL OPERATING SUPPORT
BLACK FARMER FUND INC 2161 PROSPECT AVE BRONX, NY 10457-2759	84-2310349	501(C)3	25,000.	0.			GENERAL OPERATING SUPPORT
BLACK HILLS AREA COMMUNITY FOUNDATION - 803 ST. JOSEPH ST - RAPID CITY, SD 57701	36-3608635	501(C)3	18,000.	0.			PROJECT SUPPORT FOR INDIAN SCHOOL CHILDREN'S MEMORIAL
BLUEPRINT NORTH CAROLINA 3125 POPLARWOOD COURT SUITE 300 RALEIGH, NC 27604	27-2459538	501(C)3	31,000.	0.			GENERAL OPERATING SUPPORT
BOREALIS PHILANTHROPY PO BOX 3285 MINNEAPOLIS, MN 55403	46-4598642	501(C)3	10,000.	0.			PROJECT SUPPORT FOR BLACK LED MOVEMENT FUND
BOREALIS PHILANTHROPY PO BOX 3285 MINNEAPOLIS, MN 55403	46-4598642	501(C)3	40,000.	0.			PROJECT SUPPORT FOR BLACK LED MOVEMENT FUND

Part II Continuation of Grants and Other	Assistance to Doi	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BOREALIS PHILANTHROPY PO BOX 3285 MINNEAPOLIS, MN 55403	46-4598642	501(C)3	30,000.	0.			PROJECT SUPPORT FOR BLACK LED MOVEMENT FUND
BOREALIS PHILANTHROPY PO BOX 3285 MINNEAPOLIS, MN 55403	46-4598642	501(C)3	40,000.	0.			PROJECT SUPPORT FOR BLACK LED MOVEMENT FUND
BUCKEYE ENVIRONMENTAL NETWORK PO BOX 824 ATHENS, OH 45701	31-1408723	501(C)3	10,000.	0.			PROJECT SUPPORT FOR BLACK BELT CITIZENS FIGHTING FOR HEALTH AND JUSTICE
BURBANK TENANTS RIGHTS COMMITTEE 410 W. ALAMEDA AVE BURBANK, CA 91506	83-3327023	501(C)3	7,000.	0.		1	PROJECT SUPPORT FOR FAIR HOUSING WORK
BVM CAPACITY BUILDING INSTITUTE 3390 STONEWALL TELL RD ATLANTA, GA 30349	82-3835203	501(C)3	10,000.	0.			GENERAL OPERATING SUPPORT
BYP100 EDUCATION FUND 239 E 51ST ST CHICAGO, IL 60615	81-0975889	501(C)3	7,000.	0.			PROJECT SUPPORT FOR DURHAM OUTREACH
CALIFORNIA INDIAN ENVIRONMENTAL ALLIANCE - PO BOX 2128 - BERKELEY, CA 94702	27-0861293	501(C)3	20,000.	0.			GENERAL OPERATING SUPPORT
CALIFORNIA INDIAN MUSEUM AND CULTURAL CENTER - 5250 AERO DR - SANTA ROSA, CA 95403	94-3244506	501(C)3	10,000.	0.			GENERAL OPERATING SUPPORT
CALIFORNIA INDIAN MUSEUM AND CULTURAL CENTER - 5250 AERO DR - SANTA ROSA, CA 95403	94-3244506	501(C)3	15,000.	0.			GENERAL OPERATING SUPPORT

Part II Continuation of Grants and Other	Assistance to Do	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	
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CALIFORNIA RURAL LEGAL ASSISTANCE,							
INC 1430 FRANKLIN STREET, SUITE							
103 - OAKLAND, CA 94612	95-2428657	501(C)3	45,000.	0.			CAPACITY BUILDING
200 01112122, 011 91012	70 2120007	552(5)5	10,000.	•			PROJECT SUPPORT FOR
CALIFORNIA RURAL LEGAL ASSISTANCE,							COMMUNITY EQUITY
INC 1430 FRANKLIN STREET, SUITE							INITIATIVE IN STANISLAUS
103 - OAKLAND, CA 94612	95-2428657	501(C)3	40,000.	0.			co.
CANNON ARTS BOARD							
PO BOX 222							PROJECT SUPPORTS FOR ARTS
CANNON FALLS, MN 55009	46-4577359	501(C)3	50,000.	0.			MISSION
CARRIZO COMECRUDO TRIBE OF TEXAS							
1250 ROEMER LN							
FLORESVILLE, TX 78114	75-2830923	501(C)3	25,000.	0.			GENERAL OPERATING SUPPORT
CARRIED CONFIGRING TRANS							
CARRIZO COMECRUDO TRIBE OF TEXAS							
1250 ROEMER LN	75-2830923	501/0\3	1,000.	0.			CAPACITY BUILDING
FLORESVILLE, TX 78114	73-2030923	501(0/5	1,000.	0.			CAPACITI BUILDING
CATHOLIC CHARITIES OF THE DIOCESE							
OF STOCKTON - 1106 N EL DORADO ST							
- STOCKTON, CA 95202	94-1629114	501(C)3	25,000.	0.			CAPACITY BUILDING
,							
CATHOLIC CHARITIES OF THE DIOCESE							
OF STOCKTON - 1106 N EL DORADO ST							PROJECT SUPPORT FOR
- STOCKTON, CA 95202	94-1629114	501(C)3	50,000.	0.			ENVIRONMENTAL PROGRAM
CAUSA JUSTA: JUST CAUSE							
P.O. BOX 7737							
OAKLAND, CA 94601	55-0883038	501(C)3	30,000.	0.			CAPACITY BUILDING
CAUSA JUSTA: JUST CAUSE							
P.O. BOX 7737		504 (5) 2		_			
OAKLAND, CA 94601	55-0883038	501(C)3	10,000.	0.			GENERAL OPERATING SUPPORT

Part II Continuation of Grants and Other	Assistance to Do	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CAUSA JUSTA: JUST CAUSE							
P.O. BOX 7737							
OAKLAND, CA 94601	55-0883038	501(C)3	50,000.	0.			GENERAL OPERATING SUPPORT
omenu, on site	33 0003030	301(0/3	30,000.	· ·			
CENTER FOR COMMUNITY CHANGE							
1536 U STREET NW							
WASHINGTON, DC 20009	52-0888113	501(C)3	25,000.	0.			GENERAL OPERATING SUPPORT
•			,	-			
CENTER FOR MEDIA AND DEMOCRACY							
520 UNIVERSITY AVENUE SUITE 305							
MADISON, WI 53703	39-1777402	501(C)3	10,000.	0.			GENERAL OPERATING SUPPORT
CENTER FOR POPULAR DEMOCRACY							PROJECT SUPPORT TO
449 TROUTMAN STREET SUITE A							FURTHER ORGANIZATIONAL
BROOKLYN, NY 11237	45-3813436	501(C)3	30,000.	0.			MISSION
CENTER FOR POPULAR RESEARCH,							
EDUCATION AND POLICY - PO BOX 1823							
3 ETHETE ROAD - FORT WASHAKIE, WY							
82514	41-2099500	501(C)3	25,000.	0.			GENERAL OPERATING SUPPORT
CENTER FOR THIRD WORLD ORGANIZING							
1714 FRANKLIN STREET SUITE 100-245							PROJECT SUPPORT FOR BLACK
OAKLAND, CA 94612	52-1211059	501(C)3	10,000.	0.			LAND AND POWER
CENTRO POR LA JUSTICIA							
1414 E COMMERCE							PROJECT SUPPORT FOR
	74-2720710	501/C\3	10,000.	0.			CLIMATE COLECTIVA
SAN ANTONIO, TX 78205	74-2720710	501(0/3	10,000.	0.			CHIMATE COLECTIVA
CHANGING WOMEN INITIATIVE							
460 SAINT MICHAELS DR STE 804							
SANTA FE, NM 87505	81-1078799	501(C)3	10,000.	0.			GENERAL OPERATING SUPPORT
22, 111 07000	31 10,0,0,0		10,000.	· ·			
CHANGING WOMEN INITIATIVE							
460 SAINT MICHAELS DR STE 804							
SANTA FE, NM 87505	81-1078799	501(C)3	15,000.	0.			GENERAL OPERATING SUPPORT
·			, , ,				

Part II Continuation of Grants and Other	Assistance to Do	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CHANGING WOMEN INITIATIVE 460 SAINT MICHAELS DR STE 804 SANTA FE, NM 87505	81-1078799	501(C)3	30,000.	0.			GENERAL OPERATING SUPPORT
CHARLES SHERROD COMMUNITY DEVELOPMENT CORPORATION - 1216 DAWSON RD STE 108 - ALBANY, GA	47, 2005524	E01/G)2	25, 000				
31707	47-3985534	501(C)3	25,000.	0.			GENERAL OPERATING SUPPORT
CHEYENNE RIVER YOUTH PROJECT PO BOX 410 EAGLE BUTTE, SD 57625	46-0423106	501(C)3	25,000.	0.			GENERAL OPERATING SUPPORT
CHINESE FOR AFFIRMATIVE ACTION 17 WALTER U. LUM PLACE SAN FRANCISCO, CA 94108	94-2161304	501(C)3	30,000.	0.			PROJECT SUPPORT TO FURTHER ORGANIZATIONAL MISSION
CHINESE FOR AFFIRMATIVE ACTION 17 WALTER U. LUM PLACE SAN FRANCISCO, CA 94108	94-2161304	501(C)3	15,000.	0.			PROJECT SUPPORT TO FURTHER ORGANIZATIONAL MISSION
CLEAN WATER LEGACY PO BOX 591 RAPID CITY, SD 57709	47-0982430	501(C)3	20,000.	0.			PROJECT SUPPORT FOR BLACK HILLS CLEAN WATER ALLIANCE
COLABORATIVA LA MILPA 528 EMMA RD ASHEVILLE, NC 28806	20-8303608	501(C)3	10,000.	0.			PROJECT SUPPORT TO FURTHER ORGANIZATIONAL MISSION
COLOR OF CHANGE EDUCATION FUND INC 1714 FRANKLIN ST #100-136 - OAKLAND, CA 94612	45-5569879	501(C)3	10,000.	0.			GENERAL OPERATING SUPPORT
COLORADO PEOPLE'S ALLIANCE (COPA) 700 KALAMATH ST. DENVER, CO 80204	84-1599036	501(C)3	10,000.	0.			GENERAL OPERATING SUPPORT

Part II Continuation of Grants and Other	r Assistance to Doi	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	<u> </u>
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
COMMON FUTURE							
2323 BROADWAY							PROJECT SUPPORT FOR
OAKLAND, CA 94612	20-1544255	501(C)3	25,000.	0.			POTLIKKER CAPITAL
			, -	-			
COMMUNITY OUTREACH AND PATIENT							
EMPOWERMENT (COPE) - 208 W COAL							
AVE - GALLUP, NM 87301	46-5551998	501(C)3	10,000.	0.			GENERAL OPERATING SUPPORT
COMMUNITY PARTNERS							
1000 N. ALAMEDA ST. SUITE 240							PROJECT SUPPORT FOR CA
LOS ANGELES, CA 90012	95-4302067	501(C)3	15,000.	0.			NATIVE VOTE PROJECT
COMMUNITY PARTNERS							
1000 N. ALAMEDA ST. SUITE 240				_			PROJECT SUPPORT FOR CA
LOS ANGELES, CA 90012	95-4302067	501(C)3	6,000.	0.			NATIVE VOTE PROJECT
COMUNIDAD MAYA PIXAN IXIM							
4913 S. 25TH STREET, SUITE 1	45-5539560	E01/G) 2	20.000	0.			GENERAL ODERAMING GURDORM
OMAHA, NE 68107 CONGREGATIONS ORGANIZED FOR	45-5539560	501(0)3	20,000.	0.			GENERAL OPERATING SUPPORT
PROPHETIC ENGAGEMENT - 1505 W							
HIGHLAND AVE STE 1 - SAN							
BERNARDINO, CA 92411	33-0938212	501 (C) 3	30,000.	0.			CAPACITY BUILDING
CONGREGATIONS ORGANIZED FOR	33 0330212	501(0/5	30,000.	· ·			emmerri Borrbine
PROPHETIC ENGAGEMENT - 1505 W							
HIGHLAND AVE STE 1 - SAN							
BERNARDINO, CA 92411	33-0938212	501(C)3	40,000.	0.			GENERAL OPERATING SUPPORT
			127,222				
DAKOTA RESOURCE COUNCIL							
1720 BURNT BOAT DR STE 104							PROJECT SUPPORT FOR FORT
BISMARCK, ND 58503	45-0363903	501(C)3	10,000.	0.			BERTHOLD POWER
DAKOTA RESOURCE COUNCIL							PROJECT SUPPORT TO
1720 BURNT BOAT DR STE 104							FURTHER ORGANIZATIONAL
BISMARCK, ND 58503	45-0363903	501(C)3	28,000.	0.			MISSION

Part II Continuation of Grants and Other	Assistance to Dor	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	
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DIFFERENT STROKES PERFORMING ARTS							
ASHEVILLE, NC 28802	45-2799213	501(C)3	10,000.	0.			GENERAL OPERATING SUPPORT
DINE C.A.R.E. 10A TOWN PLZ							PROJECT SUPPORT TO FURTHER ORGANIZATIONAL
DURANGO, CO 81301	86-0670809	501(C)3	20,000.	0.			MISSION
DOLORES HUERTA FOUNDATION PO BOX 2087							
BAKERSFIELD, CA 93303	91-2145992	501(C)3	10,000.	0.			GENERAL OPERATING SUPPORT
DREAM OF WILD HEALTH 1308 E FRANKLIN AVENUE SUITE 203							
MINNEAPOLIS, MN 55404	41-1632662	501(C)3	10,000.	0.			GENERAL OPERATING SUPPORT
DREAM OF WILD HEALTH 1308 E FRANKLIN AVENUE SUITE 203							
MINNEAPOLIS, MN 55404	41-1632662	501(C)3	15,000.	0.			GENERAL OPERATING SUPPORT
EARTHRIGHTS INTERNATIONAL 1612 K STREET NW SUITE 800	04 226555	E01/G)2	10.000	0			GENERAL OPERATING GUNDON
WASHINGTON, DC 20006	04-3265555	501(C)3	10,000.	0.			GENERAL OPERATING SUPPORT
EARTHWORKS 1612 K ST. NW SUITE 904							PROJECT SUPPORT FOR OIL AND GASS ACCOUNTABILITY
WASHINGTON, DC 20006 EAST BAY ALLIANCE FOR A	52-1557765	501(C)3	12,000.	0.			PROJECT
SUSTAINABLE ECONOMY - 360 14TH							
STREET, 4TH FLOOR - OAKLAND, CA	04 2214100	E01 (a) 2	40.000	0			
94612	94-3314108	DUI(C)3	40,000.	0.			GENERAL OPERATING SUPPORT
EAST BAY COMMUNITY FOUNDATION							
200 FRANK H. OGAWA PLAZA OAKLAND, CA 94612	94-6070996	501(C)3	5,000.	0.			GENERAL OPERATING SUPPORT

Part II Continuation of Grants and Other	Assistance to Dor	nestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	
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EAST BAY COMMUNITY FOUNDATION							
200 FRANK H. OGAWA PLAZA							
OAKLAND, CA 94612	94-6070996	501(C)3	5,000.	0.			COVID19 RESPONSE FUND
EAST PALO ALTO CAN DO							
2369 UNIVERSITY AVE							
E PALO ALTO, CA 94303	94-3145270	501(C)3	35,000.	0.			GENERAL OPERATING SUPPORT
EASTERN SHOSHONE TRIBAL HEALTH							PROJECT SUPPORRT FOR
PO BOX 250							SPECIAL DIABETES PROGRAM
FORT WASHAKIE, WY 82514		7871	15,000.	0.			FOR INDIANS
EASTSIDE ARTS ALLIANCE							
PO BOX 17008							
OAKLAND, CA 94601	74-3073621	501(C)3	40,000.	0.			GENERAL OPERATING SUPPORT
EKVNV YEFOLECVLKE							
PO BOX 148	81-2293314	E01/G\2	10.000	0.			CENEDAL ODERAMING GUDDODM
WEOGUFKA, AL 35183	81-2293314	501(0)3	10,000.	0.			GENERAL OPERATING SUPPORT
EKVNV YEFOLECVLKE							
PO BOX 148							
WEOGUFKA, AL 35183	81-2293314	501(C)3	2,500.	0.			GENERAL OPERATING SUPPORT
EKVNV YEFOLECVLKE							
PO BOX 148							
WEOGUFKA, AL 35183	81-2293314	501(C)3	15,000.	0.			GENERAL OPERATING SUPPORT
ELLA BAKER CENTER FOR HUMAN RIGHTS							
1419 34TH AVENUE, SUITE 202 OAKLAND, CA 94601	94-3252009	501(C)3	7,500.	0.			GENERAL OPERATING SUPPORT
OMBIND, CA 74001	74 3232003	501(0/3	7,300.	0.			DENDINAL OF ENATING SUFFORT
EVERY VOICE CENTER							
1211 CONNECTICUT AVE. NW SUITE 600				_			
WASHINGTON, DC 20036	52-2003442	P01(C)3	7,500.	0.			GENERAL OPERATING SUPPORT

Part II Continuation of Grants and Other	Assistance to Dor	mestic Organizations	and Domestic Go	vernments (Sche	edule I (Form 990), Pa	rt II.)	<u> </u>
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FAITH IN ACTION BAY AREA 1336B ARROYO AVENUE SAN CARLOS, CA 94070	94-2716470	501(C)3	12,000.	0.			GENERAL OPERATING SUPPORT
FAITH IN ACTION BAY AREA 1336B ARROYO AVENUE SAN CARLOS, CA 94070	94-2716470	501(C)3	70,000.	0.			GENERAL OPERATING SUPPORT
FAITH IN ACTION NETWORK 1616 P STREET NW, SUITE 300 WASHINGTON, DC 20036	94-2206497	501(C)3	75,000.	0.			PROJECT SUPPORT FOR PICO
FAITH IN ACTION NETWORK 1616 P STREET NW, SUITE 300 WASHINGTON, DC 20036	94-2206497	501(C)3	45,000.	0.			CAPACITY BUILDING FOR
FAITH IN THE VALLEY 2027 E. HARDING WAY STOCKTON, CA 95205	77-0635938	501(C)3	60,000.	0.			CAPACITY BUILDING
FAITH IN THE VALLEY 2027 E. HARDING WAY STOCKTON, CA 95205	77-0635938	501(C)3	100,000.	0.			GENERAL OPERATING SUPPORT
FARM LABOR RESEARCH PROJECT INC 1221 BROADWAY ST TOLEDO, OH 43609	34-1329126	501(C)3	10,000.	0.			PROJECT SUPPORT TO FURTHER ORGANIZATIONAL MISSION
FILIPINO ADVOCATES FOR JUSTICE 310 8TH ST SUITE 309 OAKLAND, CA 94607	94-2218907	501(C)3	45,000.	0.			CAPACITY BUILDING
FILIPINO ADVOCATES FOR JUSTICE 310 8TH ST SUITE 309 OAKLAND, CA 94607	94-2218907	501(C)3	50,000.	0.			GENERAL OPERATING SUPPORT

Part II Continuation of Grants and Other	Assistance to Doi	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FIRST NATIONS DEVELOPMENT INSTITUTE - 2432 MAIN ST 2ND FLOOR - LONGMONT, CO 80501	54-1254491	501(C)3	15,000.	0.			GENERAL OPERATING SUPPORT
FIRST NATIONS DEVELOPMENT INSTITUTE - 2432 MAIN ST 2ND FLOOR - LONGMONT, CO 80501	54-1254491	501(C)3	50,900.	0.			PROJECT SUPPORT FOR NATIVE FIBER PROGRAM
FIRST NATIONS DEVELOPMENT INSTITUTE - 2432 MAIN ST 2ND FLOOR - LONGMONT, CO 80501	54-1254491	501(C)3	5,000.	0.			GENERAL OPERATING SUPPORT
FRACTURED ATLAS 228 PARK AVENUE SOUTH #56651 NEW YORK, NY 10003-1502	11-3451703	501(C)3	21,000.	0.			GENERAL OPERATING SUPPORT
FRIENDSHIP HOUSE ASSOCIATION OF AMERICAN INDIANS - 56 JULIAN AVENUE - SAN FRANCISCO, CA 94103	23-7097915	501(C)3	2,000.	0.			GENERAL OPERATING SUPPORT
FRIENDSHIP HOUSE ASSOCIATION OF AMERICAN INDIANS - 56 JULIAN AVENUE - SAN FRANCISCO, CA 94103	23-7097915	501(C)3	15,000.	0.			GENERAL OPERATING SUPPORT
FRIENDSHIP HOUSE ASSOCIATION OF AMERICAN INDIANS - 56 JULIAN AVENUE - SAN FRANCISCO, CA 94103	23-7097915	501(C)3	6,000.	0.			GENERAL OPERATING SUPPORT
FUERZA Y UNION MULTIPLE 715 HARRIETT ST HENDERSON, NC 27536	36-4939343	501(C)3	10,000.	0.			GENERAL OPERATING SUPPORT
GIVE A BEAT FOUNDATION 387 S COAST HWY LAGUNA BEACH, CA 92651	46-1378116	501(C)3	7,000.	0.			GENERAL OPERATING SUPPORT

Part II Continuation of Grants and Other	Assistance to Dor	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GLAD TIDINGS COMMUNITY DEVELOPMENT CORP - 905 W TENNYSON RD - HAYWARD, CA 94544	68-0276554	501(C)3	50,000.	0.			GENERAL OPERATING SUPPORT
GLOBAL GREENGRANTS FUND 2840 WILDERNESS PLACE BOULDER, CO 80301	84-1612422	501(C)3	15,000.	0.			GENERAL OPERATING SUPPORT
GOT GREEN PO BOX 18794 SEATTLE, WA 98118	91-1656676	501(C)3	5,000.	0.			PROJECT SUPPORT FOR LA RESISTENCIA
GOT GREEN PO BOX 18794 SEATTLE, WA 98118	91-1656676	501(C)3	5,000.	0.			PROJECT SUPPORT FOR LA RESISTENCIA
GRASSROOTS GLOBAL JUSTICE ALLIANCE PO BOX 73768 WASHINGTON, DC 20056	26-4633127	501(C)3	10,000.	0.			PROJECT SUPPORT FOR IT
GRASSROOTS GLOBAL JUSTICE ALLIANCE PO BOX 73768 WASHINGTON, DC 20056	26-4633127	501(C)3	15,000.	0.			PROJECT SUPPORT FOR IT
GRASSROOTS INTERNATIONAL 179 BOYLSTON STREET, 4TH FLOOR BOSTON, MA 02130	04-2791159	501(C)3	1,000.	0.			PROJECT SUPPORT FOR FREE PALESTINE GIVING PROJECT
GRASSROOTS INTERNATIONAL 179 BOYLSTON STREET, 4TH FLOOR BOSTON, MA 02130	04-2791159	501(C)3	10,000.	0.			GENERAL OPERATING SUPPORT
GRASSROOTS INTERNATIONAL 179 BOYLSTON STREET, 4TH FLOOR BOSTON, MA 02130	04-2791159	501(C)3	10,000.	0.			GENERAL OPERATING SUPPORT

Part II Continuation of Grants and Other	Assistance to Dor	nestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	urt II.)	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GROUNDSWELL FUND							
PO BOX 71642							
OAKLAND, CA 94612	47-4003615	501(C)3	10,000.	0.			GENERAL OPERATING SUPPORT
GROUNDSWELL FUND							
PO BOX 71642							
OAKLAND, CA 94612	47-4003615	501(C)3	40,000.	0.			GENERAL OPERATING SUPPORT
GROUNDSWELL FUND							
PO BOX 71642							PROJECT SUPPORT FOR BLACK
OAKLAND, CA 94612	47-4003615	501(C)3	20,000.	0.			TRANS FUND
HAYMARKET PEOPLE'S FUND							
42 SEAVERNS AVE							
JAMAICA PLAIN, MA 02130	04-2586725	501 (C) 3	10,000.	0.			GENERAL OPERATING SUPPORT
OMMICH IMIN, MI 02130	04 2300723	301(0/3	10,000.	0.			CENTRAL OF BRITING BOTTON
HAYMARKET PEOPLE'S FUND							
42 SEAVERNS AVE							
JAMAICA PLAIN, MA 02130	04-2586725	501(C)3	10,000.	0.			GENERAL OPERATING SUPPORT
HAYMARKET PEOPLE'S FUND							
42 SEAVERNS AVE							
JAMAICA PLAIN, MA 02130	04-2586725	501(C)3	10,000.	0.			GENERAL OPERATING SUPPORT
HIGHLANDER RESEARCH AND EDUCATION							
CENTER INC 1959 HIGHLANDER WAY							PROJECT SUPPORT FOR
- NEW MARKET, TN 37820	62-0646373	501(C)3	5,000.	0.			NATIONAL BAIL OUT
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HIGHLANDER RESEARCH AND EDUCATION							
CENTER INC 1959 HIGHLANDER WAY							PROJECT SUPPORT FOR
- NEW MARKET, TN 37820	62-0646373	501(C)3	10,000.	0.			SOUTHERN POWER FUND
HIGHLANDER RESEARCH AND EDUCATION							
CENTER INC 1959 HIGHLANDER WAY							PROJECT SUPPORT FOR
- NEW MARKET, TN 37820	62-0646373	501(C)3	2,500.	0.			SOUTHERN POWER FUND

Part II Continuation of Grants and Other	Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)								
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
HIGHLANDER RESEARCH AND EDUCATION CENTER INC 1959 HIGHLANDER WAY - NEW MARKET, TN 37820	62-0646373	501(C)3	10,000.	0.			PROJECT SUPPORT FOR BOLD		
HIGHLANDER RESEARCH AND EDUCATION CENTER INC 1959 HIGHLANDER WAY - NEW MARKET, TN 37820	62-0646373	501(C)3	50,000.	0.			PROJECT SUPPORT FOR SOUTHERN POWER FUND		
HIPEEXNU'. KII'U NUUN WISIIX. INC. PO BOX 415 LAPWAI, ID 83540	83-1557196	501(C)3	15,000.	0.			GENERAL OPERATING SUPPORT		
HISTORIC CLAYBORN TEMPLE 119 S MAIN ST STE 500 MEMPHIS, TN 38103-3659	83-2421711	501(C)3	10,000.	0.			GENERAL OPERATING SUPPORT		
HONOR THE EARTH PO BOX 63 CALLAWAY, MN 56521	45-4714238	501(C)3	15,000.	0.			GENERAL OPERATING SUPPORT		
HONOR THE EARTH PO BOX 63 CALLAWAY, MN 56521	45-4714238	501(C)3	10,000.	0.			GENERAL OPERATING SUPPORT		
HONOR THE EARTH PO BOX 63 CALLAWAY, MN 56521	45-4714238	501(C)3	10,000.	0.			GENERAL OPERATING SUPPORT		
HOPI FOUNDATION P.O. BOX 301 KYKOTSMOVI, AZ 86039	74-2488628	501(C)3	15,000.	0.			GENERAL OPERATING SUPPORT		
HOPI TUTSKWA PERMACULTURE INSTITUTE - PO BOX 967 - KYKOTSMOVI, AZ 86039	47-4563866	501(C)3	16,000.	0.			GENERAL OPERATING SUPPORT		

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HUDSON VALLEY SEED INC. P.O. BOX 223 BEACON, NY 12508	46-3267308	501(C)3	45,000.	0.			PROJECT SUPPORT TO FURTHER ORGANIZATIONAL MISSION		
INDIAN PEOPLES ACTION PO BOX 953 BUTTE, MT 59703	81-5472177	501(C)3	5,000.	0.			GENERAL OPERATING SUPPORT		
INDIAN PEOPLES ACTION PO BOX 953 BUTTE, MT 59703	81-5472177	501(C)3	15,000.	0.			GENERAL OPERATING SUPPORT		
INDIGENOUS ENVIRONMENTAL NETWORK PO BOX 485 BEMIDJI, MN 56619	38-3653476	501(C)3	10,000.	0.			GENERAL OPERATING SUPPORT		
INDIGENOUS ENVIRONMENTAL NETWORK PO BOX 485 BEMIDJI, MN 56619	38-3653476	501(C)3	20,000.	0.			GENERAL OPERATING SUPPORT		
INDIGENOUS ENVIRONMENTAL NETWORK PO BOX 485 BEMIDJI, MN 56619	38-3653476	501(C)3	10,000.	0.			PROJECT SUPPORT TO FURTHER ORGANIZATIONAL MISSION		
INDIGENOUS ENVIRONMENTAL NETWORK PO BOX 485 BEMIDJI, MN 56619	38-3653476	501(C)3	15,000.	0.			GENERAL OPERATING SUPPORT		
INDIGENOUS PEOPLES TASK FORCE 1335 E 23RD ST MINNEAPOLIS, MN 55404	36-3617906	501(C)3	15,000.	0.			GENERAL OPERATING SUPPORT		
INDIGENOUS PEOPLES TASK FORCE 1335 E 23RD ST MINNEAPOLIS, MN 55404	36-3617906	501(C)3	10,000.	0.			GENERAL OPERATING SUPPORT		

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INDUSTRIAL COMMONS									
PO BOX 71									
MORGANTON, NC 28680-0071	47-2080338	501 (C) 3	10,000.	0.			GENERAL OPERATING SUPPORT		
MORGINION, NC 20000 0071	47 2000330	501(0/5	10,000.	· ·			BINDAME OF ENGLISH BOTTON		
INLAND CONGREGATIONS UNITED FOR									
CHANGE - 1441 N. D ST., STE. 208 -									
SAN BERNARDINO, CA 92405	33-0480298	501(C)3	30,000.	0.			CAPACITY BUILDING		
INLAND CONGREGATIONS UNITED FOR			ĺ						
CHANGE (ICUC) - 1441 N. D ST.,									
STE. 208 - SAN BERNARDINO, CA									
92405	33-0480298	501(C)3	50,000.	0.			GENERAL OPERATING SUPPORT		
INLAND EQUITY COMMUNITY LAND TRUST									
3555 LIME STREET									
RIVERSIDE, CA 92501	84-4985523	501(C)3	12,000.	0.			GENERAL OPERATING SUPPORT		
INNERCITY STRUGGLE									
3467 WHITTIER BLVD.		504 (5) 0							
LOS ANGELES, CA 90023	27-2133211	501(C)3	30,000.	0.			GENERAL OPERATING SUPPORT		
INQUIRING SYSTEMS							PRORECT SUPPORT FOR SE		
101 BROOKWOOD AVE #204							AFRICAN AMERICAN FARMERS		
SANTA ROSA, CA 95404	94-2524840	501 (C) 3	3,000.	0.			ORGANIC NETWORK		
DANIA RODA, CA 93404	J4 2324040	501(0/5	3,000.	<u> </u>			DRGANIC NEIWORK		
INQUIRING SYSTEMS							PROJECT SUPPORT FOR		
101 BROOKWOOD AVE #204							SOVEREIGN BODIES		
SANTA ROSA, CA 95404	94-2524840	501(C)3	15,000.	0.			INSTITUTE		
			,						
INQUIRING SYSTEMS									
101 BROOKWOOD AVE #204							PROJECT SUPPORRT FOR		
SANTA ROSA, CA 95404	94-2524840	501(C)3	30,000.	0.			BLACK MECCA PROJECT		
INQUIRING SYSTEMS							PROJECT SUPPORRT FOR SE		
101 BROOKWOOD AVE #204							AFRICAN AMERICAN FARMERS		
SANTA ROSA, CA 95404	94-2524840	501(C)3	25,000.	0.			organic network		

Part II Continuation of Grants and Other	Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)								
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
INQUIRING SYSTEMS 101 BROOKWOOD AVE #204 SANTA ROSA, CA 95404	94-2524840	501(C)3	25,000.	0.			PROJECT SUPPORT FOR COFED		
INSTITUTE FOR SOCIAL POLICY AND UNDERSTANDING - 6 PARKLANE BLVD - DEARBORN, MI 48126	38-3633581	501(C)3	150,000.	0.			GENERAL OPERATING SUPPORT		
INTERNATIONAL INDIAN TREATY COUNCIL - 2940 16TH ST SAN FRANCISCO, CA 94103	94-3330491	501(C)3	15,000.	0.			GENERAL OPERATING SUPPORT		
INTERNATIONAL INDIAN TREATY COUNCIL - 2940 16TH ST SAN FRANCISCO, CA 94103	94-3330491	501(C)3	10,000.	0.			GENERAL OPERATING SUPPORT		
ISAIAH 2356 UNIVERSITY AVE W ST. PAUL, MN 55114	41-1957358	501(C)3	7,500.	0.			GENERAL OPERATING SUPPORT		
JAIL GUITAR DOORS USA 842 NORTH FAIRFAX, 2ND FLOOR LOS ANGELES, CA 90046	27-0998581	501(C)3	10,000.	0.			GENERAL OPERATING SUPPORT		
JUSTICE FOR FAMILIES 1913 AZALEA STREET SULPHUR, LA 70633	45-2625169	501(C)3	10,000.	0.			GENERAL OPERATING SUPPORT		
JUSTICE FOR FAMILIES 1913 AZALEA STREET SULPHUR, LA 70633	45-2625169	501(C)3	1,000.	0.			GENERAL OPERATING SUPPORT		
KAHEA: THE HAWAIIAN-ENVIRONMENTAL ALLIANCE - PO BOX 37368 - HONOLULU, HI 96837	99-0348025	501(C)3	15,000.	0.			PROJECT SUPPORT TO FURTHER ORGANIZATIONAL MISSION		

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(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
KAHEA: THE HAWAIIAN-ENVIRONMENTAL ALLIANCE - PO BOX 37368 - HONOLULU, HI 96837	99-0348025	501(C)3	10,000.	0.			PROJECT SUPPORT TO FURTHER ORGANIZATIONAL MISSION		
KANENHI:IO IONKWIAENTHOS 6012 MAYBEE RD NEDROW, NY 13120	85-1101586	501(C)3	18,000.	0.			GENERAL OPERATING SUPPORT		
KERES CHILDREN'S LEARNING CENTER P.O. BOX 113 COCHITI PUEBLO, NM 87072	45-4511408	501(C)3	15,000.	0.			GENERAL OPERATING SUPPORT		
KOIHONUA P.O. BOX 1229 PEARL CITY, HI 96782	81-4352379	501(C)3	25,000.	0.			GENERAL OPERATING SUPPORT		
KOREATOWN IMMIGRANT WORKERS ALLIANCE (KIWA) - 941 S. VERMONT AVE. STE. 101 #301 - LOS ANGELES, CA 90006	95-4392004	501(C)3	50,000.	0.			GENERAL OPERATING SUPPORT		
KOREATOWN IMMIGRANT WORKERS ALLIANCE (KIWA) - 941 S. VERMONT AVE. STE. 101 #301 - LOS ANGELES, CA 90006	95-4392004	501(C)3	12,000.	0.			GENERAL OPERATING SUPPORT		
KUA'AINA ULU 'AUAMO 47-200 WAIHEE ROAD KANEOHE, HI 96744	45-4509939	501(C)3	15,000.	0.			GENERAL OPERATING SUPPORT		
KUMANO I KE ALA O MAKAWELI PO BOX 633 WAIMEA, HI 96796	47-3180959	501(C)3	15,000.	0.			GENERAL OPERATING SUPPORT		
LA SEMILLA FOOD CENTER P.O. BOX 2579 ANTHONY, NM 88021	27-2486484	501(C)3	8,000.	0.			GENERAL OPERATING SUPPORT		

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(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
LA VOICE									
3660 WILSHIRE BLVD									
LOS ANGELES, CA 90010	95-4781974	501(C)3	70,000.	0.			GENERAL OPERATING SUPPORT		
,			, , , , , , ,						
LA VOICE									
3660 WILSHIRE BLVD									
LOS ANGELES, CA 90010	95-4781974	501(C)3	12,000.	0.			GENERAL OPERATING SUPPORT		
LEADERSHIP COUNSEL FOR JUSTICE AND									
ACCOUNTABILITY - 2210 SAN JOAQUIN									
ST FRESNO, CA 93721	46-1517800	501(C)3	30,000.	0.			CAPACITY BUILDING		
LEADERSHIP COUNSEL FOR JUSTICE AND									
ACCOUNTABILITY - 2210 SAN JOAQUIN	46-1517800	E01/G) 2	60 000	0.			GADAGIWA DIITI DING		
ST FRESNO, CA 93721	46-151/600	501(0)3	60,000.	٠.			CAPACITY BUILDING		
LEADERSHIP COUNSEL FOR JUSTICE AND									
ACCOUNTABILITY - 2210 SAN JOAQUIN									
ST FRESNO, CA 93721	46-1517800	501(C)3	45,000.	0.			CAPACITY BUILDING		
21. 11.2210, 01. 33,21	10 101/000	001(0)0	10,000.						
LEADERSHIP COUNSEL FOR JUSTICE AND									
ACCOUNTABILITY - 2210 SAN JOAQUIN									
ST FRESNO, CA 93721	46-1517800	501(C)3	100,000.	0.			GENERAL OPERATING SUPPORT		
LIGHT HOUSE GROUP INC.							PROJECT SUPPORT TO		
202 N TARBORO ST							FURTHER ORGANIZATIONAL		
RALEIGH, NC 27610	30-0875802	501(C)3	10,000.	0.			MISSION		
LITTLE TOKYO SERVICE CENTER							L		
231 E. THIRD ST STE G106	05 4444100	E01/a) 2	40.00	•			PROJECT SUPPORT FOR ACT		
LOS ANGELES, CA 90013	95-4444102	501(C)3	40,000.	0.			LA I		
LOS ANGELES CENTER FOR COMMUNITY									
LAW AND ACTION - 1137 N. WESTMORELAND AVE. SUITE 16 - LOS									
ANGELES, CA 90029	47-1909862	501(C)3	12,000.	0.			GENERAL OPERATING SUPPORT		
11101110, 011 30013	1 1, 1,0,002	P = 1 (C / S	1 12,000.	٠.			DELIZIONE OF DIRECTIONS		

Part II Continuation of Grants and Other	Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)								
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
LOS ANGELES POVERTY DEPARTMENT PO BOX 26190 LOS ANGELES, CA 90026	95-4174562	501(C)3	10,000.	0.			GENERAL OPERATING SUPPORT		
LOUISIANA BUCKET BRIGADE 2803 SAINT PHILLIP STREET NEW ORLEANS, LA 70119	72-1488935	501(C)3	15,000.	0.			GENERAL OPERATING SUPPORT		
LOWLANDER CENTER 106 SANDALWOOD DR. GRAY, LA 70359	46-4993987	501(C)3	10,000.	0.		1	PROJECT SUPPORT FOR COASTAL COMMUNITIES COLLAB		
LOWLANDER CENTER 106 SANDALWOOD DR. GRAY, LA 70359	46-4993987	501(C)3	1,000.	0.			CAPACITY BUILDING FOR COASTAL COMMUNITIES COLLAB		
LOWLANDER CENTER 106 SANDALWOOD DR. GRAY, LA 70359	46-4993987	501(C)3	16,000.	0.		1	PROJECT SUPPORRT FOR FIRST PEOPLE'S CONSERVATION COUNCIL		
LTSC COMMUNITY DEVELOPMENT CORPORATION - 231 E. THIRD ST STE G106 - LOS ANGELES, CA 90013	95-4444102	501(C)3	50,000.	0.			PROJECT SUPPORT FOR ACT		
LTSC COMMUNITY DEVELOPMENT CORPORATION - 231 E. THIRD ST STE G106 - LOS ANGELES, CA 90013	95-4444102	501(C)3	50,000.	0.			GENERAL OPERATING SUPPORT		
MAKAUILA, INC. 1839 KEEAUMOKU STREET HONOLULU, HI 96822	27-2294683	501(C)3	15,000.	0.		1	PROJECT SUPPORT FOR PONO		
MAKEWAY FOUNDATION SUITE 400 - 163 HASTINGS ST W VANCOUVER BC, CANADA	98-0404212	501(C)3	15,900.	0.		1	PROJECT SUPPORT FOR WINDROSE		

Part II Continuation of Grants and Other	Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)								
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MANA MAOLI 1903 PALOLO AVENUE ROOM C3 HONOLULU, HI 96816	31-1783481	501(C)3	20,000.	0.			PROJECT SUPPORT TO FURTHER ORGANIZATIONAL MISSION		
MEDIA ALLIANCE INC. PO BOX 35 TROY, NY 12181	11-2538804	501(C)3	20,000.	0.			PROJECT SUPPORT TO FURTHER ORGANIZATIONAL MISSION		
MENIKANAEHKEM-COMMUNITY REBUILDERS N8866 CTY. RD. G GRESHAM, WI 54128	81-5405696	501(C)3	10,000.	0.			GENERAL OPERATING SUPPORT		
MENIKANAEHKEM-COMMUNITY REBUILDERS N8866 CTY. RD. G GRESHAM, WI 54128	81-5405696	501(C)3	15,000.	0.			GENERAL OPERATING SUPPORT		
MIGIZI COMMUNICATIONS INC. PO BOX 17125 MINNEAPOLIS, MN 55417	41-1379114	501(C)3	15,000.	0.			GENERAL OPERATING SUPPORT		
MIGIZI COMMUNICATIONS INC. PO BOX 17125 MINNEAPOLIS, MN 55417	41-1379114	501(C)3	1,000.	0.			GENERAL OPERATING SUPPORT		
MIGRANT JUSTICE/JUSTICIA MIGRANTE 179 S. WINOOSKI AVE. BURLINGTON, VT 05401	03-0349582	501(C)3	10,000.	0.			GENERAL OPERATING SUPPORT		
MIJENTE SUPPORT COMMITTEE 1229 E EDGEMONT AVENUE PHOENIX, AZ 85006	82-1711382	501(C)3	18,500.	0.			PROJECT SUPPORT TO FURTHER ORGANIZATIONAL MISSION		
MIXTECO/INDIGENA COMMUNITY ORGANIZING PROJECT - PO BOX 20543 - OXNARD, CA 93034	30-0045901	501(C)3	6,000.	0.			GENERAL OPERATING SUPPORT		

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MIXTECO/INDIGENA COMMUNITY ORGANIZING PROJECT - PO BOX 20543 - OXNARD, CA 93034	30-0045901	501(C)3	15,000.	0.			GENERAL OPERATING SUPPORT		
MONTANA TWO SPIRIT P.O. BOX 7514 MISSOULA, MT 59807	94-3473673	501(C)3	15,000.	0.			GENERAL OPERATING SUPPORT		
MOUNTAIN SHADOW ASSOCIATION 444 CIRCLE F TRAIL BOZEMAN, MT 59718	83-2453245	501(C)3	15,000.	0.			GENERAL OPERATING SUPPORT		
MOVEMENT STRATEGY CENTER 436 14TH STREET, STE 500 OAKLAND, CA 94612	20-1037643	501(c)3	10,000.	0.			PROJECT JUSTICE FOR HEAL		
MOVEMENT STRATEGY CENTER 436 14TH STREET, STE 500 OAKLAND, CA 94612	20-1037643	501(C)3	30,000.	0.			PROJECT SUPPORT FOR BAY		
MOVEMENT STRATEGY CENTER 436 14TH STREET, STE 500 OAKLAND, CA 94612	20-1037643	501(c)3	10,000.	0.			PROJECT SUPPORT FOR BLACK		
MOVEMENT STRATEGY CENTER 436 14TH STREET, STE 500 OAKLAND, CA 94612	20-1037643	501(C)3	25,000.	0.			PROJECT SUPPORT FOR		
MOVEMENT STRATEGY CENTER 436 14TH STREET, STE 500 OAKLAND, CA 94612	20-1037643	501(C)3	20,000.	0.			PROJECT SUPPORT FOR		
NA AIKANI O MAUI INC. 562 FRONT ST STE A LAHAINA, HI 96761	27-1563658	501(C)3	10,000.	0.			PROJECT SUPPORT TO FURTHER ORGANIZATIONAL MISSION		

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(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
NA AIKANI O MAUI INC. 562 FRONT ST STE A LAHAINA, HI 96761	27-1563658	501(C)3	15,000.	0.			PROJECT SUPPORT TO FURTHER ORGANIZATIONAL MISSION		
NACA-INSPIRED SCHOOLS NETWORK PO BOX 40334 ALBUQUERQUE, NM 87196	47-2981893	501(C)3	15,000.	0.			GENERAL OPERATING SUPPORT		
NACA-INSPIRED SCHOOLS NETWORK PO BOX 40334 ALBUQUERQUE, NM 87196	47-2981893	501(C)3	12,500.	0.			GENERAL OPERATING SUPPORT		
NATIONAL COALITION ON BLACK CIVIC PARTICIPATION IN - 1666 K STREET, NW - WASHINGTON, DC 20006	52-1253112	501(C)3	1,500.	0.			PROJECT SUPPORT TO FURTHER ORGANIZATIONAL MISSION		
NATIONAL COALITION ON BLACK CIVIC PARTICIPATION IN - 1666 K STREET, NW - WASHINGTON, DC 20006	52-1253112	501(C)3	8,500.	0.			PROJECT SUPPORT TO FURTHER ORGANIZATIONAL MISSION		
NATIONAL DOMESTIC WORKERS ALLIANCE 45 BROADWAY SUITE 320 NEW YORK, NY 10006	35-2420942	501(C)3	10,000.	0.			PROJECT SUPPORT FOR CORONAVIRUS CARE FUND		
NATIONAL LAWYERS GUILD FOUNDATION PO BOX 1266 NEW YORK, NY 10009	13-3336640	501(C)3	25,000.	0.			PROJECT SUPPORT FOR MASS DEFENSE PROGRAM		
NATIONAL NATIVE AMERICAN BOARDING SCHOOL - 2525 E. FRANKLIN AVE., SUITE 120 - MINNEAPOLIS, MN 55406	38-3888458	501(C)3	15,000.	0.			GENERAL OPERATING SUPPORT		
NATIONAL NATIVE AMERICAN BOARDING SCHOOL - 2525 E. FRANKLIN AVE., SUITE 120 - MINNEAPOLIS, MN 55406	38-3888458	501(C)3	10,000.	0.			GENERAL OPERATING SUPPORT		

Part II Continuation of Grants and Other	Assistance to Do	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NATIVE ACTION NETWORK							
815 1ST AVE, SUITE 113							
SEATTLE, WA 98104	27-0884032	501(C)3	25,000.	0.			GENERAL OPERATING SUPPORT
			, -				
NATIVE AMERICAN COMMUNITY BOARD							
PO BOX 572							
LAKE ANDES, SD 57356-0572	46-0392867	501(C)3	15,000.	0.			GENERAL OPERATING SUPPORT
NATIVE AMERICAN COMMUNITY BOARD							
PO BOX 572	46 000005	504 (5) 2	10.00				
LAKE ANDES, SD 57356-0572	46-0392867	501(C)3	10,000.	0.			GENERAL OPERATING SUPPORT
NATIVE AMERICAN COMMUNITY DEVELOPMENT INSTITUTE - 1414							
FRANKLIN AVENUE - MINNEAPOLIS, MN							
55404	41-2117257	501(C)3	25,000.	0.			GENERAL OPERATING SUPPORT
	11 211/20/	001(0)0	20,000.	•			
NATIVE AMERICAN FOOD SOVEREIGNTY							
ALLIANCE - PO BOX 68 - SCANDIA, MN							
55073	46-4578553	501(C)3	25,000.	0.			GENERAL OPERATING SUPPORT
NATIVE AMERICAN RIGHTS FUND							
1506 BROADWAY							
BOULDER, CO 80302	84-0611876	501(C)3	7,500.	0.			GENERAL OPERATING SUPPORT
NATIVE AMERICAN RIGHTS FUND							
1506 BROADWAY							
BOULDER, CO 80302	84-0611876	501 (C) 3	15,000.	0.			GENERAL OPERATING SUPPORT
BOODBER, CO 00302	04 0011070	301(0/3	13,000.	· ·			SHARKE STERRITING BOTTORT
NATIVE DADS NETWORK							
P.O BOX 162725							
SACRAMENTO, CA 95816	46-4821826	501(C)3	10,000.	0.			GENERAL OPERATING SUPPORT
NATIVE DADS NETWORK							
P.O BOX 162725							
SACRAMENTO, CA 95816	46-4821826	501(C)3	15,000.	0.			GENERAL OPERATING SUPPORT

Part II Continuation of Grants and Other	Assistance to Dor	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NATIVE GOVERNANCE CENTER							
60 PLATO BOULEVARD EAST SUITE 400							
ST. PAUL, MN 55107	47-4901644	501 (C) 3	10,000.	0.			GENERAL OPERATING SUPPORT
51. INSE, IN 55107	47 4501044	301(0/3	10,000.	· ·			CHARACTE OF EXCEPTING BOTTOKT
NATIVE GOVERNANCE CENTER							
60 PLATO BOULEVARD EAST SUITE 400							
ST. PAUL, MN 55107	47-4901644	501(C)3	15,000.	0.			GENERAL OPERATING SUPPORT
			, , , , ,				
NATIVE LAND CONSERVANCY INC							
PO BOX 974							
MASHPEE, MA 02649-0974	46-3944868	501(C)3	10,000.	0.			GENERAL OPERATING SUPPORT
NATIVE MOVEMENT							
PO BOX 83467							
FAIRBANKS, AK 99708	68-0535413	501(C)3	15,000.	0.			GENERAL OPERATING SUPPORT
NATIVE MOVEMENT							
PO BOX 83467							
FAIRBANKS, AK 99708	68-0535413	501(C)3	10,000.	0.			GENERAL OPERATING SUPPORT
NATIVE PUBLIC MEDIA INC.							
P.O. BOX 3955							
FLAGSTAFF, AZ 86003	80-0672072	501(C)3	9,500.	0.			GENERAL OPERATING SUPPORT
NAME OF DESIGNATION OF THE OWNER OW							
NATIVE PUBLIC MEDIA INC.							
P.O. BOX 3955	80-0672072	E01/G\2	15 000	0.			GENERAL OPERATING SUPPORT
FLAGSTAFF, AZ 86003	80-0672072	501(C/3	15,000.	0.			GENERAL OPERATING SUPPORT
NATIVE VISION INC.							
PO BOX 210914							
ANCHORAGE, AK 99521	83-2072085	501(C)3	15,000.	0.			GENERAL OPERATING SUPPORT
	35 25.2303		125,300.	•			
NATIVE VISION INC.							PROJECT SUPPORT TO
PO BOX 210914							FURTHER ORGANIZATIONAL
ANCHORAGE, AK 99521	83-2072085	501(C)3	10,000.	0.			MISSION

Part II Continuation of Grants and Other	Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)								
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
NATIVE YOUTH LEADERSHIP ALLIANCE PO BOX 241 PINE RIDGE, SD 57770	27-2503270	501(C)3	15,000.	0.			GENERAL OPERATING SUPPORT		
NATIVE YOUTH LEADERSHIP ALLIANCE PO BOX 241 PINE RIDGE, SD 57770	27-2503270	501(C)3	10,000.	0.			GENERAL OPERATING SUPPORT		
NAVA EDUCATION PROJECT P.O. BOX 35698 ALBUQUERQUE, NM 87176	27-1866733	501(C)3	12,500.	0.			GENERAL OPERATING SUPPORT		
NAVA EDUCATION PROJECT P.O. BOX 35698 ALBUQUERQUE, NM 87176	27-1866733	501(C)3	15,000.	0.			GENERAL OPERATING SUPPORT		
NC WARN P.O. BOX 61051 DURHAM, NC 27715	56-1734433	501(C)3	10,000.	0.			PROJECT SUPPORT TO FURTHER ORGANIZATIONAL MISSION		
NDN COLLECTIVE INC. 317 MAIN STREET SUITE 1 RAPID CITY, SD 57701	82-3776329	501(C)3	15,000.	0.			PROJECT SUPPORT TO FURTHER ORGANIZATIONAL MISSION		
NDN COLLECTIVE INC. 317 MAIN STREET SUITE 1 RAPID CITY, SD 57701	82-3776329	501(C)3	10,000.	0.			PROJECT SUPPORT FOR INDIGENOUS PEOPLES POWER		
NDN COLLECTIVE INC. 317 MAIN STREET SUITE 1 RAPID CITY, SD 57701	82-3776329	501(C)3	30,000.	0.			GENERAL OPERATING SUPPORT		
NDN COLLECTIVE INC. 317 MAIN STREET SUITE 1 RAPID CITY, SD 57701	82-3776329	501(C)3	15,000.	0.			PROJECT SUPPORT TO FURTHER ORGANIZATIONAL MISSION		

Part II Continuation of Grants and Other	Assistance to Doi	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NEBRASKA INDIAN CHILD WELFARE							
COALITION, INC 53578 HWY 12 -							
BLOOMFIELD, NE 68718	82-3596002	501(C)3	30,000.	0.			GENERAL OPERATING SUPPORT
NEO PHILANTHROPY							
45 WEST 36TH STREET							PROJECT SUPPORRT FOR
NEW YORK, NY 10018	13-3191113	501(C)3	15,000.	0.			CYPRESS FUND
NEW MEXICO COMMUNITY FOUNDATION							
8 CALLE MEDICO							PROJECT SUPPORT FOR NM
SANTA FE, NM 87505	85-0311210	501(C)3	5,000.	0.			BLACK HISTORY
			,				
NEW MEXICO COMMUNITY FOUNDATION							
8 CALLE MEDICO							PROJECT SUPPORT FOR THE
SANTA FE, NM 87505	85-0311210	501(C)3	8,000.	0.			SYNDICATE
NEW MEXICO COMMUNITY FOUNDATION							L
8 CALLE MEDICO	05 0211210	E01/G) 2	0.000	_			PROJECT SUPPORRT FOR EL
SANTA FE, NM 87505	85-0311210	501(C)3	8,000.	0.			VALLE/BUENO PARA TODOS
NEW MEXICO FUND FOR WOMEN & GIRLS							
1807 2ND STREET							
SANTA FE, NM 87505	81-4638850	501(C)3	5,000.	0.			GENERAL OPERATING SUPPORT
NEW VENTURE FUND							
1201 CONNECTICUT AVE. NW, SUITE 300	1						PROJECT SUPPORT FOR
WASHINGTON, DC 20036	20-5806345	501(C)3	15,000.	0.			ILLUMINATIVE
NEW VENIMINE BIND							
NEW VENTURE FUND							DDO TECH CUDDODA FOR AV
1201 CONNECTICUT AVE. NW, SUITE 300 WASHINGTON, DC 20036	20-5806345	501 (C) 3	30,000.	0.			PROJECT SUPPORT FOR AK NATIVE BIRTHWORKERS
MADITINGTON, DC 20030	20-3000345	501(0)3	30,000.	0.			MATIAE BIVIUMOVVEVS
NEW VENTURE FUND							PROJECT SUPPORT FOR
1201 CONNECTICUT AVE. NW, SUITE 300							OAKLAND FUND FOR PUBLIC
WASHINGTON, DC 20036	20-5806345	501(C)3	1,000.	0.			INNOV

Part II Continuation of Grants and Other	Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)									
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
NIMIIPUU PROTECTING THE ENVIRONMENT - 1820 NW ARCADIA DRIVE - PULLMAN, WA 99163	47-3465431	501(C)3	15,000.	0.			GENERAL OPERATING SUPPORT			
NIMIIPUU PROTECTING THE ENVIRONMENT - 1820 NW ARCADIA DRIVE - PULLMAN, WA 99163	47-3465431	501(C)3	10,000.	0.			GENERAL OPERATING SUPPORT			
NORTH BAY ORGANIZING PROJECT PO BOX 503 GRATON, CA 95444	45-2369887	501(C)3	70,000.	0.			GENERAL OPERATING SUPPORT			
NORTH BAY ORGANIZING PROJECT PO BOX 503 GRATON, CA 95444	45-2369887	501(C)3	15,000.	0.			GENERAL OPERATING SUPPORT			
NORTH CAROLINA ASSOCIATION OF BLACK LAWYER LAND - PO BOX 179 - DURHAM, NC 27702-0179	56-1348982	501(C)3	10,000.	0.			GENERAL OPERATING SUPPORT			
NORTH CAROLINA ENVIRONMENTAL JUSTICE NETWORK - P.O. BOX 68 - ROCKY MOUNT, NC 27802	20-5966295	501(C)3	10,000.	0.			GENERAL OPERATING SUPPORT			
NORTH DAKOTA MUSEUM OF ART 261 CENTENNIAL DRIVE STOP 7305 GRAND FORKS, ND 58202	45-0386152	501(C)3	14,000.	0.			GENERAL OPERATING SUPPORT			
OAKLAND COMMUNITY LAND TRUST 101 BROADWAY SUITE 205 OAKLAND, CA 94607	32-0285788	501(C)3	12,000.	0.			PROJECT SUPPORT TO FURTHER ORGANIZATIONAL MISSION			
OIL CHANGE INTERNATIONAL 714 G STREET SE WASHINGTON, DC 20003	20-3272355	501(C)3	10,000.	0.			GENERAL OPERATING SUPPORT			

Part II Continuation of Grants and Other	Assistance to Do	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
OPEN ARMS PERINATAL SERVICES 2524 16TH AVENUE S., SUITE 207A SEATTLE, WA 98144	91-1868021	501(C)3	15,000.	0.			PROJECT SUPPORT FOR
OPEN ARMS PERINATAL SERVICES 2524 16TH AVENUE S., SUITE 207A SEATTLE, WA 98144	91-1868021	501(C)3	10,000.	0.			PROJECT SUPPORT FOR
OYATE TECA PROJECT 39 WAKPALA AVE. KYLE, SD 57752	46-0438929	501(C)3	15,000.	0.			GENERAL OPERATING SUPPORT
PEACE DEVELOPMENT FUND PO BOX 1280 AMHERST, MA 01002	04-2738794	501(C)3	10,000.	0.			PROJECT SUPPORT FOR AMERICAN INDIAN PRISON PROJECT WG
PHOENIX INDIAN CENTER 4520 N CENTRAL AVE. SUITE #250 PHOENIX, AZ 85012	86-6006566	501(C)3	7,500.	0.			GENERAL OPERATING SUPPORT
PHOENIX INDIAN CENTER 4520 N CENTRAL AVE. SUITE #250 PHOENIX, AZ 85012	86-6006566	501(C)3	15,000.	0.			GENERAL OPERATING SUPPORT
PINE RIDGE GIRLS' SCHOOL 2237 BIA 27 PORCUPINE, SD 57772	46-3668492	501(C)3	20,000.	0.			GENERAL OPERATING SUPPORT
PLAINS ART MUSEUM 704 FIRST AVENUE N FARGO, ND 58102	41-1260780	501(C)3	20,000.	0.			PROJECT SUPPORT FOR SUMMER ART INSTITUTE
POHAHA I KA LANI PO BOX 412 KURTISTOWN, HI 96760	80-0380686	501(C)3	20,000.	0.			GENERAL OPERATING SUPPORT

Part II Continuation of Grants and Other	Assistance to Do	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	ruge
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
POLARIS INSTITUTE							PROJECT SUPPORT TO
1901 OLYMPIC BOULEVARD SUITE 200							FURTHER ORGANIZATIONAL
WALNUT CREEK, CA 94596	74-3099465	501(C)3	12,000.	0.			MISSION
·			,				
POSSIBILITY LABS							PROJECT SUPPORT TO
1410 FRANKLIN STREET, #135							FURTHER ORGANIZATIONAL
SAN FRANCISCO, CA 94109	85-3989363	501(C)3	371,346.	0.			MISSION
POWER CALIFORNIA							
1720 BROADWAY							
OAKLAND, CA 94612	77-0651682	501 (C) 3	100,000.	0.			GENERAL OPERATING SUPPORT
OAKBAND, CA 74012	77 0031002	501(0/5	100,000.	<u> </u>			BENERAL CLERATING BOFFORT
POWER CALIFORNIA							
1720 BROADWAY							
OAKLAND, CA 94612	77-0651682	501(C)3	160,000.	0.			CAPACITY BUILDING
,							
POWER CALIFORNIA							
1720 BROADWAY							
OAKLAND, CA 94612	77-0651682	501(C)3	30,000.	0.			GENERAL OPERATING SUPPORT
PROJECT SOUTH							
9 GAMMON AVE SE							
ATLANTA, GA 30315	58-1956686	501(C)3	25,000.	0.			PROJECT SUPPORT FOR GCCLP
PROJECT SOUTH							
9 GAMMON AVE SE							PROJECT SUPPORT FOR
	58-1956686	E01/G\2	10 000	0.			SOUTHERN POWER FUND
ATLANTA, GA 30315	38-1336686	501(C)3	10,000.	0.			SOUTHERN POWER FUND
PROJECT SOUTH							
9 GAMMON AVE SE							
ATLANTA, GA 30315	58-1956686	501(C)3	30,000.	0.			GENERAL OPERATING SUPPORT
,			1,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
PROJECT SOUTH							
9 GAMMON AVE SE							
ATLANTA, GA 30315	58-1956686	501(C)3	10,000.	0.			PROJECT SUPPORT FOR GCCLP

Part II Continuation of Grants and Other	er Assistance to Dor	nestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	
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PROJECT SOUTH							
9 GAMMON AVE SE							
ATLANTA, GA 30315	58-1956686	501(C)3	25,000.	0.			PROJECT SUPPORT FOR GCCLP
PROTEUS FUND INC.							PROJECT SUPPORT TO
15 RESEARCH DRIVE, SUITE B							FURTHER ORGANIZATIONAL
AMHERST, MA 01002	04-3243004	501(C)3	50,000.	0.			MISSION
PROTEUS FUND INC.							
15 RESEARCH DRIVE, SUITE B							PROJECT SUPPORT FOR
AMHERST, MA 01002	04-3243004	501(C)3	10,000.	0.			HORIZON FORUM
			, ,	-			
PROTEUS FUND INC.							
15 RESEARCH DRIVE, SUITE B							PROJECT SUPPORT FOR RISE
AMHERST, MA 01002	04-3243004	501(C)3	25,000.	0.			TOGETHER FUND
D-17-1-2 G0-17-17-1							
PUBLIC COUNSEL							
610 SOUTH ARDMORE AVENUE	23-7105149	501/C\3	40.000	0.			GENERAL OPERATING SUPPORT
LOS ANGELES, CA 90005	23-7103149	501(C/3	40,000.	0.			GENERAL OPERATING SUPPORT
PUEBLO UNIDO CDC							
78150 CALLE TAMPICO SUITE 214							
LA QUINTA, CA 92253	26-3547211	501(C)3	30,000.	0.			CAPACITY BUILDING
DUEDIO UNIDO ADA							
PUEBLO UNIDO CDC 78150 CALLE TAMPICO SUITE 214							
LA QUINTA, CA 92253	26-3547211	501/C\3	50,000.	0.			GENERAL OPERATING SUPPORT
TA QUINTA, CA 72233	20 3347211	301(0/3	30,000.	· ·			GENERAL CLERATING BOLLOKI
PUEBLO UNIDO CDC							
78150 CALLE TAMPICO SUITE 214							
LA QUINTA, CA 92253	26-3547211	501(C)3	140,000.	0.			CAPACITY BUILDING
DITERIO INTRO CDC							
PUEBLO UNIDO CDC 78150 CALLE TAMPICO SUITE 214							
LA QUINTA, CA 92253	26-3547211	501(C)3	12,000.	0.			GENERAL OPERATING SUPPORT
	1 20 334/211	P = 1 C / S	12,000.	l	l .	1	PERENTIAL OFFICE OFFICE

Part II Continuation of Grants and Other	Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)								
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
PUEBLO UNIDO CDC									
78150 CALLE TAMPICO SUITE 214									
LA QUINTA, CA 92253	26-3547211	501(C)3	12,000.	0.			GENERAL OPERATING SUPPORT		
REAL FOOD AMERICA									
4922 OAKCREST DR							PROJECT SUPPORT FOR FOUR		
FAIRFAX, VA 22030	82-3635712	501(C)3	10,000.	0.			DIRECTIONS		
REAL FOOD AMERICA 4922 OAKCREST DR							PROJECT SUPPORT FOR FOUR		
FAIRFAX, VA 22030	82-3635712	501(C)3	15,000.	0.			DIRECTIONS		
	02 0000722	001(0)0	25,555.	•			21120110110		
RESILIENCE PARTNERS									
4455 SOUTH KING DRIVE SUITE 101(B)									
CHICAGO, IL 60653	47-3136024	501(C)3	20,000.	0.			PROJECT SUPPORT FOR CAICC		
RESIST									
PO BOX 301240							PROJECT SUPPORT FOR NE		
BOSTON, MA 02130	04-2433182	501(C)3	50,000.	0.			FARMERS OF COLOR NETWORK		
			,						
RESOURCE GENERATION									
1216 BROADWAY, 2ND FL									
NEW YORK, NY 10001	27-1847561	501(C)3	10,000.	0.			GENERAL OPERATING SUPPORT		
RESOURCE GENERATION									
1216 BROADWAY, 2ND FL									
NEW YORK, NY 10001	27-1847561	501(C)3	4,000.	0.			GENERAL OPERATING SUPPORT		
RESOURCES FOR ORGANIZING AND									
SOCIAL CHANGE - PO BOX 2444 -				_			PROJECT SUPPORT FOR		
AUGUSTA, ME 04338	01-0353747	501(C)3	7,500.	0.			SUNLIGHT MEDIA COLLECTIVE		
RESOURCES FOR ORGANIZING AND									
SOCIAL CHANGE - PO BOX 2444 -							PROJECT SUPPORT FOR		
AUGUSTA, ME 04338	01-0353747	501(C)3	15,000.	0.			SUNLIGHT MEDIA COLLECTIVE		

Part II Continuation of Grants and Other	Assistance to Do	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	ruge
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RESOURCES LEGACY FUND							
555 CAPITOL MALL, SUITE 1095							PROJECT SUPPORT FOR BEARS
SACRAMENTO, CA 95814	95-4703838	501(C)3	10,000.	0.			EARS INTER-TRIBAL
RESOURCES LEGACY FUND							
555 CAPITOL MALL, SUITE 1095							PROJECT SUPPORT FOR BEARS
SACRAMENTO, CA 95814	95-4703838	501(C)3	15,000.	0.			EARS INTER-TRIBAL
DEMILINATING GOMEOU G I INTERP							
RETHINKING SCHOOLS LIMITED 6737 W WASHINGTON ST. SUITE 3249							
MILWAUKEE, WI 53214	39-1696524	501(C)3	10,000.	0.			GENERAL OPERATING SUPPORT
RIGHT TO THE CITY ALLIANCE							PROJECT SUPPORT FOR
388 ATLANTIC AVE STE 2							COMMUNITY POWER
BROOKLYN, NY 11217	94-3462187	501(C)3	40,000.	0.			COLLECTIVE
RIGHT TO THE CITY ALLIANCE							
388 ATLANTIC AVE STE 2							PROJECT SUPPORT FOR HOMES
BROOKLYN, NY 11217	94-3462187	501(C)3	145,000.	0.			FOR ALL CA
RUNNING STRONG							
8301 RICHMOND HIGHWAY							PROJECT SUPPORT FOR BRAVE
ALEXANDRIA, VA 22309	54-1594578	501(C)3	15,000.	0.			HEART SOCIETY
RUNNING STRONG							
8301 RICHMOND HIGHWAY							PROJECT SUPPORT FOR BRAVE
ALEXANDRIA, VA 22309	54-1594578	501(C)3	10,000.	0.			HEART SOCIETY
DUDDITING GEDONG							
RUNNING STRONG							DDO TECH CUDDODE BOD DDATE
8301 RICHMOND HIGHWAY	54-1594578	501 (C) 3	12 000	0.			PROJECT SUPPORT FOR BRAVE HEART SOCIETY
ALEXANDRIA, VA 22309	34-1334376	501(0/3	12,000.	<u> </u>			HEART SOCIETI
RUNNING STRONG							
8301 RICHMOND HIGHWAY							PROJECT SUPPORT FOR BRAVE
ALEXANDRIA, VA 22309	54-1594578	501(C)3	10,000.	0.			HEART SOCIETY

Part II Continuation of Grants and Other	Assistance to Dor	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	
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SACRED PIPE RESOURCE CENTER							
400 W. MAIN							
MANDAN, ND 58554	26-1088259	501(C)3	25,000.	0.			GENERAL OPERATING SUPPORT
SAJE (STRATEGIC ACTIONS FOR A JUST ECONOMY) - 152 W. 32ND STREET -	02 1226002	F01 (G) 2	201 000				
LOS ANGELES, CA 90007	93-1226092	501(C)3	201,000.	0.			CAPACITY BUILDING
SAJE (STRATEGIC ACTIONS FOR A JUST ECONOMY) - 152 W. 32ND STREET - LOS ANGELES, CA 90007	93-1226092	501(C)3	70,000.	0.			GENERAL OPERATING SUPPORT
202 12.02222, 011 2000.	30 1110031	001(0)0	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	· ·			
SEVENTH GENERATION FUND FOR INDIGENOUS PEOPLES - PO BOX 4569 - ARCATA, CA 95518	68-0027247	501(C)3	10,000.	0.			PROJECT SUPPORT TO HO'OPAE PONO PEACE
SEVENTH GENERATION FUND FOR							
INDIGENOUS PEOPLES - PO BOX 4569 -							PROJECT SUPPORT TO
ARCATA, CA 95518	68-0027247	501(C)3	15,000.	0.			HO'OPAE PONO PEACE
SEVENTH GENERATION FUND FOR INDIGENOUS PEOPLES - PO BOX 4569 - ARCATA, CA 95518	68-0027247	501(C)3	3,000.	0.			PROJECT SUPPORT FOR FLICKER FUND
SEVENTH GENERATION FUND FOR INDIGENOUS PEOPLES - PO BOX 4569 -	60 0000045	E04 (G) 2	10.000				PROJECT SUPPORRT FOR SOVEREIGN BODIES
ARCATA, CA 95518	68-0027247	501(C)3	10,000.	0.			INSTITUTE
SEVENTH GENERATION FUND FOR INDIGENOUS PEOPLES - PO BOX 4569 - ARCATA, CA 95518	68-0027247	501(C)3	5,000.	0.			PROJECT SUPPORT FOR THRIVING WOMEN
SHOWING UP FOR RACIAL JUSTICE EDUCATION FUND - PO BOX 1053 - BUFFALO, NY 14205	82-2309274	501(C)3	7,500.	0.			GENERAL OPERATING SUPPORT

Part II Continuation of Grants and Other	Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)								
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
SHUNPIKE ARTS COLLECTIVE 815 SEATTLE BOULEVARD S STE 215 SEATTLE, WA 98134	91-2138554	501(C)3	14,000.	0.			PROJECT SUPPORT FOR LYRIC		
SIERRA HEALTH FOUNDATION CENTER FOR - 1321 GARDEN HWY - SACRAMENTO, CA 95833	45-5282243	501(C)3	10,000.	0.			PROJECT SUPPORT FOR KIN		
SISTER SONG INC. 1237 RALPH DAVID ABERNATHY BLVD ATLANTA, GA 30310	51-0544927	501(C)3	3,000.	0.			GENERAL OPERATING SUPPORT		
SISTER SONG INC. 1237 RALPH DAVID ABERNATHY BLVD ATLANTA, GA 30310	51-0544927	501(C)3	7,000.	0.			GENERAL OPERATING SUPPORT		
SLOW MONEY NC 424 JOHNNY BURKE ROAD PITTSBORO, NC 27312	82-2178863	501(C)3	25,000.	0.			PROJECT SUPPORT TO FURTHER ORGANIZATIONAL MISSION		
SOCIAL & ENVIRONMENTAL ENTREPRENEURS - 23532 CALABASAS ROAD - CALABASAS, CA 91302	95-4116679	501(C)3	12,000.	0.			PROJECT SUPPORT FOR LIBRE		
SOCIAL & ENVIRONMENTAL ENTREPRENEURS - 23532 CALABASAS ROAD - CALABASAS, CA 91302	95-4116679	501(C)3	15,000.	0.			PROJECT SUPPORT FOR RECLAIM OUR POWER		
SOCIAL IMPACT MEDIA AWARDS SIMA 632 WESTBOURNE DR W HOLLYWOOD, CA 90069	46-2836025	501(C)3	12,500.	0.			PROJECT SUPPORT TO FURTHER ORGANIZATIONAL MISSION		
SOCIAL JUSTICE FUND NORTHWEST 1904 3RD AVE STE 806 SEATTLE, WA 98101	91-1036971	501(C)3	10,000.	0.			GENERAL OPERATING SUPPORT		

Part II Continuation of Grants and Other	Assistance to Do	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SOCIAL JUSTICE FUND NORTHWEST							
1904 3RD AVE STE 806							
SEATTLE, WA 98101	91-1036971	501(C)3	10,000.	0.			GENERAL OPERATING SUPPORT
SOCIAL JUSTICE LEARNING INSTITUTE 600 CENTINELA AVE.							
INGLEWOOD, CA 90302	26-3413373	501(C)3	12,000.	0.			GENERAL OPERATING SUPPORT
SOCIAL JUSTICE LEARNING INSTITUTE 600 CENTINELA AVE.							
INGLEWOOD, CA 90302	26-3413373	501(C)3	70,000.	0.			GENERAL OPERATING SUPPORT
SOGOREA TE' LAND TRUST 2501 HARRISON ST OAKLAND, CA 94612	82-4415931	501(C)3	15,000.	0.			PROJECT SUPPORT TO FURTHER ORGANIZATIONAL MISSION
SOLACE CRISIS TREATMENT CENTER 6601 VALENTINE WAY							PROJECT SUPPORT FOR WOMEN'S JEWELRY
SANTA FE, NM 87507	85-0242274	501(C)3	8,000.	0.			COLLECTIVE
SONRISAS, INC. 669 SANDMILL ROAD CHESHIRE, MA 01225	20-4405556	501(C)3	25,000.	0.			PROJECT SUPPORT TO FURTHER ORGANIZATIONAL MISSION
SOUL FIRE FARM INSTITUTE INC. 1972 NY HIGHWAY 2 PETERSBURG, NY 12138	47-2549969	501(C)3	50,000.	0.			PROJECT SUPPORT FOR NE FARMERS OF COLOR
SOUTHEAST ALASKA INDIGENOUS TRANSBOUNDARY COMMISSI - P.O. BOX 695 - WRANGELL, AK 99929	47-5389141	501(C)3	10,000.	0.			GENERAL OPERATING SUPPORT
SOUTHEAST ALASKA INDIGENOUS TRANSBOUNDARY COMMISSI - P.O. BOX 695 - WRANGELL, AK 99929	47-5389141	501(C)3	15,000.	0.			GENERAL OPERATING SUPPORT

Part II Continuation of Grants and Other	Assistance to Do	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SOUTHEAST ASIAN COMMUNITY ALLIANCE							
840 N. BROADWAY, #203E							
LOS ANGELES, CA 90012	45-2156435	501(C)3	12,000.	0.			GENERAL OPERATING SUPPORT
SOUTHERN CONSERVATION PARTNERS INC							
PO BOX 33222							PROJECT SUPPORT FOR
RALEIGH, NC 27636-3222	47-2181285	501(C)3	50,000.	0.			EARTHSEED LAND COLLECTIVE
SOUTHERN VISION ALLIANCE							
PO BOX 51698							PROJECT SUPPORT FOR
DURHAM, NC 27717	61-1639641	501(C)3	10,000.	0.			IGNITE
SOUTHERN VISION ALLIANCE							
PO BOX 51698							
DURHAM, NC 27717	61-1639641	501(C)3	17,000.	0.			GENERAL OPERATING SUPPORT
SOUTHERNERS ON NEW GROUND							
PO BOX 11250							PROJECT SUPPORT FOR NC
ATLANTA, GA 30310	61-1274170	501 (C) 3	7,000.	0.			CHAPTER
minimum, on sosio	01 12/41/0	301(0/3	7,000.	· ·			
SOUTHERNERS ON NEW GROUND							PROJECT SUPPORT TO
PO BOX 11250							FURTHER ORGANIZATIONAL
ATLANTA, GA 30310	61-1274170	501(C)3	10,000.	0.			MISSION
SOUTHERNERS ON NEW GROUND							
PO BOX 11250							PROJECT SUPPORT FOR NC
ATLANTA, GA 30310	61-1274170	501(C)3	3,000.	0.			CHAPTER
SOUTHWEST ORGANIZING PROJECT							PROJECT SUPPORT TO
211 10TH ST SW							FURTHER ORGANIZATIONAL
ALBUQUERQUE, NM 87102	85-0368743	501(C)3	5,000.	0.			MISSION
	00 0000740		3,000.	· ·			
SOUTHWEST RESEARCH & INFORMATION							
CENTER - PO BOX 4524 -							PROJECT SUPPORT FOR
ALBUQUERQUE, NM 87106	23-7159949	501(C)3	4,000.	0.			ABUELAS MEDINICA CO-OP

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)										
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
SOUTHWEST RESEARCH & INFORMATION CENTER - PO BOX 4524 - ALBUQUERQUE, NM 87106	23-7159949	501(C)3	12,500.	0.			PROJECT SUPPORT FOR MASE			
SOUTHWEST RESEARCH & INFORMATION CENTER - PO BOX 4524 - ALBUQUERQUE, NM 87106	23-7159949	501(C)3	15,000.	0.			PROJECT SUPPORT FOR MASE			
SOUTHWEST RESEARCH & INFORMATION CENTER - PO BOX 4524 - ALBUQUERQUE, NM 87106	23-7159949	501(C)3	4,000.	0.			PROJECT SUPPORT FOR NUCLEAR ISSUES STUDY GROUP			
SOUTHWEST RESEARCH & INFORMATION CENTER - PO BOX 4524 - ALBUQUERQUE, NM 87106	23-7159949	501(C)3	5,000.	0.			PROJECT SUPPORT FOR HOPE			
SOUTHWEST RESEARCH & INFORMATION CENTER - PO BOX 4524 - ALBUQUERQUE, NM 87106	23-7159949	501(C)3	25,000.	0.			PROJECT SUPPORT FOR HONOR OUR PUEBLO			
SPARK REPRODUCTIVE JUSTICE NOW INC P.O. BOX 89210 - ATLANTA, GA 30312	58-1872316	501(C)3	10,000.	0.			GENERAL OPERATING SUPPORT			
SPIRIT OF THE SUN 1290 NORTH WILLIAMS STREET DENVER, CA 80218	03-0442292	501(C)3	5,000.	0.			GENERAL OPERATING SUPPORT			
SPIRIT OF THE SUN 1290 NORTH WILLIAMS STREET DENVER, CA 80218	03-0442292	501(C)3	15,000.	0.			GENERAL OPERATING SUPPORT			
STANDING ROCK COMMUNITY DEVELOPMENT CORPORATION - P.O. BOX 430 - FORT YATES, ND 58538	37-1845443	501(C)3	15,000.	0.			PROJECT SUPPORT FOR SUNKAWAKAN TA WOUNSPE			

Part II Continuation of Grants and Other	Assistance to Do	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
STARTING OVER INC.							
1390 WEST 6TH STREET							
CORONA, CA 92882	90-0455003	501(C)3	12,000.	0.			GENERAL OPERATING SUPPORT
STARTING OVER INC.							
1390 WEST 6TH STREET							
CORONA, CA 92882	90-0455003	501(C)3	40,000.	0.			GENERAL OPERATING SUPPORT
CHARMAN OVER THE							
STARTING OVER INC. 1390 WEST 6TH STREET							
CORONA, CA 92882	90-0455003	501/0\3	30,000.	0.			CAPACITY BUILDING
CORONA, CA 92002	30-0433003	501(0/5	30,000.	0.			CAPACITI BUILDING
STATE DEMOCRACY PROJECT							PROJECT SUPPORT TO
1211 CONNECTICUT AVE. NW SUITE 600							FURTHER ORGANIZATIONAL
WASHINGTON, DC 20036	52-2003442	501(C)3	30,000.	0.			MISSION
,			1	-			
SUSTAINABLE MARKETS FOUNDATION							
45 W 36TH ST, 6TH FLOOR							PROJECT SUPPORT FOR THE
NEW YORK, NY 10018	13-4188834	501(C)3	10,000.	0.			DEBT COLLECTIVE
TENANTS TOGETHER							
474 VALENCIA STREET, SUITE 156	06 1555015	501/7/2	45.000				
SAN FRANCISCO, CA 94103-5926	26-1777917	501(C)3	45,000.	0.			CAPACITY BUILDING
TENANTS TOGETHER							
474 VALENCIA STREET, SUITE 156							
SAN FRANCISCO, CA 94103-5926	26-1777917	501(C)3	12,000.	0.			GENERAL OPERATING SUPPORT
DIN TRIMEIBOO, CII 31103 3320	20 1777317	301(0/3	12,000.	•			CHAMIN OF MARITIMO BOTTOM
TENANTS TOGETHER							
474 VALENCIA STREET, SUITE 156							
SAN FRANCISCO, CA 94103-5926	26-1777917	501(C)3	100,000.	0.			GENERAL OPERATING SUPPORT
TEWA WOMEN UNITED							
PO BOX 397	05 040005	501 (7) 2		_			
SANTA CRUZ, NM 87567	85-0480836	501(C)3	30,000.	0.			GENERAL OPERATING SUPPORT

Part II Continuation of Grants and Other	Assistance to Do	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	<u> </u>
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE RUCKUS SOCIETY PO BOX 28741 OAKLAND, CA 94604	81-0504390	501(C)3	30,000.	0.			PROJECT SUPPORT FOR BLACK LAND AND POWER REPARATIONS SUMMER
THE RUCKUS SOCIETY PO BOX 28741 OAKLAND, CA 94604	81-0504390	501(C)3	20,000.	0.			PROJECT SUPPORT FOR BLLI
THE RUCKUS SOCIETY PO BOX 28741 OAKLAND, CA 94604	81-0504390	501(C)3	5,000.	0.			PROJECT SUPPORT FOR BLACKOUT COLLECTIVE
THE RUCKUS SOCIETY PO BOX 28741 OAKLAND, CA 94604	81-0504390	501(C)3	7,000.	0.			GENERAL OPERATING SUPPORT
TIDES CANADA FOUNDATION SUITE 400 - 163 HASTINGS ST W VANCOUVER BC, CANADA	98-0404212	501(C)3	50,916.	0.			PROJECT SUPPORT FOR WINDROSE
TIDES CANADA FOUNDATION SUITE 400 - 163 HASTINGS ST W VANCOUVER BC, CANADA	98-0404212	501(C)3	10,000.	0.			PROJECT SUPPORT FOR AFC
TIDES CENTER SAN FRANCISCO PO BOX 399385 SAN FRANCISCO, CA 94139	94-3213100	501(C)3	1,500.	0.			PROJECT SUPPORT FOR MARIA
TIDES CENTER SAN FRANCISCO PO BOX 399385 SAN FRANCISCO, CA 94139	94-3213100	501(C)3	2,500.	0.			PROJECT SUPPORT FOR THE OPPORTUNITY AGENDA
TIDES CENTER SAN FRANCISCO PO BOX 399385 SAN FRANCISCO, CA 94139	94-3213100	501(C)3	1,000.	0.			PROJECT SUPPORT FOR OCEJEF

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)										
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
TIDES CENTER SAN FRANCISCO PO BOX 399385 SAN FRANCISCO, CA 94139	94-3213100	501(C)3	12,000.	0.			PROJECT SUPPORT FOR SOLIDAIRE			
TIDES FOUNDATION SAN FRANCISCO PO BOX 399389 SAN FRANCISCO, CA 94139-9389	51-0198509	501(C)3	15,000.	0.			PROJECT SUPPORT FOR ANPL			
TIDES FOUNDATION SAN FRANCISCO PO BOX 399389 SAN FRANCISCO, CA 94139-9389	51-0198509	501(C)3	10,000.	0.			PROJECT SUPPORT FOR CTR			
TIDES FOUNDATION SAN FRANCISCO PO BOX 399389 SAN FRANCISCO, CA 94139-9389	51-0198509	501(C)3	10,000.	0.			PROJECT SUPPORT FOR CTR			
TIDES FOUNDATION SAN FRANCISCO PO BOX 399389 SAN FRANCISCO, CA 94139-9389	51-0198509	501(C)3	5,000.	0.			PROJECT SUPPORT FOR CTR			
TIDES FOUNDATION SAN FRANCISCO PO BOX 399389 SAN FRANCISCO, CA 94139-9389	51-0198509	501(C)3	500.	0.			PROJECT SUPPORT FOR FRRC			
TIDES FOUNDATION SAN FRANCISCO PO BOX 399389 SAN FRANCISCO, CA 94139-9389	51-0198509	501(C)3	1,000.	0.			PROJECT SUPPORT FOR FRRC			
TIDES FOUNDATION SAN FRANCISCO PO BOX 399389 SAN FRANCISCO, CA 94139-9389	51-0198509	501(C)3	5,000.	0.			PROJECT SUPPORT FOR TRANS			
TIDES FOUNDATION SAN FRANCISCO PO BOX 399389 SAN FRANCISCO, CA 94139-9389	51-0198509	501(C)3	25,000.	0.			PROJECT SUPPORT FOR FRRC ED FUND			

Part II Continuation of Grants and Other	Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)									
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
TIME FOR CHANGE FOUNDATION PO BOX 25040 SAN BERNARDINO, CA 92406	52-2405277	501(C)3	12,000.	0.			GENERAL OPERATING SUPPORT			
TIME FOR CHANGE FOUNDATION PO BOX 25040 SAN BERNARDINO, CA 92406	52-2405277	501(C)3	12,000.	0.			GENERAL OPERATING SUPPORT			
TIME FOR CHANGE FOUNDATION PO BOX 25040 SAN BERNARDINO, CA 92406	52-2405277	501(C)3	30,000.	0.			CAPACITY BUILDING			
TIME FOR CHANGE FOUNDATION PO BOX 25040 SAN BERNARDINO, CA 92406	52-2405277	501(C)3	50,000.	0.			GENERAL OPERATING SUPPORT			
TODEC LEGAL CENTER (TODEC) PO BOX 1733 PERRIS, CA 92570	33-0711527	501(C)3	12,000.	0.			GENERAL OPERATING SUPPORT			
TODEC LEGAL CENTER (TODEC) PO BOX 1733 PERRIS, CA 92570	33-0711527	501(C)3	40,000.	0.			GENERAL OPERATING SUPPORT			
TODEC LEGAL CENTER (TODEC) PO BOX 1733 PERRIS, CA 92570	33-0711527	501(C)3	30,000.	0.			CAPACITY BUILDING			
TREES FOUNDATION PO BOX 2202 REDWAY, CA 95560	68-0259810	501(C)3	6,000.	0.			PROJECT SUPPORT TO FURTHER ORGANIZATIONAL MISSION			
TREES FOUNDATION PO BOX 2202 REDWAY, CA 95560	68-0259810	501(C)3	15,000.	0.			PROJECT SUPPORT TO FURTHER ORGANIZATIONAL MISSION			

Part II Continuation of Grants and Other	Assistance to Dor	nestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	
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UBUNTU INSTITUTE OF LEARNING							PROJECT SUPPORT TO
127 W. 7TH STREET, SUITE D							FURTHER ORGANIZATIONAL
LONG BEACH, CA 90813	83-0726312	501 (C) 3	12,000.	0.			MISSION
UNITED AMERICAN INDIAN	03 0720312	301(0/3	12,000.	· ·			
INVOLVEMENT, INC 1125 W. 6TH							
STREET SUITE 103 - LOS ANGELES, CA							
90017	95-2917933	501(C)3	15,000.	0.			GENERAL OPERATING SUPPORT
UNITED AMERICAN INDIAN							
INVOLVEMENT, INC 1125 W. 6TH							
STREET SUITE 103 - LOS ANGELES, CA							
90017	95-2917933	501(C)3	10,000.	0.			GENERAL OPERATING SUPPORT
			,				
UNITED FOR RESPECT EDUCATION FUND							
81 PROSPECT STREET							
BROOKLYN, NY 11201	13-3885314	501(C)3	10,000.	0.			GENERAL OPERATING SUPPORT
UNITED FOR RESPECT EDUCATION FUND							
81 PROSPECT STREET							
BROOKLYN, NY 11201	13-3885314	501(C)3	2,500.	0.			GENERAL OPERATING SUPPORT
UNITED FOR RESPECT EDUCATION FUND							
81 PROSPECT STREET				_			
BROOKLYN, NY 11201	13-3885314	501(C)3	15,000.	0.			GENERAL OPERATING SUPPORT
INTERNAL TARIAN ERIDA							
UNITED NATIONAL INDIAN TRIBAL							
YOUTH INC 953 E JUANITA AVE,	73-1010390	E01/G) 2	15 000	0.			GENERAL ORERAMING GURRORM
SUITE C - MESA, AZ 85204	73-1010390	501(0)3	15,000.	٠.			GENERAL OPERATING SUPPORT
UNITED NATIONAL INDIAN TRIBAL							
YOUTH INC 953 E JUANITA AVE,							
SUITE C - MESA, AZ 85204	73-1010390	501(C)3	17,000.	0.			GENERAL OPERATING SUPPORT
	73 1010350		17,000.	<u> </u>			DELIZIONE OF ENGLISHED BOTTOKT
UNITED TRIBES OF BRISTOL BAY							
PO BOX 1252							
DILLINGHAM, AK 99576	30-0785358	501(C)3	10,000.	0.			GENERAL OPERATING SUPPORT

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)										
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UNITED TRIBES OF BRISTOL BAY PO BOX 1252										
DILLINGHAM, AK 99576	30-0785358	501(C)3	15,000.	0.			GENERAL OPERATING SUPPORT			
UNITED WAY OF SOUTHERN CAMERON COUNTY - 634 E LEVEE ST - BROWNSVILLE, TX 78520	74-1241385	501(C)3	12,000.	0.			PROJECT SUPPORT FOR LAS			
UNIVERSITY OF COLORADO FOUNDATION 1330 GRANDVIEW AVE BOULDER, CO 80302	84-6049811	501(C)3	15,000.	0.			PROJECT SUPPORT FOR FIRST PEOPLES WORLDWIDE			
UNIVERSITY OF COLORADO FOUNDATION 1330 GRANDVIEW AVE BOULDER, CO 80302	84-6049811	501(C)3	9,500.	0.			PROJECT SUPPORT FOR FIRST PEOPLES WORLDWIDE			
URBAN HABITAT 2000 FRANKLIN STREET OAKLAND, CA 94612	20-0275424	501(C)3	40,000.	0.			PROJECT SUPPORT TO FURTHER ORGANIZATIONAL MISSION			
URBAN HABITAT 2000 FRANKLIN STREET OAKLAND, CA 94612	20-0275424	501(C)3	170,000.	0.			CAPACITY BUILDING			
URGENT ACTION FUND FOR WOMEN'S HUMAN RIGHTS - 660 13TH STREET - OAKLAND, CA 94612	03-0419743	501(C)3	10,000.	0.			PROJECT SUPPORT FOR COVID			
URGENT ACTION FUND FOR WOMEN'S HUMAN RIGHTS - 660 13TH STREET - OAKLAND, CA 94612	03-0419743	501(C)3	5,000.	0.			GENERAL OPERATING SUPPORT			
UTAH DINE BIKEYAH 211 E 300 SOUTH, STE 211 SALT LAKE CITY, UT 84111	61-1729917	501(C)3	17,000.	0.			GENERAL OPERATING SUPPORT			

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)										
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IIMAII DINE DIVEVALI										
UTAH DINE BIKEYAH										
211 E 300 SOUTH, STE 211 SALT LAKE CITY, UT 84111	61-1729917	501(C)3	15,000.	0.			GENERAL OPERATING SUPPORT			
BIBLI BIME CITT, OT 04111	01 1723317	301(0/3	13,000.	· ·			CHARAM CIRATING BOTTOKI			
VERMONT WORKER'S CENTER										
179 S. WINOOSKI AVE., SUITE 202										
BURLINGTON, VT 05401	20-0163176	501(C)3	10,000.	0.			GENERAL OPERATING SUPPORT			
WESTERN NATIVE VOICE										
PO BOX 1018							PROJECT SUPPORRT FOR ND			
BILLINGS, MT 59103	45-3771715	501(C)3	15,000.	0.			NATIVE VOTE			
WESTERN NATIVE VOICE										
PO BOX 1018	45 2554545	E01/G\2	15 000	•						
BILLINGS, MT 59103	45-3771715	501(C)3	17,000.	0.			GENERAL OPERATING SUPPORT			
WESTERN NATIVE VOICE										
PO BOX 1018										
BILLINGS, MT 59103	45-3771715	501(C)3	15,000.	0.			GENERAL OPERATING SUPPORT			
EIIIINOB, III 83108	13 3771713	301(0/3	13,000.	•						
WESTERN STATES CENTER										
PO BOX 40305										
PORTLAND, OR 97240	93-0952137	501(C)3	200,000.	0.			GENERAL OPERATING SUPPORT			
WESTERN WASHINGTON NATIVE AMERICAN										
ED. CONSORTIUM - PO BOX 494 -										
PUYALLUP, WA 98371	91-1285812	501(C)3	15,000.	0.			GENERAL OPERATING SUPPORT			
WESTERN WASHINGTON NATIVE AMERICAN										
ED. CONSORTIUM - PO BOX 494 -	01 1005010	E01/G\2	10.000	•						
PUYALLUP, WA 98371	91-1285812	DUT(C)3	10,000.	0.			GENERAL OPERATING SUPPORT			
WHITTER WAN FAMILD ON MENIURAT										
WHITESWAN ENVIRONMENTAL 2348 LUMMI VIEW DRIVE										
BELLINGHAM, WA 98226	82-4293428	501(C)3	15,000.	0.			GENERAL OPERATING SUPPORT			
	32 1270120			••						

Part II Continuation of Grants and Other	Assistance to Do	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WICONI WAWOKIYA, INC.							
NA							
FORT THOMPSON, SD 57339	46-0354592	501(C)3	10,000.	0.			GENERAL OPERATING SUPPORT
WIND RIVER FOUNDATION INC							
PO BOX 4550							PROJECT SUPPORT FOR WHITE
JACKSON, WY 83001-4550	82-1567960	501(C)3	15,000.	0.			BUFFALO RECOVERY
WOMEN'S VOICES FOR THE EARTH							
PO BOX 8743							
MISSOULA, MT 59807	81-0501011	501(C)3	7,500.	0.			GENERAL OPERATING SUPPORT
WODED MDUGE EDUCATIONAL CEDUTOEC							
WORLD TRUST EDUCATIONAL SERVICES							
INC 2000 FRANKLIN ST - OAKLAND, CA 94612	94-3362739	501/C\3	10,000.	0.			GENERAL OPERATING SUPPORT
- T-1012	J4 3302733	301(0/3	10,000.	· ·			GENERAL OFERATING BUFFORT
			<u> </u>				

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
Part IV Supplemental Information. Provide the information	required in Part I, line	e 2; Part III, columr	n (b); and any other ad	Iditional information.	
PART I, LINE 2:					
GRANT SELECTION TEAM DETERMINES	THAT RECIPI	ENTS ARE	QUALIFIED T	O RECEIVE	
GRANTS FOR CHARITABLE PURPOSES. 1	PROGRAM OFF	TCERS VER	ТЕУ ТНАТ СВ	ANTS WERE	
USED FOR APPROPRIATE CHARITABLE 1	PURPOSES BA	SED ON PRO	OGRAMMATIC .	AND	
FINANCIAL REPORTS GRANTEES PROVI	DE TO CCF.	MANY GRAN	TEES ARE GR	OUPS THAT	
THE PROGRAM OFFICERS HAVE HAD KNO	OWLEDGE OF	OVER MANY	YEARS. PRO	GRAM	
			TEE ACTIVIT		

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.

► Attach to Form 990.

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

Internal Revenue Service Name of the organization

Department of the Treasury

COMMON COUNSEL FOUNDATION

Employer identification number

OMB No. 1545-0047

Open to Public

Inspection

94-3214166

Pa	art I Questions Regarding Compensation			
		[Yes	No
1 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			l
	Travel for companions Payments for business use of personal residence			l
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (such as maid, chauffeur, chef)			l
				l
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	1b		
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 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 X 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			l
	organization or a related organization:			
а	Receive a severance payment or change-of-control payment?	4a		X
b	Participate in or receive payment from a supplemental nonqualified retirement plan?	4b		X
С	Participate in or receive payment from an equity-based compensation arrangement?	4c		X
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	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:			37
	The organization?	5a		X
b	Any related organization?	5b		
_	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:			v
	The organization?	6a		X
b	Any related organization?	6b		
_	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	_		v
_	not described on lines 5 and 6? If "Yes," describe in Part III	7		X
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			v
_	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		X
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53.4958-6(c)?	9		i

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

Schedule J (Form 990) 2020

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-MI	SC compensation	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns	(F) Compensation
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation	Deneiits	(B)(i)-(D)	in column (B) reported as deferred on prior Form 990
(1) PEGGY SAIKA	(i)	150,000.	0.	0.	0.	514.		0.
EXECUTIVE DIRECTOR	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii) (i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i) (ii)							
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	(i) (ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							<u> </u>

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 O

Internal Revenue Service

(Form 990 or 990-EZ)

Department of the Treasury

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.

2020 Open to Public Inspection

OMB No. 1545-0047

Name of the organization

COMMON COUNSEL FOUNDATION

Employer identification number 94-3214166

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: AND STRATEGIC PHILANTHROPIC ADVISING FOR CLIENT MEMBER FUNDS AND MANAGES PROJECTS FOCUSED ON ORGANIZATIONAL DEVELOPMENT, LEADERSHIP SUSTAINABILITY AND DONOR EDUCATION. PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: FORM 990, DONOR EDUCATION. FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS: 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 ECONOMIC AND ECOLOGICAL CHALLENGES. SECOND, COMMON COUNSEL SOCIAL, 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 AND TO ENSURE HEALTH AND EQUITY FOR EVERYONE. THEMSELVES,

AS COMMON COUNSEL EMBARKS ON ITS 31ST YEAR, WE WILL CONTINUE TO STAY

STEADFAST AS THE HUB OF PROGRESSIVE PUBLIC PHILANTHROPY ON THE WEST

Name of the organization **Employer identification number** COMMON COUNSEL FOUNDATION 94-3214166 COAST AND BEYOND, WHILE ENTERING INTO A PHASE OF BOLD VISIONING FOR THE FUTURE. FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS: 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. FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMENTS: THE KNOWLEDGE AND EXPERTISE OF CCF'S STAFF. CCF'S COMMUNITY ADVISORS AND STAFF ENSURE THAT THE ORGANIZATION IS 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, SECTION B, LINE 11B: 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.

Schedule O (Form 990 or 990-EZ) 2020	Page 2	
Name of the organization COMMON COUNSEL FOUNDATION	Employer identification number 94-3214166	
ALL TRUSTEES OF THE CCF BOARD HAVE READ AND UNDERSTOOD THE	CONFLICT OF	
INTEREST POLICY AS INDICATED BY THEIR SIGNATURE ON THE FOR	M. TRUSTEES ARE	
ASKED TO RENEW THEIR COMMITMENT TO THE POLICY AND TO RE-SI	GN THE FORM	
ANNUALLY AT THE FIRST MEETING OF THE BOARD OF TRUSTEES EACH YEAR.		
FORM 990, PART VI, SECTION B, LINE 15:		
THE BOARD OF TRUSTEES REVIEWS SALARY SURVEYS FROM VARIOUS	SOURCES,	
INCLUDING THE COUNCIL ON FOUNDATIONS AND EXPONENT PHILANTH	ROPY AND	
DETERMINES THE SALARY FOR THE CEO BASED ON COMPARABLE DATA	AND THE CEO'S	
EXPERIENCE. THE CEO FOLLOWS A SIMILAR PROCESS FOR DETERMIN	ING 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, SECTION C, LINE 19:		
CCF MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND		
FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC BY REQUEST.		
FORM 990, PART IX, LINE 11G, OTHER FEES:		
OTHER CONSULTANTS:		
PROGRAM SERVICE EXPENSES	626,393.	
MANAGEMENT AND GENERAL EXPENSES	109,814.	
FUNDRAISING EXPENSES	895.	
TOTAL EXPENSES	737,102.	
CLIENT SERVICES:		
PROGRAM SERVICE EXPENSES	673,048.	
MANAGEMENT AND GENERAL EXPENSES	0.	
FUNDRAISING EXPENSES	0.	

Name of the organization COMMON COUNSEL FOUNDATION	Employer identification number 94-3214166
TOTAL EXPENSES	673,048.
ADMIN SUPPORT:	
PROGRAM SERVICE EXPENSES	76,839.
MANAGEMENT AND GENERAL EXPENSES	15,204.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	92,043.
STRATEGIC COMMUNICATION:	
PROGRAM SERVICE EXPENSES	23,520.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	23,520.
HONORARIUM:	
PROGRAM SERVICE EXPENSES	88,300.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	88,300.
TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A	1,614,013.

Form **8868**

(Rev. January 2020)

Department of the Treasury Internal Revenue Service

Application for Automatic Extension of Time To File an Exempt Organization Return

► File a separate application for each return.

► Go to www.irs.gov/Form8868 for the latest information.

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the

OMB No. 1545-0047

forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits. Automatic 6-Month Extension of Time. Only submit original (no copies needed). All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns. Name of exempt organization or other filer, see instructions. Taxpayer identification number (TIN) Type or print 94-3214166 COMMON COUNSEL FOUNDATION File by the Number, street, and room or suite no. If a P.O. box, see instructions. due date for filina vour 1624 FRANKLIN STREET , NO. 1022 return. See instructions City, town or post office, state, and ZIP code. For a foreign address, see instructions. 94612 OAKLAND, CA Enter the Return Code for the return that this application is for (file a separate application for each return) Application Return Application Return Code Is For Code Is For Form 990 or Form 990-EZ 01 Form 990-T (corporation) 07 Form 1041-A Form 990-BL 02 08 Form 4720 (individual) 03 Form 4720 (other than individual) 09 10 Form 990-PF Ω4 Form 5227 Form 6069 Form 990-T (sec. 401(a) or 408(a) trust) 05 11 Form 990-T (trust other than above) 06 Form 8870 12 COMMON COUNSEL FOUNDATION • The books are in the care of \blacktriangleright 1624 FRANKLIN ST., STE 1022 - OAKLAND, CA 94612 Telephone No. ► (510) 834-2995 Fax No. If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . If this is for the whole group, check this box 🕨 🔲 . If it is for part of the group, check this box 🕨 📉 and attach a list with the names and TINs of all members the extension is for. I request an automatic 6-month extension of time until NOVEMBER 15, 2021, to file the exempt organization return for the organization named above. The extension is for the organization's return for: ► X calendar year 2020 or

b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and
estimated tax payments made. Include any prior year overpayment allowed as a credit.

b Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by
using EFTPS (Electronic Federal Tax Payment System). See instructions.

c Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment

, and ending

Initial return

LHA For Privacy Act and Paperwork Reduction Act Notice, see instructions.

If the tax year entered in line 1 is for less than 12 months, check reason:

3a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less

Form **8868** (Rev. 1-2020)

0.

Final return

За

instructions

tax year beginning

Change in accounting period

any nonrefundable credits. See instructions.