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Return of Private Foundation
or Section 4947(a)(1) Nonexempt Charitable Trust
Treated as a Private Foundation
tion may be able to use a copy of this return to satisfy state rep

OMB No 1545-0052 2005

		Revenue Se				ly be able to use a copy of				_		
	or c	alendar	year 2005,	, or tax year beg	inning				d ending			
	g Ch	eck all t	hat apply:	Initial retu	rn	Final return	Amended return	<u>! !</u>	Addres	s change		Name change
Ē	₹		Name of or	rganization						A Employ	er identific	ation number
F	Jse	the IRS	ł							i		
F	ζ' Ši'	abel.	SEVEN W	OODS FOUNDA	TION					91-	158549	93
U	Oth	erwise,				er if mail is not delivered t	o street address)	Room	/suite			r (see page 10 of
	NA.	rint								the inst	ructions)	
	ൃ≝ശ്രമ	type.	2260 611	ESTNUT STRE	בייתי כ	מרד שתדווי				142	51 223	2-3520
		PPC00		n, state, and ZIP co		011E 330			C If exe	mption applica	ation is	<u> </u>
	instr	uctions.	City or town	ii, state, and zir co						ing, check here		· · · · []
	7								_	reign organiza		
_	5 -			NCISCO, CA						reign organiza % test, check i		
			_			(c)(3) exempt private				mputation .		
_	N	Section 4	1947(a)(1) no	onexempt charitable	1	Other taxable pi			E If prh	rate foundatio	n status was	terminated [
ı	₽a	ir marke	t value of al	il assets at end	J Acco	ounting method: X C	ash Accrual		unde	r section 507(b)(1)(A), chec	k here . ►
,	🗃 f	year (froi	m Part II, co	ol. (c), line	ļ į	Other (specify)			F If the	foundation is	in a 60-mont	h termination
ċ	3 6	▶ \$	2	49,111.	(Part I	, column (d) must be or	n cash basis.)		unde	r section 507(b)(1)(B), checl	here .
ı	Part	Analy		enue and Expens	es	() 5					, , ,	bursements
-		(The to	otal of amoun	its in columns (b), (c), and	(a) Revenue and expenses per	(b) Net investment income	(c) Adjus Incor			charitable urposes
		(d) ma	y not necessa n (a) (see na	arily equal the amou ge 11 of the instruct	ints in ions))	books	llicome		HICOI	.,6	, ,	urposes i basis only)
-	T 4					73,000.		\forall			1.2.2.	
	1		cons, giros, grants,	, etc., received (attach sch foundation is not requ i Sch. B	reavie) .	/3,000.		+				· · · · · · · · · · · · · · · · · · ·
	2	Check >				F 140	4,613	 			 	STMT 1
	3		_	d temporary cash inves		5,142.	4,613	•				SIMI I
	4	Dıviden	ds and intere	est from securities		<u> </u>		+				
	5 a	Gross re	ents		<i>.</i>		· · · · · · · · · · · · · · · · · · ·		 ,,			*********
	b	Net renta	al income or (lo	oss)				 		EAEN	/FD	
<u>ب</u>	6 a	Net gain	or (loss) from	sale of assets not on l	ne 10		<u> </u>	-	£7		1 Kree (20)	16
ᇎ	b	Gross sa assets or	les price for all			-						8
Kevenue	7			ome (from Part IV, II	ne 2) .	,		1. 1	n B	00 9 6	2010	176
ž	8	-	-	algain					-1 "			E
	9			s · · · · · · · ·						20°C	LIT	
		Gross sale	es less returns			<u> </u>		1		GDE	4 404 3	
			vances · · ·	1			·	1				·
	1		st of goods solo					T				
	1			(attach schedule)		20 561		+				STMT 2
	11			h schedule)		28,561.	4 612	+-				SIMI Z
_	12			rough 11		106,703.	4,613	+				
	13			rs, directors, trustees,		NONE		+				
n	14			ries and wages						-	INIT	
Ú	15			oyee benefits					<u>STA</u>	CEIV	ÉD	
į				hedule)								
š	ь	Account	ing fees (att	ach schedule)		7,630.			- A F	R 282	010	
Ų	I			ees (attach schedule		1,995.		-	AP	KLU		
2	17	Interest						<u> </u>				
2	18			(see page 14 of the instn		3,026.			TP	RBRA	NUT	
Ē	19	•	•	schedule) and depl	[ÖGDE	1.4	
Š	20	•	•		ſ							
Č	1	•	•	and meetings								
2	21	•	-		[
<u>5</u> 0	22	_	•	nons	1	34.		†				
	23		•	ch schedule) STMT	į.	34.		+				
j	24	-	-	administrative exp		10 505		1				
Add lines 13 through 23					12,685.		 				20 757	
25 Contributions, gifts, grants paid				•	28,757.		 				<u>28,757.</u>	
	26	26 Total expenses and disbursements. Add lines 24 and 25				41,442.		 				<u> 28,757.</u>
	27	Subtract	line 26 from	n line 12:		!				ŀ		
				enses and disbursemen		65,261.		ļ				
	ь	Net inve	stment inco	me (if negative, ente	er -0-)		4,613.	ļ				
				(if negative, enter -				<u></u>		-0-		
-						_					_	00 DE

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

Form **990-PF** (2005)

	0-PF (2005) . Attached schedules and amounts in the	Beginning of year	-1585493 End	Page Page
Part I	Balance Sheets description column should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
1	Cash - non-interest-bearing			
2	Savings and temporary cash investments	202,977.	239,240.	239,240
3	Accounts receivable			1 1
ł	Less: allowance for doubtful accounts			
4	Pledges receivable			
-	Less: allowance for doubtful accounts ▶			
5	Grants receivable			
6	Receivables due from officers, directors, trustees, and other			
İ	disqualified persons (attach schedule) (see page 15 of the instructions)			
7	Other notes and loans receivable (attach schedule)			.,
İ	Less: allowance for doubtful accounts ▶			
. 8	Inventories for sale or use			
9	Prepaid expenses and deferred charges STMT 4	9,963.	9,871.	9,871
10 a	Investments - U.S. and state government obligations (attach schedule)			
1	Investments - corporate stock (attach schedule)			
	Investments - corporate bonds (attach schedule)			
11	investments - land, buildings,			
	and equipment basis Less accumulated depreciation (attach schedule)			
12	Investments - mortgage loans			
13	Investments - other (attach schedule) STMT 5	-59,398.	NONE	NON
14	Land, buildings, and			
}	equipment basis Less, accumulated depreciation (attach schedule)			•
15	Other assets (describe			
16	Total assets (to be completed by all filers - see page 16 of			
1	the instructions. Also, see page 1, item I)	153.542.	249,111.	249,111
1	Accounts payable and accrued expenses			
1	Grants payable			
1	Deferred revenue			
19 20 21	Loans from officers, directors, trustees, and other disqualified persons			
21	Mortgages and other notes payable (attach schedule)			
22	Other liabilities (describe			
23	Total liabilities (add lines 17 through 22) · · · · · · · · ·			
	Organizations that follow SFAS 117, check here ▶			
	and complete lines 24 through 26 and lines 30 and 31.			
24 25 26	Unrestricted			
25	Temporarily restricted			
26	Permanently restricted · · · · · · · · · · · · · · · · · · ·			
	Organizations that do not follow SFAS 117,			,
	check here and complete lines 27 through 31. $\blacktriangleright X$			
	Capital stock, trust principal, or current funds	20,000.	20,000.	
	Paid-in or capital surplus, or land, bldg , and equipment fund			
	Retained earnings, accumulated income, endowment, or other funds	133,542.	198,803.	
30	Total net assets or fund balances (see page 17 of the			
	instructions)	153,542.	218,803.	
31	Total liabilities and net assets/fund balances (see page 17 of			
1	the instructions) · · · · · · · · · · · · · · · · · · ·	153,542.	218,803.	
art III	Analysis of Changes in Net Assets or Fund B	alances		
Total	net assets or fund balances at beginning of year - Part II, c	olumn (a), line 30 (must a	agree with	
	f-year figure reported on prior year's return)			153,542
	amount from Part I, line 27a		_	65,261
	increases not included in line 2 (itemize) SEE STATE			30,308
	nes 1, 2, and 3		•	249,111
	eases not included in line 2 (itemize) ▶			
	net assets or fund balances at end of year (line 4 minus line	5) - Part II, column (b) I	ine 30 6	249,111

	Part IV Capital Gair	ns and Losses for Tax on In	vestment Income			
	(a) List a 2-story	(b) How acquired P-Purchase D-Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo , day, yr.)		
í	a					
	<u> </u>	·		ļ		
_				ļ		-
_	<u>d</u>	<u></u>		ļ		
_	<u> </u>			 		
_	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo (e) plus (f) minu	
_ =				<u> </u>		
	<u> </u>			ļ		
				ļ		
	<u> </u>					
	complete only for assets	showing gain in column (h) and ow			Gains (Col. (h) ga	
	(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	col.	(k), but not less the Losses (from col	
а	<u> </u>					
b)			<u> </u>		
	}		·			
_d	<u> </u>					
_e						
2	Capital gain net income o	r (net capital loss) · · · · · {	gain, also enter in Part I, line 7 (loss), enter -0- in Part I, line 7	2		
3	Net short-term capital gain	 n or (loss) as defined in sections 12			···	· ···-
		l, line 8, column (c) (see pages 13	•			
		line 8		3		
P	art V Qualification U	nder Section 4940(e) for Redi	uced Tax on Net Investment Inc	ome	·····	
Wa			ibutable amount of any year in the l	oase peno	d?	Yes X No
			; see page 18 of the instructions be	fore makır	ng any entries.	
					(d)	
Е	(a) Base period years Calendar year	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets		Distribution rati	
	(or tax year beginning in)			(col (b) divided by o	
	2004	47,850.	169,861.			0092016
	2003	41,535.	282,948.			9375716
	2002	477,697.	190,203.		2.5115	1138520
	2001	46,543.	NONE	w	0 0120	NONE
	2000	43,129.	3,367,755.	T	0.0126	0645415
_	Takel of the discourse (d)				2 0520	1051667
		for the 5-year base period - divide		2	2.9328	1251667
	-			0 5005	COF 0222	
	the number of years the fo	oundation has been in existence if	less than 5 years	3	0.5905	6250333
4	Enter the net value of non	charitable-use assets for 2005 from	m Part X, line 5	4		190,356.
5	Multiply line 4 by line 3.	5		112,417.		
3	Enter 1% of net investmer	6		46.		
7	Add lines 5 and 6			7		112,463.
3		ns from Part XII, line 4		8		28,757.
			complete that part using a 1% tax rate. See th	e Part VI inst		00 DE

Form	990-PF (2005	91-1585493				Page 5
Pa	rt VII-B	Statements Regarding Activities for Which Form 4720 May Be Required				
	File Form	4720 if any item is checked in the "Yes" column, unless an exception applies.			Yes	No
1a		year did the organization (either directly or indirectly):				
	•	e in the sale or exchange, or leasing of property with a disqualified person? Yes	X No	1 1		
		money from, leng money to, or otherwise extend credit to (or accept it from)				
	a disqu	ralified person? Yes	X No			
	(3) Furnish	n goods, services, or facilities to (or accept them from) a disqualified person? Yes	X No			
	(4) Pay co	mpensation to, or pay or reimburse the expenses of, a disqualified person? Yes	X No			l
	(5) Transfe	er any income or assets to a disqualified person (or make any of either available		ĺ		
	for the	benefit or use of a disqualified person)?	X No			
	(6) Agree t	o pay money or property to a government official? (Exception. Check "No"				
	if the o	rganization agreed to make a grant to or to employ the official for a period				
	after te	rmination of government service, if terminating within 90 days) Yes	X No			
ь	If any answ	er is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations				
	section 53.	4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)? · · · ·		1b	N/	A
	Organizatio	ns relying on a current notice regarding disaster assistance check here	<u> </u>			
C	Did the orga	anization engage in a prior year in any of the acts described in 1a, other than excepted acts,]		-
	that were n	ot corrected before the first day of the tax year beginning in 2005?		1c		<u> </u>
2	Taxes on fa	ilure to distribute income (section 4942) (does not apply for years the organization was a private				
	operating fo	oundation defined in section 4942(j)(3) or 4942(j)(5)):				
а	At the end of	of tax year 2005, did the organization have any undistributed income (lines 6d	Г			
		t XIII) for tax year(s) beginning before 2005? Yes	X No			
	If "Yes," list	the years				
b		ny years listed in 2a for which the organization is not applying the provisions of section 4942(a)(2)				
		incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2)		2.		x
	•	listed, answer "No" and attach statement - see page 20 of the instructions)		2b		
С	•	ions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.				
_		and the standard of the standa			1	
3 a	_	unization hold more than a 2% direct or indirect interest in any business t any time during the year? X Yes	No		1	
	•	t any time during the year?			ĺ	
b		ed persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved			1	
	•	missioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3)				
	•	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine		ĺ		
	•	zation had excess business holdings in 2005.)		3 b		Х
4a	_	nization invest during the year any amount in a manner that would jeopardize its charitable purposes?		4a		х
		nization make any investment in a prior year (but after December 31, 1969) that could jeopardize its ch				
_		t had not been removed from jeopardy before the first day of the tax year beginning in 2005?		4 b		Х
5 a	F F	ear did the organization pay or incur any amount to:				
		propaganda, or otherwise attempt to influence legislation (section 4945(e))? Yes	X No			
	(2) Influence	e the outcome of any specific public election (see section 4955); or to carry		1		
	on, direc	tly or indirectly, any voter registration drive? Yes	X No		1	
	(3) Provide	a grant to an individual for travel, study, or other similar purposes?	X No			
	(4) Provide	a grant to an organization other than a charitable, etc , organization described		.		
		n 509(a)(1), (2), or (3), or section 4940(d)(2)?	X No	- 1		
		for any purpose other than religious, charitable, scientific, literary, or		ľ	- 1	
	educatio	nal purposes, or for the prevention of cruelty to children or animals?	X No			
	-	r is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in				
	_	section 53.4945 or in a current notice regarding disaster assistance (see page 20 of the instructions)?		5b	N/A	<u> </u>
	_	s relying on a current notice regarding disaster assistance check here	X			
		r is "Yes" to question 5a(4), does the organization claim exemption from the	□ _{No}			
		it maintained expenditure responsibility for the grant?	NO	Ī		
		ch the statement required by Regulations section 53.4945-5(d).				
		nization, during the year, receive any funds, directly or indirectly, to pay	X No	ŀ		
L	premiums on	na personal benefit contract?		6Ь	1	х
		red "Yes" to 6b, also file Form 8870.	• • • • • • •			
	, 504 41151161					

	(b) Title, and average	(c) Compensation (if not paid, enter	(d) Contributions to	(e) Expense account.
(a) Name and address	hours per week aevotea to position	(If not paid, enter -≎-)	employee benefit plans and defened compensation	other allowances
SEE STATEMENT 8	4	NONE	NONE	NON
SEE STATEMENT O		NONE	NONE	NON
Compensation of five highest-paid employees (of if none, enter "NONE."	her than those incl	uded on line 1 - se	e page 21 of the inst	ructions).
(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
/A				
tal number of other employees paid over \$50,000 .	<u> </u>			▶ NONE
Five highest-paid independent contractors for pro	ofessional services	- (see page 21 of t	he instructions). If no	one, enter
(a) Name and address of each person paid more than	\$50,000	(b) Type	of service	(c) Compensation
/ <u>A</u>				
		-		·
				
tal number of others receiving over \$50,000 for profes	ssional services	· · · · · · · · · · · · · · · · · · ·	<u> </u>	▶ NONE
art IX-A Summary of Direct Charitable Activitie	es 			
ist the foundation's four largest direct charitable activities during the if organizations and other beneficianes served, conferences convened,			as the number	Expenses
MADE UNRESTRICTED GRANTS IN SUPPORT	OF EXEMPT OR	GANIZATIONS		
TO FUTHER THE FOUNDATION'S CHARITABLE		N_SOCIAL		20 757
SERVICE, EDUCATION, SCIENCE, AND REI	TGTON.			28,757
				

orm 990-PF (2005) Part IX-B Summary of Program-Related Investments (see page 22 of the instructions)		Page 7
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2		Amount
		Anodik
NONE		
All other program-related investments See page 22 of the instructions		
NONE		
And Add Since 4 Aboursely 2		
otal. Add lines 1 through 3	ign founds	ations
see page 22 of the instructions.)	igir iounde	240110 ₁
Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,	1	
purposes:		
Average monthly fair market value of securities	1a	NONE
Average of monthly cash balances	1b	193,255.
Average of monthly cash balances Fair market value of all other assets (see page 23 of the instructions)	1c	NONE
Total (add lines 1a, b, and c)	1d	193,255.
Reduction claimed for blockage or other factors reported on lines 1a and		
1c (attach detailed explanation)		
Acquisition indebtedness applicable to line 1 assets	2	NONE
Subtract line 2 from line 1d	3	193,255.
Subtract line 2 from line 1d Cash deemed held for charitable activities Enter 1 1/2 % of line 3 (for greater amount, see page 23		
	4	2,899.
of the instructions) Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	190,356.
Minimum Investment return. Enter 5% of line 5	6	9,518.
Distributable Amount (see page 23 of the instructions) (Section 4942(j)(3) and (j)(5) privals foundations and certain foreign organizations check here ▶ □ and do not complete this		
Minimum investment return from Part X, line 6	1	9,518.
Tax on investment income for 2005 from Part VI, line 5		3,510.
Income tax for 2005. (This does not include the tax from Part VI.)	1 1	
	2c	92.
Add lines 2a and 2b Distributable amount before adjustments. Subtract line 2c from line 1	3	9,426.
Recoveries of amounts treated as qualifying distributions	4	3,420.
	5	9,426.
Add lines 3 and 4 Deduction from distributable amount (see page 24 of the instructions)	6	3,420.
Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,	 	·····
line 1 · · · · · · · · · · · · · · · · · ·	7	9,426.
art XII Qualifying Distributions (see page 24 of the instructions)	<u></u>	
		
Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	12	00 757
Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	28,757.
Program-related investments - total from Part IX-B	1b	NONE
Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
purposes Amounts set aside for specific charitable projects that satisfy the:	2	NONE
	.	
Suitability test (prior IRS approval required)	3a	NONE
Cash distribution test (attach the required schedule)	3 b	NONE
Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	28,757.
Organizations that qualify under section 4940(e) for the reduced rate of tax on net investment	_	
income Enter 1% of Part I, line 27b (see page 24 of the instructions)	5	N/A
Adjusted qualifying distributions. Subtract line 5 from line 4	6	28,757.
Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whe	tner the fou	naation

Part XIII Undistributed Income (see page 24 of the instructions)

	Chalest the state (
		(a)	(b)	(c)	(d) 2005
1	Distributable amount for 2005 from Part XI,	Corpus	Years prior to 2004	2004	
	line 7				9,426.
2	Undistributed income, if any, as of the end of 2004				
а	Enter amount for 2004 only			NONE	
b	Total for prior years 2003		NONE		
3	Excess distributions carryover, if any, to 2005:			·	
а	From 2000 NONE			·	
	From 2001 NONE			,	
С	From 2002 468,483.			1	
d	From 2003 27,442.		ļ	`	
e	From 2004			ŀ	
f	Total of lines 3a through e	535,319.	1		
4	Qualifying distributions for 2005 from Part			1	,
	XII, line 4: ▶\$		ŀ	, , , , , , , , , , , , , , , , , , , ,	
а	Applied to 2004, but not more than line 2a			NONE	
ь	Applied to undistributed income of prior years		į		
_	(Election required - see page 25 of the instructions)				
С	Treated as distributions out of corpus (Election required - see page 25 of the instructions)				
4	Applied to 2005 distributable amount				9,426.
	Remaining amount distributed out of corpus	19,331.			
5	Excess distributions carryover applied to 2005				
	(If an amount appears in column (d), the				
_	same amount must be shown in column (a).) Enter the net total of each column as			}	
6	indicated below:			. 1	
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	554,650.			
	Prior years' undistributed income. Subtract		ŀ	†	
D	line 4b from line 2b		NONE		
С	Enter the amount of prior years' undistributed			Ì	
	income for which a notice of deficiency has been issued, or on which the section 4942(a)		Į		
	tax has been previously assessed				
а	Subtract line 6c from line 6b. Taxable		}	•	
•	amount - see page 25 of the instructions		NONE		<u> </u>
e	Undistributed income for 2004 Subtract line 4a from line 2a Taxable amount - see page		ļ		
	25 of the instructions			NONE	
æ	Undistributed income for 2005. Subtract		ĺ		
T	lines 4d and 5 from line 1. This amount must	İ			
	be distributed in 2006				
7	Amounts treated as distributions out of corpus to satisfy requirements imposed by				
	section 170(b)(1)(E) or 4942(g)(3) (see page		į	ŀ	
	25 of the instructions)				
8	Excess distributions carryover from 2000 not applied on line 5 or line 7 (see page 25 of				
	the instructions)	NONE			
9	Excess distributions carryover to 2006.		ĺ	ļ	
	Subtract lines 7 and 8 from line 6a	554,650.			
0	Analysis of line 9	İ	į		
а	Excess from 2001 NONE		}		
	Excess from 2002				
	Excess from 2003		[
	Excess from 2004 39,394.		ĺ		
e	Excess from 2005 19,331.	<u></u>			990-DE (2005)

	m 990-PF (2005)			91-15			Page
P	art XIV Private Ope	rating Foundations	(see page 26 of the	e instructions and Part	: VII-/	A, question 9)	NOT APPLICABL
1 a	If the foundation has rec	eived a ruling or determ	ination letter that it is a	private operating			-
	foundation, and the rulin	g is effective for 2005, e	enter the date of the rulin	g	>		
b	Check box to indicate wh	nether the organization is	s a private operating foi	undation described in section		4942(J)(3) or	4942(j)(5)
2-	Enter the lesser of the	Tax year		Prior 3 years			(0) 7-4-1
2 a	adjusted net income from	(a) 2005	(b) 2004	(c) 2003		(d) 2002	(e) Total
	Part I or the minimum						
	investment return from Part X for each year listed]				
h	85% of line 2a						
_							
·	Qualifying distributions from Part XII, line 4 for each year listed						
d	Amounts included in line 2c not		 	· †			
	used directly for active conduct						
e	of exempt activities						<u> </u>
Ī	directly for active conduct of						E
	exempt activities Subtract						
3	line 2d from line 2c			 			
	alternative test relied upon						
а	"Assets" alternative test - enter						
	(1) Value of all assets(2) Value of assets qualifying					<u>-</u>	
	under section		1				
ь	4942(j)(3)(B)(l) "Endowment" alternative test-						
~	enter 2/3 of minimum invest-						
	ment return shown in Part X,						
_	line 6 for each year listed			·			
С	"Support" alternative test - enter (1) Total support other than						
	gross investment income						
	(interest, dividends, rents, payments on securities						
	loans (section 512(a)(5)),						
	or royalties)						
	(2) Support from general public and 5 or more						
	exempt organizations as provided in section 4942						
	(j)(3)(B)(iii)			ļ			
	(3) Largest amount of sup- port from an exempt						
	organization			<u> </u>			
	(4) Gross investment income						
Pa				only if the organization	n hac	i \$5,000 or m	ore in
		time during the ye		n the instructions.)		· · · · · · · · · · · · · · · · · · ·	
	Information Regarding			- 4h 20/ of 4h - 4-4-1 -		h	d by the foundation
а				e than 2% of the total c more than \$5,000). (See			ed by the roundation
	perore the close of any	tax year (but only if th	icy have contributed	more than we, ever, (ever		.0.1 001 (4)(4).7	
	NONE			· · · · · · · · · · · · · · · · · · ·			
b				the stock of a corpora			large portion of the
	ownership of a partners	nip or other entity) of	which the foundation	has a 10% or greater in	teresi	.	
	NONE						
	1.6	O4-1141 O4	O'M I am Oakalanak	in ata Draguanas			
	Information Regarding						
				to preselected charitat			
	•	~		grants, etc. (see page 2	.6 OT	the instruction	is) to individuals or
	organizations under oth						
а	The name, address, and	d telephone number o	f the person to whon	n applications should be a	ddres	sed.	
	SEE STATEME						
b	The form in which applic	ations should be sub	mitted and informatio	n and materials they sho	ould i	nclude:	
	SEE STATEME	ENT 10					
C .	Any submission deadline	es:					
	NONE			···-··			
		itations on awards,	such as by geogra	phical areas, charitable	field	ls, kınds of ir	stitutions, or other
1	factors [.]						
	SEE STATEME	NT 11					
A 149	0 1 000						Form 990-PF (2005)
	-2CD0HJ-K378-027	'02/2010 [—] 19:36:	19-V05 - 8.1-2	1592/WRS			1-1

3 Grants and Contributions Paid Duri	ng the Year or Appro	aved for F	uture Payment	
Recipient	If recipient is an individual,	Foundation	Burness of amet or	T
Name and address (home or business)	If reciplent is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a Paid during the year	di Substantiai condibutor	<u> </u>		
.				
SEE STATEMENT 12]	
			1	
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		i		
		i	!	
				•
]	
			i	
		Ì		
			į	
Total	· · · · · · · · · · · · · · ·			28,757.
b Approved for future payment				
	,			
			1	
ļ				
	Ì	}		
		}		
			N A1	
Total			▶ 3b	

	VIFA Analysis of Income-Prod ss amounts unless otherwise indicated.		ated business income	Excluded by	section 512, 513, or 514	(e)
Litter gro	ss amounts unless otherwise moleated.	(a)	(b)	(c)	(d)	Related or exempt function income
i Progra	am service revenue.	Business	Amount	Exclusion	Amount	(See page 26 of the instructions.)
a			7.11100111	5555		are mean quality
ь —				-		
_						
е —						
f						
g Fe	es and contracts from government agencies					
	ership dues and assessments					
	t on savings and temporary cash investments	541610	529.	14	4,613.	
	nds and interest from securities					
	ntal income or (loss) from real estate:					
	ebt-financed property					
	ot debt-financed property					
	tal income or (loss) from personal property					
	investment income	541610	238.			
	(loss) from sales of assets other than inventory	11		18		
	come or (loss) from special events					
	profit or (loss) from sales of inventory.			1		
	revenue: a		· · · · · · · · · · · · · · · · · · ·			
	-1: DOMINION INC	541610	28,323.			· · · · · · · · · · · · · · · · · · ·
	ARA FOUNDATION					73,000
. –	THE LOCK SHEET					
 e						
	al Add columns (b), (d), and (e)		29.090.		4,613.	73,000.
	Add line 12, columns (b), (d), and (e)					106,703.
	sheet in line 13 instructions on page 27 t					
	-B Relationship of Activities			mpt Purpo	oses	
	Explain below how each activity					buted importantly to
Line No.	the accomplishment of the org	anization's	exempt purposes (oth	ner than by	providing funds for s	uch purposes). (See
▼	page 27 of the instructions.)		• • •			
	NOT APPLICABLE					
			· · · · · · · · · · · · · · · · · · ·			
			·			
						
		· · · · · · · · · · · · · · · · · · ·				
						
						
	 					
	 					
·						
		-				
			· · · · · · · · · · · · · · · · · · ·			
						
	<u> </u>					

نا	'a	rt XV	Information Exempt Org		Transfers To and	i ≀Trans	actions	and Reia	tionshi	ps With I	lonc	harii -	abl
1		Did t	he organization directly	or Indirectly eng	age in any of the followin	ng with any	other orga	nızation desc	rıbed in se	ction		Yes	No
					(3) organizations) or in								
	а				a noncharitable exempt or								i
		(1) (Cash								1a(1)		X
											1a(2)		Х
	ь		r transactions										
		(1) 8	Sales of assets to a nonc	haritable exempt	organization						1b(1)		Х
					exempt organization						1b(2)		X
					sets						1b(3)		Х
											1b(4)		Х
											1b(5)		Х
					or fundraising solicitations						16(6)		X
	C	Shari	ng of facilities, equipme	nt, mailing lists,	other assets, or paid emplo	oyees					1 c		X
	a	if the	answer to any of the ab	ove is "Yes," co	mplete the following sched	lule, Colum	ın (b) shoul	d always sho	w the fair	market			
		value	of the goods, other asse	ets, or services :	given by the reporting org	anization.	If the organi	zation receive	d less thar	ı fair			
		mark	et value in any transactio	on or sharing arr	angement, show in columr	n (d) the va	alue of the	goods, other a	issets, or s	ervices			
		recen	/ed.										
(a) L	ne no	(b) Amount involved	(c) Name of	noncharitable exempt organ	ization	(d) Desc	ription of trans	fers, transa	ctions, and shar	ng arrar	ngemer	its
			N/A				N/A						
													
_													
					··-···								
					· · · · · · · · · · · · · · · · · · ·								
													
_													
_													
													
?			•	•	ed with, or related to, one		-	rganizations		_	_		ł
		descrı	bed in section 501(c) of	the Code (other	than section 501(c)(3)) or	r in section	527?			L	Yes	<u> </u>	No
Ŀ	<u> </u>	If "Yes	s," complete the following										
			(a) Name of organization	·	(b) Type of orga	inization			c) Descript	ion of relationsh	ip		
													
													
_										4- Ab- bA -6	l		
	ľ	oelief, i	penalties of perjuty, I decia t is true, correct, and comp	ire that i nave ex lete Declaration o	amined this return, including of preparer (other than taxpay	g accompa /er or fiducia	nying schedu ry) is based o	n, all information	nents, and of which pi	eparer has any	knowled	owieagi lge	; and
ļ		·	Min 1 t	7AMS		1	4/10	10	/	ector			
		X	XXIVIV CC			!	<u> </u>						
;		Sig	nature of officer or trustee	<i></i>		T_ :	Date		Title	Drongrade 99	SN or F	TINI	
:			. (1.0	W /	Date		Check if		Preparer's SS (See Signature	e on pa		
,		er's	Preparer's	1 Ch	Sust	APR	1 4 2010	self-employe	ed P	of the instructi	ons)		
۱,	aid	reparer's Use Only	signature /	00	July)				FN: > =				
1	ı.	Preparer's Use Only	Firm's name (or yours if		MARTIN, P.S.				EIN ▶ 9	1-150142	:1		
self-employed), address, 1000 SECOND AVENUE, 34TH FLOOR													

Form 990-PF (2005)

Phone no 206-621-1900

98104-1022

and ZIP code

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PART
990PF,
FORM

NET INVESTMENT INCOME	4, 613. NONE	4,613.
REVENUE AND EXPENSES PER BOOKS	4,613. 529.	5,142.
DESCRIPTION	OTHER INTEREST INCOME FROM K-1: DOMINION INCOME MGMT CORP	TOTAL

FORM 990PF, PART I - OTHER INCOME

> REVENUE AND **EXPENSES** PER BOOKS _____

DESCRIPTION

FROM K-1: DOMINION INCOME MGMT CORP

FROM K-1: DOMINION INC MGMT CORP-ROYALTY

28,323. 238.

TOTALS

28,561.

_1_6_

FORM	990PF,	PART	I -	OTHER	EXPENSES
=====	======	=====	====	======	=======

REVENUE AND **EXPENSES** PER BOOKS DESCRIPTION _____ BANKING FEES 34. TOTALS 34. _____

___17_

FORM 990PF, PART II - PREPAID EXPENSES AND DEFERRED CHARGES

ENDING FMV 	9,871.
ENDING BOOK VALUE	9,871.
	TOTALS
DESCRIPTION	PREPAID TAX

STATEMENT

21592/WRS

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2

INVESTMENTS	
- OTHER	
II	
PART	
1 990PF,	

ENDING BOOK VALUE		
DESCRIPTION	INVESTMENT IN DOMINION INCOME	

91-1585493

ENDING FMV

TOTALS

NONE

NONE

NONE

NONE

4

FORM	990PF,	PART	III	- OTHER	INCREASES	ΪЙ	ŊEŢ	WORTH	ŌŔ	TIND	BALANCES

DESCRIPTION AMOUNT

DISSOLUTION OF DOMINION INCOME MGMT 30,308.

TOTAL 30,308.

20

CONTRIBUTORS
SUBSTANTIAL
- NEW
VII-A
PART
990PF,
FORM

NTO T TTT//NTOO T OFFOR

91-1585493

DIRECT PUBLIC SUPPORT	\	73,000.	
DATE	 	11/01/2005	1
NAME AND ADDRESS		TARA FOUNDATION FL-9490 VADUZ, MEIERHOFSTRASSE 2 LIECHTENSTEIN,	

73,000.

TOTAL CONTRIBUTION AMOUNTS

21592/WRS

2CD0HJ K378 02/02/2010 19:36:19 V05-8.1

FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

NAME AND ADDRESS	TITLE AND TIME TO EMPLOYEE AND OTHER DEVOTED TO POSITION COMPENSATION BENEFIT PLANS ALLOWANCES	COMPENSATION	CONTRIBUTIONS EXPENSE ACCT TO EMPLOYEE AND OTHER BENEIT PLANS ALLOWANCES	EXPENSE ACCT AND OTHER ALLOWANCES
ANN L. EVANS 2269 CHESTNUT STREET, SUITE 338 SAN FRANCISCO, CA 94123-2600	PRESIDENT 1	NONE	NONE	NONE
CRAIG STERNBERG 500 UNION STREET, SUITE 500 SEATTLE, WA 98104	SEC/TREAS 1	NONE	NONE	NONE

FORM 990PF, PART XV - NAME, ADDRESS AND PHONE FOR APPLICATIONS

ANN L. EVANS 2269 CHESTNUT STREET, SUITE 338 SAN FRANCISCO, CA 94123-2600 425-222-3520

990PF, PART XV - FORM AND CONTENTS OF SUBMITTED APPLICATIONS

APPLICATIONS MUST BE SUBMITTED IN WRITING AND MUST INCLUDE A DESCRIPTION OF THE PROGRAM OR PROJECT FOR WHICH AN AWARD IS REQUESTED.

990PF, PART XV - RESTRICTIONS OR LIMITATIONS ON AWARDS

GIFTS ARE MADE TO ORGANIZATIONS EXEMPT FROM TAX UNDER IRC SEC. 501(3)(C); ALSO TO STATE AND LOCAL INSTITUTIONS DESCRIBED IN IRC 170(C)(1).

٠,

10,000.

TO PROVIDE SUPPORT TO EXEMPT ORGANIZATION

NONE EXEMPT

CALIFORNIA STATE UNIVERSITY STANISLAUS FOUNDATION

ITHACA, NY 14851

PO BOX 6483

ONE UNIVERSITY CIRCLE

TURLOCK, CA 95382

(Rev December 2004)

Department of the Treasury

Application for Extension of Time To File an Exempt Organization Return

OMB No. 1545-1709

Internal Revenue	Senage		► File a separa	ate application for each	return		ļ	
if you are	filing for an Auto	matic 3-Mon	th Extension, comp	lete only Part I and	check this box			▶ X
• If you are	filing for an Addi	tional (not a	utomatic) 3-Month I	Extension, complet	e only Part II (on p	age 2 of thi	s form)	
Do not comple	ete Part II unless	you have aire	eady been granted a	in automatic 3-mon	th extension on a	previously fil	ed Form 88	68
			of Time - Only su					
Form 990-T c	orporations requ	iesting an au	tomatic 6-month ex	tension - check this	box and complete	Part I only.		▶ 🔲
All other corp	orations (includi	ng Form 990	-C filers) must use F	Form 7004 to reques	an extension extir	ne to file inc	ome tax retu	ıms
Partnerships,	REMICs, and tr	usts must us	e Form 8736 to requ	uest an extension of	time to file Form) 65, 1066, o	r 1041.	
			pe filed electronical					
			ate Form 990-T file d you must submit					
			risit www.irs.gov/efil		su signeu page z	•(1 alt II) 01	1 01111 000	o roi illote
Type or	Name of Exemp					Employ	er identificat	ion number
print	SEVEN I	OODS FOU	NDATTON			1	1585493	
•			uite no If a P.O. box, se	ee instructions.			1303493	
File by the due date for			·		77.00			
filing your			VERETT HWY , and ZIP code. For a fo	preign address, see inst	F109			
return See Instructions	1			, olg., add. 655, 656 mist	addions.			
Check type o		EEK, WA		r oooh roturn):				
		ed (life a ser	arate application for	•		F 4700		
Form 990		<u></u> ⊢-{	Form 990-T (corporat	•	 	Form 4720		
Form 990		\vdash	Form 990-T(sec 401			Form 5227		
Form 990		\vdash	Form 990-T (trust oth	ier than above)		Form 6069		
X Form 990	-PF		Form 1041-A			Form 8870		
names and EIN 1 I request to file the		s the extension onth (6-monation return for the contraction of the con	•		ension of time until extension is for the	08/15		, 2006
2 If this tax	year is for less t	nan 12 monti	ns, check reason	Initial return [Final return	Chang	e in accoun	ting period
			, 990-PF, 990-T, 47					
nonrefund	lable credits Se	e instructions					\$	NONE
			or 990-T, enter any				_	
			rent allowed as a cre				\$	NONE
			ne 3a Include your using EFTPS (E					
	ns		$\bigcup \bigcup \bigcup \bigcup \bigcap \bigcap \bigcap \bigcap \bigcup \bigcup \bigcup \bigcup \bigcup \bigcup \bigcup \bigcup \bigcup \bigcup \bigcup \bigcup$				\$	NONE
			nic fund withdrawer	with this Form 8868	3 see Form 8453-	FO and For	m 8879-FO	
or payment ins		io ari oroca o), 555 i 5iiii 5 i 55		0070 20	
		Poduction	Act Notice see Inst	rustions	a a	7	- 0000	
or Privacy Ac	t and Paperwor	Reduction	Act Notice, see Inst	ructions.			Form 8868	(Rev 12-2004)
					787)			
					🜒			
7								



Form 8868 (Rev 12, 004)
• If you are filing for an Additional (not automatic) 3-Month Extension, complete only Part II and check this box
Note; Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868.
y If you are filing for an Automatic 3-Month Extension, complete only Part I (on page 1).
Additional (not automatic) 3-Month Extension of Time - Must File Original and One Copy.
Name of Exempt Organization Employer Identification number
rype or print SEVEN WOODS FOUNDATION 91-1585493
Number street and room or suite no. If a P.O. box see instructions For IRS use only
File Dy tile
due date for 16212 BOTHELL EVERETT HWI
filing the City, town or post office, state, and ZIP code. For a foreign address, see instructions.
Instructions. MILL CREEK, WA 98012
Check type of return to be filed (File a separate application for each return):
Form 990 Form 990-T(sec. 401(a) or 408(a) trust) Form 5227
Form 990-BL Form 990-T (trust other than above) Form 6069
Form 990-EZ Form 1041-A Some 8870
X Form 990-PF Form 4720
STOP: Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.
• The books are in the care of • ANN EVANS
Telephone No. ► 425 398-8988 FAX No. ► 425 398-8988
• 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 EINs of all members the extension is for.
4 I request an additional 3-month extension of time until 11/15/2006
5 For calendar year 2005, or other tax year beginning and ending.
6 If this tax year is for less than 12 months, check reason: Initial return Final return Change in accounting period
7 State in detail why you need the extension ALL THE INFORMATION NECESSARY FOR THE
PREPARATION OF A COMPLETE AND ACCURATE RETURN IS NOT CURRENTLY
AVAILABLE, PRECLUDING THE FILING OF THE RETURN BY THE DUE DATE.
If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any
nonrefundable credits. See instructions <u>\$ NON</u>
b If this application is for Form 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 and any amount paid
previously with Form 8868
c Balance Due. Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit
with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See
instructions
Signature and Verification
Under penalties of periury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and beli
it is true, correct, and complete and that I am enthorized to prepare this form
Self of the self-self-self-self-self-self-self-self-
Signature ► C.P.A. Date ► 08/10/2006
Notice to Applicant - To Be Completed by the IRS
We have approved this application. Please attach this form to the organization's return
We have not approved this application. However, we have granted a 10-day grace period from the later of the date shown below or the dute of the organization's return (including any prior extensions). This grace period is considered to be a valid extension of time for election
otherwise required to be made on a timely return. Please attach this form to the organization's return.
We have not approved this application. After considering the reasons stated in item 7, we cannot grant your request for an extension of times.
to file. We are not granting a 10-day grace period.
We cannot consider this application because it was filed after the extended due date of the return for which an extension was requested.
Other
$O/O_{\rm b}$
Director Date CYTEMSIAN ADDROVER
Alternate Mailing Address - Enter the address if you want the copy of his application for an additional semantic extension
returned to an address different than the one entered above.
Name AUG 3 1 2006
BADER MARTIN, P.S.
the or
print
1000 SECOND AVENUE, 34TH FLOOR SUBMISSION PROCESSING, UGUEN City or town, province or state, and country (including postal or ZIP code)
SEATTLE, WA 98104-1022 Form 8868 (Rev. 12-2004