

## See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



## Form **990-PF**

#### Return of Private Foundation or Section 4947(a)(1) Nonexempt Charitable Trust Treated as a Private Foundation

OMB No 1545-0052

2009

Department of the Treasury Internal Revenue Service Note: The foundation may be able to use a copy of this return to satisfy state reporting requirements , 2009, and ending For calendar year 2009, or tax year beginning G Check all that apply Initial return | Initial Return of a former public charity Final return Amended return Address change Name change Employer identification number Use the THE STARSEED FOUNDATION IRS label. 93-1243038 Otherwise. PO BOX 1001 Telephone number (see the instructions) R print SANDY, OR 97055 503-668-8662 or type. See Specific С If exemption application is pending, check here Instructions. 1 Foreign organizations, check here Check type of organization X Section 501(c)(3) exempt private foundation 2 Foreign organizations meeting the 85% test, check here and attach computation Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation If private foundation status was terminated Fair market value of all assets at end of year Accounting method | X Cash J under section 507(b)(1)(A), check here (from Part II, column (c), line 16) Other (specify) If the foundation is in a 60-month termination **▶** \$ 1,133,103 (Part I, column (d) must be on cash basis ) under section 507(b)(1)(B), check here Analysis of Revenue and (b) Net investment (a) Revenue and (c) Adjusted net (d) Disbursements Expenses (The total of amounts in for charitable expenses per books income income columns (b), (c), and (d) may not neces-sarily equal the amounts in column (a) purposes (cash basis only) (seé the instructions) ) 49,000 Contributions, gifts, grants, etc, received (att sch) If the foundn is not req to att Sch B Interest on savings and temporary cash investments Dividends and interest from securities 12,670. 12,670. 12,670 5a Gross rents. €Q **b** Net rental income or (loss) SCANNED MAX, 1 not on line 10 ntal gain net income (from Par Net short-term capital Income modifications d Gross sales less Gross profit/(loss) (att sch) 11 Other income (attach schedule) 12,670 Total. Add lines 1 through 11 61,670 12,670 13 Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages 15 Pension plans, employee benefits 16 a Legal fees (attach schedule) 1,621 812. 811. See St 1 **b** Accounting fees (attach sch) c Other prof fees (attach sch) OPERATI 17 Interest 826. 18 Taxes (attach schedule)(see instr.) See Stm 2 826. 19 Depreciation (attach 257. sch) and depletion 551 Occupancy <u> 296.</u> Travel, conferences, and meetings . 296 25 Printing and publications Other expenses (attach schedule) 1,941 478 1,463. See Statement 24 Total operating and administrative expenses. Add lines 13 through 23 2,595. 2,373. 5,235. 56,424. 25 Contributions, gifts, grants paid Part XV 56,424. Total expenses and disbursements. 2,373. 0 59,019. Add lines 24 and 25. 61,659. Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements 11 10,297. b Net investment income (if negative, enter -0-) 12,670. C Adjusted net income (if negative, enter -0-)

Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with 1,091,942. 1 end-of-year figure reported on prior year's return) 2 2 Enter amount from Part I, line 27a 3 3 Other increases not included in line 2 (itemize) Add lines 1, 2, and 3 4 1,091,953. 5 Decreases not included in line 2 (itemize) 6 1,091,953 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30 6

number of years the foundation has been in existence if less than 5 years.	3	0.055698
4 Enter the net value of noncharitable-use assets for 2009 from Part X, line 5	4	1,020,602.
5 Multiply line 4 by line 3	5	56,845.
5 Enter 1% of net investment income (1% of Part I, line 27b)	6	103.
7 Add lines 5 and 6	7	56,948.
B Enter qualifying distributions from Part XII, line 4	8	59,019.
If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete Part VI instructions	e that part using a 1% tax rate	See the

Form **990-PF** (2009)

Form <b>990-PF</b> (2009) THE STARSEED FOUNDATION 93-1243038		F	age 4
Part VI. Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see the instruc	tions)		
1 a Exempt operating foundations described in section 4940(d)(2), check here			
Date of ruling or determination letter (attach copy of letter if necessary - see instr.)			
b Domestic foundations that meet the section 4940(e) requirements in Part V,		1	L03.
check here ► X and enter 1% of Part I, line 27b			
c All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, column (b)			
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable			
foundations only Others enter -0-)			<u>0.</u>
3 Add lines 1 and 2		1	<u> 103.</u>
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)			<u>0.</u>
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		1	103.
6 Credits/Payments			
a 2009 estimated tax pmts and 2008 overpayment credited to 2009  6a 968.			
b Exempt foreign organizations — tax withheld at source 6b			
c Tax paid with application for extension of time to file (Form 8868)			
d Backup withholding erroneously withheld 6d			
7 Total credits and payments Add lines 6a through 6d			968.
8 Enter any <b>penalty</b> for underpayment of estimated tax. Check here if Form 2220 is attached			
9 Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed		_	0.
10 Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		8	<u>865.</u>
11 Enter the amount of line 10 to be: Credited to 2010 estimated tax 865. Refunded 11			<u>0.</u>
Part VII-A   Statements Regarding Activities			
1 a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?	1 a	Yes	No X
<b>b</b> Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see the instructions for definition)?	1 Ь		х
If the answer is 'Yes' to <b>1a</b> or <b>1b</b> , attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities			
c Did the foundation file Form 1120-POL for this year?	1c		X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			
(1) On the foundation $\Rightarrow$ 0. (2) On foundation managers $\Rightarrow$ 0.	1		
<ul> <li>e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers</li> <li>► \$</li> <li>0 .</li> </ul>			
·			
2 Has the foundation engaged in any activities that have not previously been reported to the IRS?  If 'Yes,' attach a detailed description of the activities	2		$\widehat{}$
		ŀ	
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the changes	3		X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X
<b>b</b> If 'Yes,' has it filed a tax return on <b>Form 990-T</b> for this year?	4b	N	/A
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X
If 'Yes,' attach the statement required by General Instruction T			
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			
By language in the governing instrument, or			
<ul> <li>By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?</li> </ul>	6	Х	
7 Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, column (c), and Part XV	7	X	
8a Enter the states to which the foundation reports or with which it is registered (see the instructions)			
N/A			
<b>b</b> If the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by <i>General Instruction G? If 'No,' attach explanation</i>	8b	X	
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5)			
<b>9</b> Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If 'Yes,' complete Part XIV	9		<u>X</u>
10 Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names and addresses.	10		Х
	rm 990	-PF (	_

TEEA0304L 07/06/09

Form 990-PF (2009) THE STARSEED FOUNDATION	<u>93-124303</u>	8	P	age 5
Part VII-A Statements Regarding Activities Continued				
At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If 'Yes', attach schedule (see instructions)		11		Х
12 Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008?		12		Х
13 Did the foundation comply with the public inspection requirements for its annual returns and exem Website address ► N/A	iption application?	13	Х	
	phone no. ► 503-66	58-8	662	
Located at ► PO BOX 1001 SANDY OR ZIP +			- <del>-</del> -	
15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — Check h	1 1	N/A	<b>•</b>	
and enter the amount of tax-exempt interest received or accrued during the year	▶ 15			N/A
Part VII-B   Statements Regarding Activities for Which Form 4720 May Be Required	1		<del></del> 1	•••
File Form 4720 if any item is checked in the 'Yes' column, unless an exception applies.			Yes	No
1 a During the year did the foundation (either directly or indirectly)  (1) Engage in the sale or exchange, or leasing of property with a disqualified person?	Yes X No			
	res _A No			
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	Yes X No			
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	Yes X No			
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	Yes X No			
(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?	Yes X No			
(6) Agree to pay money or property to a government official? (Exception. Check 'No' if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days)	Yes X No			
<b>b</b> If any answer is 'Yes' to 1a(1)-(6), did <b>any</b> of the acts fail to qualify under the exceptions describe Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance (see the insti	d in ructions)?	1b	N	/A
Organizations relying on a current notice regarding disaster assistance check here	▶ 🗌			
c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted a that were not corrected before the first day of the tax year beginning in 2009?	acts,	1c		X
2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))	a			
a At the end of tax year 2009, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2009?	Yes X No			
If 'Yes,' list the years ▶ 20, 20, 20, 20				
<b>b</b> Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4)				
all years listed, answer 'No' and attach statement — see the instructions )	3 12(d)(L) 10	2b	N	/A
c If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the ye 20 , 20 , 20 , 20	ars here			
3a Did the foundation hold more than a 2% direct or indirect interest in any business				
enterprise at any time during the year?	Yes X No			
b If 'Yes,' did it have excess business holdings in 2009 as a result of (1) any purchase by the foundard or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period apply the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest;	oroved or			
(3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2009)	to.	3ь	N	/A
4a Did the foundation invest during the year any amount in a manner that would jeopardize its				
charitable purposes?		4a		X
<b>b</b> Did the foundation make any investment in a prior year (but after December 31, 1969) that could				
jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2009?	1	4 h		X

BAA

Form **990-PF** (2009)

Form 990-PF (2009) THE STARSEED FOUNI		4700 11 - D. D.	93-12	43038 Page <b>6</b>
Part VII-B   Statements Regarding Activit		1 4/20 May Be Req	uired (continued)	<del></del>
<ol> <li>5a During the year did the foundation pay or inct</li> <li>(1) Carry on propaganda, or otherwise attempt</li> </ol>	•	on (section 4945(e))?	Yes X	No
(2) Influence the outcome of any specific pub on, directly or indirectly, any voter registra	lic election (see section		☐ Yes X	No
(3) Provide a grant to an individual for travel,		purposes?	Yes X	
(4) Provide a grant to an organization other the in section 509(a)(1), (2), or (3), or section	han a charitable, etc, o 4940(d)(2)? (see instr	rganization described uctions)	Yes X	No
(5) Provide for any purpose other than religio educational purposes, or for the prevention	us, charitable, scientific in of cruelty to children	c, literary, or or animals?	Yes X	No
<b>b</b> If any answer is 'Yes' to 5a(1)-(5), did <b>any</b> of described in Regulations section 53 4945 or in (see instructions)?	the transactions fail to a current notice regar	qualify under the excep ding disaster assistance	tions	5b N/A
Organizations relying on a current notice rega	rding disaster assistan	ce check here	▶ [	
c If the answer is 'Yes' to question 5a(4), does tax because it maintained expenditure respon If 'Yes,' attach the statement required by Reg.	sibility for the grant?		N/A Yes	] No
6a Did the foundation, during the year, receive an on a personal benefit contract?	ny funds, directly or ind	lirectly, to pay premium	s	No
<b>b</b> Did the foundation, during the year, pay prem If 'Yes' to 6b, file Form 8870	iums, directly or indirec	ctly, on a personal bene		6b X
<b>7a</b> At any time during the tax year, was the found	tation a narty to a prob	uhited tay shelter transa	action? Yes X	No
<b>b</b> If yes, did the foundation receive any proceed				7b N/A
Part VIII Information About Officers, D				
and Contractors				
1 List all officers, directors, trustees, foundation	n managers and their	compensation (see inst	ructions).	
(a) Name and address	(b) Title and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
See Statement 8			compensation	
bee beacement o		0.	0.	0.
		-		
2 Compensation of five highest-paid employee	s (other than those inc	luded on line 1— see ir	ıstructions). If none, e	nter 'NONE.'
(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
None				
			"	
Total number of other employees paid over \$50,000	<u> </u>	I	<u> </u>	0
BAA	TEEA0306L (	77/06/09		Form <b>990-PF</b> (2009)

Form 990-PF (2009)

BAA

Part X   Minimum Investment Return (All domestic foundations must complete this part. see instructions.)	Foreign f	oundations,
1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc, purposes a Average monthly fair market value of securities	1 a	977,641.
<b>b</b> Average of monthly cash balances	1 b	58,503.
c Fair market value of all other assets (see instructions)	1 c	
d Total (add lines 1a, b, and c)	1 d	1,036,144.
e Reduction claimed for blockage or other factors reported on lines 1a and 1c		
(attach detailed explanation)	0.	
2 Acquisition indebtedness applicable to line 1 assets	2	0.
3 Subtract line 2 from line 1d	3	1,036,144.
4 Cash deemed held for charitable activities Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	15,542.
5 Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	1,020,602.
6 Minimum investment return. Enter 5% of line 5	6	51,030.
Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private op and certain foreign organizations check here ► and do not complete this		undations
1 Minimum investment return from Part X, line 6	1	51,030.
2a Tax on investment income for 2009 from Part VI, line 5	3.	
<b>b</b> Income tax for 2009 (This does not include the tax from Part VI)  2b		
c Add lines 2a and 2b	2 c	103.
3 Distributable amount before adjustments Subtract line 2c from line 1	3	50,927.
4 Recoveries of amounts treated as qualifying distributions	4	
5 Add lines 3 and 4	5	50,927.
6 Deduction from distributable amount (see instructions)	6	
7 Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1	7	50,927.
Part XII Qualifying Distributions (see instructions)		
Amounts paid (including administrative expenses) to accomplish charitable, etc, purposes.		
a Expenses, contributions, gifts, etc – total from Part I, column (d), line 26.	1 a	59,019.
<b>b</b> Program-related investments — total from Part IX-B	1 b	
2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc, purposes	2	
3 Amounts set aside for specific charitable projects that satisfy the a Suitability test (prior IRS approval required)	3a	
b Cash distribution test (attach the required schedule)	3b	
4 Qualifying distributions Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	59,019.
, , , , , , , , , , , , , , , , , , , ,	<del> </del>	33,013.
5 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b (see instructions)	5	103.
6 Adjusted qualifying distributions. Subtract line 5 from line 4	6	58,916.
Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating we qualifies for the section 4940(e) reduction of tax in those years	hether the f	oundation

Part XIII Undistributed Income (see instructions)

		(a) Corpus	(b) Years prior to 2008	<b>(c)</b> 2008	<b>(d)</b> 2009
1 Distributable amount for 2009 line 7	from Part XI,				50,927.
2 Undistributed income, if any, as of the	end of 2009				30,927.
a Enter amount for 2008 only	C/10 01 2003			0.	
<b>b</b> Total for prior years 20 , 20	, 20	<del> </del>	0.		
3 Excess distributions carryover, if any,					
a From 2004	7,801.				
<b>b</b> From 2005	5,333.				
<b>c</b> From 2006	23.				
<b>d</b> From 2007					
<b>e</b> From 2008	20,072.				
f Total of lines 3a through e		33,229.			
4 Qualifying distributions for 200					
XII, line 4 ► \$	59,019.				
a Applied to 2008, but not more	than line 2a			0.	
<b>b</b> Applied to undistributed incom (Election required — see instru			0.		
c Treated as distributions out of (Election required – see instri		0.			
d Applied to 2009 distributable a	' F				50,927.
e Remaining amount distributed	out of corpus	8,092.		,	
5 Excess distributions carryover applied	to 2009	0.	• '		0.
(If an amount appears in colu same amount must be shown					
Same amount mast be snown	iii colulliii (a) /				
6 Enter the net total of each col	lumn as				
indicated below:					
a Corpus Add lines 3f, 4c, and 4e. Subti	ract line 5	41,321.			
<b>b</b> Prior years' undistributed inco line 4b from line 2b	me Subtract		0.		
c Enter the amount of prior year					
ed income for which a notice of has been issued, or on which	the section				
4942(a) tax has been previous	sly assessed		0.		. <u></u>
d Subtract line 6c from line 6b amount — see instructions	Taxable		0.		
e Undistributed income for 2008. Subtra	act line 4a from				
line 2a Taxable amount — see instruc	ctions.			0.	
f Undistributed income for 2009 4d and 5 from line 1. This am					
distributed in 2010	ourit mast be				0.
7 Amounts treated as distribution					
corpus to satisfy requirements by section 170(b)(1)(F) or 494					
(see instructions)		0.			
8 Excess distributions carryover applied on line 5 or line 7 (see	from 2004 not e instructions) .	7,801.			
9 Excess distributions carryove Subtract lines 7 and 8 from lin	er to 2010. ne 6a	33,520.			
10 Analysis of line 9.					•
a Excess from 2005	5,333.				
<b>b</b> Excess from 2006	23.				
c Excess from 2007					
d Excess from 2008	20,072.				
e Excess from 2009	8,092.				

Form 990-PF (2009) THE STARSEED FOU				93-124303	
Part XIV   Private Operating Foundation					N/A
1 a If the foundation has received a ruling or is effective for 2009, enter the date of the	ruling	•	•	_	=
<b>b</b> Check box to indicate whether the founda		erating foundation		4942(j)(3) or	4942(j)(5)
2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed	Tax year (a) 2009	<b>(b)</b> 2008	Prior 3 years (c) 2007	<b>(d)</b> 2006	(e) Total
<b>b</b> 85% of line 2a					
c Qualifying distributions from Part XII, line 4 for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
<ul> <li>Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c</li> </ul>					
3 Complete 3a, b, or c for the alternative test relied upon					
a 'Assets' alternative test — enter					
<ul><li>(1) Value of all assets</li><li>(2) Value of assets qualifying under section 4942(j)(3)(B)(i)</li></ul>					
b 'Endowment' alternative test — enter 2/3 of minimum investment return shown in Part X,					-
line 6 for each year listed			-		
<ul> <li>c 'Support' alternative test — enter</li> <li>(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section</li> </ul>					
512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942()(3)(B)(III)					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					
Part XV   Supplementary Information	(Complete this	part only if the	organization ha	d \$5,000 or moi	e in
assets at any time during th  1 Information Regarding Foundation Management		structions.)			
a List any managers of the foundation who close of any tax year (but only if they have KENNETH EDWARDS	have contributed me	ore than 2% of the than \$5,000) (See	total contributions re e section 507(d)(2))	eceived by the found	dation before the
<b>b</b> List any managers of the foundation who a partnership or other entity) of which the None	own 10% or more o foundation has a 1	of the stock of a colonic of the stock of a colonic of the stock of a colonic of the stock of th	rporation (or an equa rest	ally large portion of	the ownership of
2 Information Regarding Contribution, Gran Check here In the foundation only requests for funds If the foundation make complete items 2a, b, c, and d	nakes contributions	to preselected cha	arıtable organizations		
a The name, address, and telephone number	er of the person to v	whom applications	should be addressed	1	
See Statement 13			•		
<b>b</b> The form in which applications should be	submitted and infor	mation and materi	als they should inclu	de	
See Statement for Line 2a					
c Any submission deadlines					
See Statement for Line 2a					
d Any restrictions or limitations on awards,	such as by geograp	hical areas, charita	able fields, kinds of ii	nstitutions, or other	factors:
See Statement for Line 2a					
BAA	TE	EA0310L 07/06/09	··	F	orm <b>990-PF</b> (2009)

3 Grants and Contributions Paid During the Ye	ar or Approved for Fut	ure Paymen	nt	
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	śubstantial contributor	recipient	Contribution	
a Paid during the year See Statement 14				
			-	
Total		,	► 3a	56,424.
<b>b</b> Approved for future payment				
Total			► 3b	

#### Part XVI-A Analysis of Income-Producing Activities

Enter gro	ss amounts unless otherwise indicated	Unrelated	business income	Excluded	by section 512, 513, or 514	
		(a) Business code	<b>(b)</b> Amount	(c) Exclu- sion	<b>(d)</b> Amount	(e) Related or exempt function income
1 Prog	gram service revenue:	0000		code		(see the instructions)
a			_	<del>                                     </del>		<u>-</u>
b						
				<del>.   </del> -		
_					. —	
f				+		
-	es and contracts from government agencies					
	mbership dues and assessments			- 14		
	rest on savings and temporary cash investments			14		12 (70
	idends and interest from securities			14		12,670.
	rental income or (loss) from real estate	<b>—</b>		+		-
	ot-financed property					
	debt-financed property	-		1 1		<del></del>
	rental income or (loss) from personal property			<del>  </del> -		
	er investment income					
	or (loss) from sales of assets other than inventory	<del>                                     </del>		<del></del>		<del> </del>
	income or (loss) from special events	-				<del>-</del>
	ss profit or (loss) from sales of inventory			<del>                                     </del>		
	er revenue		<del></del>	<del> </del>		
				<del> </del>	· - <u></u> · · ·	
	· · · · · · · · · · · · · · · · · · ·			-		
			<u> </u>		·	
	<u> </u>					<del></del>
e	ototal Add columns (b), (d), and (e)	<del> </del>		<del>                                     </del>	7-21	12,670.
12 500	ototai Add Columns (b), (d), and (e)	1				
	al Add line 12 columns (b) (d) and (e)			•	13	12 670
13 Tota	al. Add line 12, columns (b), (d), and (e)	alculations )		•	13	12,670.
13 Tota (See work	ksheet in the instructions for line 13 to verify c		ment of Even	nt Burno		12,670.
13 Tota (See work	ksheet in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instruction in th	e Accomplish			ses	
13 Tota (See work	ksheet in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instruction in th	e Accomplish			ses	
13 Tota (See work Part XV	ksheet in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instruction in th	e Accomplish			ses	
13 Tota (See work Part XV Line No	ksheet in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instruction in th	e Accomplish			ses	
13 Tota (See work Part XV Line No	ksheet in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instruction in th	e Accomplish			ses	
13 Tota (See work Part XV Line No	ksheet in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instruction in th	e Accomplish			ses	
13 Tota (See work Part XV Line No	ksheet in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instruction in th	e Accomplish			ses	
13 Tota (See work Part XV Line No	ksheet in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instruction in th	e Accomplish			ses	
13 Tota (See work Part XV Line No	ksheet in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instruction in th	e Accomplish			ses	
13 Tota (See work Part XV Line No	ksheet in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instruction in th	e Accomplish			ses	
13 Tota (See work Part XV Line No	ksheet in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instruction in th	e Accomplish			ses	
13 Tota (See work Part XV Line No	ksheet in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instruction in th	e Accomplish			ses	
13 Tota (See work Part XV Line No	ksheet in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instruction in th	e Accomplish			ses	
13 Tota (See work Part XV Line No	ksheet in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instruction in th	e Accomplish			ses	
13 Tota (See work Part XV Line No	ksheet in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instruction in th	e Accomplish			ses	
13 Tota (See work Part XV Line No	ksheet in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instruction in th	e Accomplish			ses	
13 Tota (See work Part XV Line No	ksheet in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instruction in th	e Accomplish			ses	
13 Tota (See work Part XV Line No	ksheet in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instruction in th	e Accomplish			ses	
13 Tota (See work Part XV Line No	ksheet in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instruction in th	e Accomplish			ses	
13 Tota (See work Part XV Line No	ksheet in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instruction in th	e Accomplish			ses	
13 Tota (See work Part XV Line No	ksheet in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instruction in th	e Accomplish			ses	
13 Tota (See work Part XV Line No	ksheet in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instruction in th	e Accomplish			ses	ly to the ne instructions )
13 Tota (See work Part XV Line No	ksheet in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instruction in th	e Accomplish			ses	
13 Tota (See work Part XV Line No	ksheet in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instructions for line 13 to verify confidence in the instruction in th	e Accomplish			ses	

# Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

		Yes	No
1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527,			
relating to political organizations?			Ì
a Transfers from the reporting foundation to a noncharitable exempt organization of			
(1) Cash	1a (1)		<u>X</u>
(2) Other assets	1a (2)		X
b Other transactions	11. (1)		
(1) Sales of assets to a noncharitable exempt organization	1b(1)	-	<u>X</u>
<ul><li>(2) Purchases of assets from a noncharitable exempt organization</li><li>(3) Rental of facilities, equipment, or other assets</li></ul>	1b (2) 1b (3)	-	X
(4) Reimbursement arrangements	1b (4)		<u>X</u>
(5) Loans or loan guarantees	1b (5)		X
(6) Performance of services or membership or fundraising solicitations	1b (6)		X
c Sharing of facilities, equipment, mailing lists, other assets, or paid employees	1c		X
d If the answer to any of the above is 'Yes,' complete the following schedule. Column (b) should always show the fair the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair mai any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received.	ket value in	ue of	
(a) Line no (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, a		ngement	s
N/A			
		-	
	· · · · · · · · · · · · · · · · · · ·		
	<del></del>		
2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?	Yes	X	No
b If 'Yes,' complete the following schedule  (a) Name of organization  (b) Type of organization  (c) Description of response to the following schedule	elationshin		
N/A	Ciationship		
87.12			
Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge are complete. Declaration of preparer (other than taxpayer or fiduciary) is taked on all information of which preparer has any knowledge.	d belief, it is tru	e, correc	t, and
Or Or Galianal			
s ► ///   5/7/2010 ► Presider	it & CEO		
Signature of officer or trustee  Date  Title			
Date 1 In the last of the last	eparer's Identify	ing num	ber
E Paid signature SEAN REPRY CDA SIGNATURE STAN REPRESENTATION OF THE PAID OF T	ee Signature iñ /A	vie insti	15)
Pre- parer's Firm's name (or DOUBLE T TAX  EIN N/A			
Use yours if self	<del>-</del>		
VIIIV   add-cook and	503) 667	-161	.0

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

Department of the Treasury Internal Revenue Service

### **Schedule of Contributors**

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

OMB No 1545-0047

2009

Name of the organization		Employer identification number
THE STARSEED FOUNDATION		93-1243038
Organization type (check one)		- <del> </del>
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organization	
•	4947(a)(1) nonexempt charitable trust <b>not</b> tr	reated as a private foundation
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treate	ed as a private foundation
	501(c)(3) taxable private foundation	
Check if your organization is covered by the Note: Only a section 501(c)(7), (8), or (10)	ne <b>General Rule</b> or a <b>Special Rule</b> ) organization can check boxes for both the General R	Rule and a Special Rule See instructions
General Rule —		
X For an organization filing Form 990, 99 contributor (Complete Parts I and II)	90-EZ, or 990-PF that received, during the year, \$5,00	0 or more (in money or property) from any one
Special Rules –		
509(a)(1)/170(b)(1)(A)(vi) and received from	ing Form 990 or 990-EZ, that met the 33-1/3% supporm any one contributor, during the year, a contribution of the 1h or (ii) Form 990-EZ, line 1 Complete Parts I and	greater of (1) \$5,000 or (2) 2% of the
For a section 501(c)(7), (8), or (10) orgage aggregate contributions of more than sprevention of cruelty to children or anii	ganization filing Form 990 or 990-EZ, that received fro \$1,000 for use <i>exclusively</i> for religious, charitable, scie mals Complete Parts I, II, and III	om any one contributor, during the year, entific, literary, or educational purposes, or the
contributions for use exclusively for rel this box is checked, enter here the total	ganization filing Form 990 or 990-EZ, that received fro ligious, charitable, etc, purposes, but these contributional contributions that were received during the year for parts unless the <b>General Rule</b> applies to this organizat	ons did not aggregate to more than \$1,000 If an exclusively religious, charitable, etc,
religious, charitable, etc, contributions	of \$5,000 or more during the year.	<b>►</b> \$
990-PF) but it must answer 'No' on Part I\	ed by the General Rule and/or the Special Rules does V, line 2 of their Form 990, or check the box on line H e filing requirements of Schedule B (Form 990, 990-EZ	of its Form 990-EZ, or on line 2 of its Form
BAA For Privacy Act and Paperwork Red for Form 990, 990EZ, or 990-PF.	duction Act Notice, see the Instructions	Schedule B (Form 990, 990-EZ, or 990-PF) (2009)

	<b>B</b> (Form 990, 990-EZ, or 990-PF) (2009)	Page 1	of 1 of Part I
Name of org		' '	r identification number
	TARSEED FOUNDATION	93-1.	243038
Part I	Contributors (see instructions )		
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	STEPHEN EDWARDS  17691 SE 362ND  SANDY, OR 97055	\$24,000.	Person X Payroll Noncash  (Complete Part II if there is a noncash contribution)
(2)			
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
	KENNETH EDWARDS PO BOX 1001	\$25,000.	Person X Payroll Noncash  (Complete Part II if there
	SANDY, OR 97055		(Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)

Schedule B (Form 990, 990-EZ, or 990-PF) (2009)

of Part I

Schedule E	3 (Form 990, 990-EZ, or 990-PF) (2009)	Page		1 of Part II
Name of organ	ARSEED FOUNDATION		93-1243	
			93-1243	5036
Part II	Noncash Property (see instructions.)			
(a) No. from Part I	(b) Description of noncash property given	FMV (d	(c) or estimate) structions)	(d) Date received
	N/A			
		\$		
(a) No. from Part I	(b)  Description of noncash property given	FMV (c	(c) or estimate) structions)	(d) Date received
		\$		
(a) No. from Part I	(b) Description of noncash property given	FMV (d	(c) or estimate) structions)	(d) Date received
		\$		
(a) No. from Part I	(b)  Description of noncash property given	FMV (d	(c) or estimate) structions)	(d) Date received
		\$		
(a) No. from Part I	(b)  Description of noncash property given	FMV (d	(c) or estimate) structions)	(d) Date received
		\$		
(a) No. from Part I	(b) Description of noncash property given	FMV (d	(c) or estimate) structions)	(d) Date received

Schedule **B** (Form 990, 990-EZ, or 990-PF) (2009)

of 1

of Part III

Name of organization

Employer identification number

	ARSEED FOUNDATION			93-1243038	
Part III	Exclusively religious, charitable, e organizations aggregating more t	etc, individual contribution han \$1,000 for the year.	ons to secti Complete cols	on 501(c)(7), (8), or (10) (a) through (e) and the following	Ine entry)
	For organizations completing Part III, enter contributions of \$1,000 or less for the year	. (Enter this information once -	haritable, etc, - see instructi	ons ) • \$	N/A
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d)  Description of how gift i	s held
	N/A				
	Transferee's name, addres	(e) Transfer of gift ss, and ZIP + 4	Rela	ationship of transferor to transfe	eree
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift i	s held
	Transferee's name, addres	(e) Transfer of gift ss, and ZIP + 4	Rela	ntionship of transferor to transfe	eree
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is	s held
	Transferee's name, addres	(e) Transfer of gift ss, and ZIP + 4	Rela	itionship of transferor to transfe	eree
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is	s held
	Transferee's name, addres	(e) Transfer of gift ss, and ZIP + 4	Rela	tionship of transferor to transfe	eree

Fe	deral State	ments		Page
THE !	STARSEED FOU	NDATION	·	93-124303
<del></del>	·	-		
Total	\$ 1,621.	\$ 812.		\$ 811.
Total	\$ 642. 184.	\$ 642. 184.		-
			(c) Adjusted Net Income	(d) Charitable Purposes
3	565. 108. 435. 148.	\$ 33. 227. 218.		\$ 337 108 218 148
Total		\$ 478.	\$ 0.	\$ 1,463
	Total	(a) Expenses per Books \$ 1,621.  Total \$ 1,621.  (a) Expenses per Books \$ 642. 184. Total \$ 826.  (a) Expenses per Books \$ 642. 184. \$ 108. \$ 108. \$ 33. \$ 565. 108. 435. 148. 652.	Expenses   Investment   Income   \$ 1,621.   \$ 812.   \$ 81	Ca

Corporate Stocks	Valuation	Book	Fair Market
	<u>Method</u> _	<u>Value</u>	Value
854 SH CHEVRON STOCK 19349.9 SH FIRST EAGLE TR FD OF AMERICA 750 SH M&T BANK 5943 SH FIRST EAGLE GLOBAL FUND 119.78 SH FIRST EAGLE GOLD FUND 6575 SH FIRST EAGLE OVERSEAS FUND	Mkt Val \$ Mkt Val Mkt Val Mkt Val Mkt Val Mkt Val Mkt Val Total \$	10,920. 437,289. 10,087. 211,311. 3,178. 149,188. 821,973.	415,636. 50,168. 237,602. 3,426. 127,950.

009	Federal Stat	tements			Page
	THE STARSEED F	OUNDATION			93-124303
Statement 5 Form 990-PF, Part II, Line 10c Investments - Corporate Bonds					
Corporate Bonds		Valuation <u>Method</u>	Boo Val		ir Market Value
135899 SH REICH & TANG DAILY	INCOME FD	Mkt Val Total		9,717. \$ 9,717. \$	159,717. 159,717.
Statement 6 Form 990-PF, Part II, Line 14 Land, Buildings, and Equipment				•	
Category	Basis	Accum. Deprec.		ok Fa	air Market Value
Furniture and Fixtures Total	\$ 1,552.\$	618.	\$	934. \$ 934. \$	0.
Statement 7 Form 990-PF, Part II, Line 15 Other Assets			Book V		r Market Value
Form 990-PF, Part II, Line 15		Total	<u>Book V</u> \$ \$		r Market Value
Form 990-PF, Part II, Line 15 Other Assets MISCELLANEOUS	Title a	and	\$	333. 1. 334. \$	O. Expense
Form 990-PF, Part II, Line 15 Other Assets  MISCELLANEOUS Rounding  Statement 8 Form 990-PF, Part VIII, Line 1		and Jours Coi	\$	333. 1. 334. \$	O.  Expense Account/
Form 990-PF, Part II, Line 15 Other Assets  MISCELLANEOUS Rounding  Statement 8 Form 990-PF, Part VIII, Line 1 List of Officers, Directors, Trustees,	Title a Average H	and Jours Coi	\$ \$ npen-	Contribution to EBP & DC	Expense Account/ Other
Form 990-PF, Part II, Line 15 Other Assets  MISCELLANEOUS Rounding  Statement 8 Form 990-PF, Part VIII, Line 1 List of Officers, Directors, Trustees,  Name and Address  KENNETH EDWARDS 18020 SE 370TH AVE	Title a Average H <u>Per Week De</u> President	and Hours Comevoted sa	\$ s mpen- tion	Contribution to EBP & DC	Expense Account/ Other

ļ

1

ł

i

- -

2009

### **Federal Statements**

Page 3

#### THE STARSEED FOUNDATION

93-1243038

Statement 8 (continued)
Form 990-PF, Part VIII, Line 1
List of Officers, Directors, Trustees, and Key Employees

Name and Address	Title and Average Hours Per Week Devoted	Compen- sation	Contri- bution to EBP & DC	Expense Account/ Other
CRAIG CLARK 956 OAK STREET SILVERTON, OR 97381	Director 0.25	\$ 0.	\$ 0.	\$ 0.
ANN EDWARDS PO BOX 1001 SANDY, OR 97055	Director 0.25	0.	0.	0.
	Total	\$ 0.	\$ 0.	\$ 0.

Statement 9 Form 990-PF, Part IX-A, Line 1 Summary of Direct Charitable Activities

Direct Charitable Activities Expenses
WHITE BIRD NEST PROGRAM \$ 5,001.

STARSEED SUPPORTED THE WHITE BIRD COMMUNITY PARTNERS AND ARTISTIC COLLABORATION PROGRAM. THE FUNDS ARE USED FOR OUTREACH PROGRAMS TO PROVIDE SEATS AT CULTURAL EVENTS FOR CHILDREN AND THE NEEDY. IN ADDITION, THIS DONATION HELPS KEEP TICKETS AFFORDABLE, COMMISSIONS NEW WORKS, AND HELPS TO MAINTAIN THE EDUCATION AND OUTREACH PROGRAMS FOR PORTLAND, OREGON AREA STUDENTS AND COMMUNITY HUMAN SERVICE ORGANIZATIONS.

Statement 10 Form 990-PF, Part IX-A, Line 2 Summary of Direct Charitable Activities

Direct Charitable Activities Expenses
OREGON REPERTORY SINGERS \$ 5,000.

THE MISSION OF OREGON REPERTORY SINGERS IS TO INSPIRE AND NURTURE A LOVE OF CHORAL MUSIC FOR THE COMMUNITY BY PERFORMING A DIVERSE REPERTOIRE OF HIGH ARTISTIC QUALITY. THE YOUTH CHOIR PROGRAM NEVER TURNS AWAY A CHILD INTERESTED IN CHORAL MUSIC PERFORMING. DONATED FUNDS WERE DIRECTED TOWARDS PROVIDING OPPORTUNITIES FOR CHILDREN UNABLE TO AFFORD THE COSTS OF THE PROGRAM.

2009

## **Federal Statements**

Page 4

THE STARSEED FOUNDATION

Statement 11 Form 990-PF, Part IX-A, Line 3 **Summary of Direct Charitable Activities** 

Direct Charitable Activities

Expenses

OREGON SHAKESPEARE FETIVAL

5,000.

THE PREMIER SHAKESPEARE FESTIVAL IN THE UNITED STATES PROVIDES DISCOUNTED TICKETS TO 60,000 STUDENTS, SEMINARS, AND EXPOSURE TO LIVE PERFORMANCE FOR THOUSANDS OF STUDENTS ACROSS THE STATE. DONATED FUNDS WERE DIRECTED TOWARDS THE ONGOING CHILDREN'S PROGRAMS OF THE FESTIVAL.

Statement 12 Form 990-PF, Part IX-A, Line 4 **Summary of Direct Charitable Activities** 

Direct Charitable Activities

Expenses

CLACKAMAS CHILDREN'S COMMISSION--HEAD START

Ś 4,772.

CLACKAMAS CHILDREN'S COMMISSION IS THE GRANTEE FOR HEAD START PROGRAMS IN CLACKAMAS COUNTY, OREGON. THE HEAD START PROGRAM OPERATES 7 LOCATIONS, SERVING 572 PRESCHOOL CHILDREN. THE MAJORITY OF THE CHILDREN COME FROM MIGRANT OR POVERTY LEVEL FAMILIES. DONATIONS ARE FOR CAPITAL IMPROVEMENTS (CLASSROOMS), AND SUPPORT PROGRAMS FOR CHILDREN (SCHOOL SUPPLIES, ETC)

#### Statement 13 Form 990-PF, Part XV, Line 2a-d **Application Submission Information**

Name of Grant Program:

VARIOUS COMMUNITY GRANTS

Name:

STARSEED FOUNDATION KENNETH EDWARDS

Care Of:

Street Address:

PO BOX 1001

City, State, Zip Code:

SANDY, OR 97055

Telephone:

503-668-8662

Form and Content:

POST OFFICE CORRESPONDENCE IN LETTERHEAD PAPER FORMAT.

REQUEST REQUIRES THE FOLLOWING INFORMATION:
(1) NAME AND ADDRESS OF REQUESTING ORGANIZATION

NAME OF SUBMITTING PERSON (2)

DESCRIPTION OF WHAT IS REQUESTED AND WHY IT IS NEEDED (3) AND WHO WILL BENEFIT FROM THE GRANT. A TIME TABLE OR PLAN

FOR DISBURSEMENT IS HELPFUL.

Submission Deadlines: Restrictions on Awards: THERE ARE NO SUBMISSION DEADLINES.

THERE ARE NO RESTRICTIONS ON AWARDS, HOWEVER, EDUCATION

PROGRAM ASSISTANCE IS GIVEN PRIORITY.

93-1243038

20	2
ZU	uy

## **Federal Statements**

Page 5

THE STARSEED FOUNDATION

93-1243038

#### Statement 14 Form 990-PF, Part XV, Line 3a Recipient Paid During the Year

Name and Address	Donee <u>Relationship</u>	Found- ation Status	Purpose of Grant	Amount
CLACKAMAS CHILDREN'S COMMISSION PO BOX 6 MARYLHURST, OR 97036	Relacionship	Status	ART AND EDUCATION ENHANCEMENT	\$ 4,772.
GARDENING SUPPLIES PORTLAND, OR			HUNGER SUPPORT PROGRAMS	118.
MAGIC MOUNTAINS CHILDREN S STRAFFORD, VT			PRESCHOOL SCHOOL PROGRAMS	1,000.
TICKETS FOR THEATRE PRODUCTION Total PORTLAND, OR			ARTISTIC PROGRAM	83.
ART MEDIA PORTLAND, OR			ART SUPPORT	254.
BOSTON MUSEUM FINE ART BOSTON, MA			ART SUPPORT	49.
BUCKMAN ART SCHOOL 320 SE 16TH AVE PORTLAND, OR 97214			ELEMENTARY SCHOOL PROGRAMS	300.
CASA 1401 NE 68TH AVE PORTLAND, OR 97213			MISC COMM SUPPORT	250.
CASCADE AIDS 208 SW 5TH PORTLAND, OR 97204			EDUCATION	200.
CHESS FOR SUCCESS 2701 NW VAUGHN PORTLAND, OR 97210			MIDDLE SCHOOLS PROGRAM	500.
CHRISTMAS TREE FUNDRAISER SANDY, OR 97055	-		HIGH SCHOOL PROGRAMS	50.
CITY OF SANDY 39250 PIONEER BLVD SANDY, OR 97055			MISC COMM SUPPORT	100.
DEMOCRACY IN ACTION SAN DIEGO, CA			MISC COMM SUPPORT	250.
FRANCONIA SCULPTURE PARK 29836 ST CROIX TRAIL FRANCONIA, MN 55074			EDUCATION SUPPORT OTHER	1,000.

009	Federal Stat	ements		Page (
	THE STARSEED FO	DUNDATION		93-124303
Statement 14 (continued) Form 990-PF, Part XV, Line 3a Recipient Paid During the Year				
Name and Address	Donee Relationship	Found- ation Status	Purpose of Grant	Amount
FRIENDS OF HOOD RIVER READS 502 STATE STREET HOOD RIVER, OR 97031			LITERACY PROGRAMS	\$ 1,500
HEIFER INTERNATIONAL 1 WORLD AVENUE LITTLE ROCK, AK 72202			INTERNATIONAL RELIEF PROGRAMS	360
HOOD RIVER COMMUNITY HOOD RIVER, OR			MUSIC PROGRAMS	2,500
HUMAN SOLUTIONS 12350 SE POWELL BLVD PORTLAND, OR 97236			HUNGER ORGANIZATIONS	1,000
HUNTINGTONS DISEASE SAN FRANCISCO, CA			MISC COMM SUPPORT	100
IMAGO THEATRE 17 SE 8TH AVE PORTLAND, OR 97214			THEATRE PROGRAM	500
IMPACT NORTHWEST 4610 SE BELMONT PORTLAND, OR 97215			SENIOR CITIZEN PROGRAM SUPPORT	1,000
INTERLEAVE PRESS LOVELAND, CO			ART SUPPORT	83
JEFFERSON DANCERS 5210 N KERBY PORTLAND, OR 97217			DANCE ORGANIZATIONS	500
LOAVES & FISHES 7710 SE 31ST AVE PORTLAND, OR 97280			HUNGER ORGANIZATIONS	103
MIDLAND SCHOOL LIBRARY PROGRAM 5100 FIGUEROA MTN ROAD LOS OLIVOS, CA 93441			HIGH SCHOOL LIBARAY PROGRAMS	484
MODEST NEEDS FOUNDATION 115 E 30TH FL 1 NEW YORK, NY 10016			MISC COMM SUPPORT	750
NORTH BRANCH SCHOOL 898 LINCOLN ROAD RIPTON, VT 5766			MIDDLE SCHOOLS PROGRAMS	500

2009	Federal Stat	ements		Page 7
	THE STARSEED FO	DUNDATION		93-1243038
Statement 14 (continued) Form 990-PF, Part XV, Line 3a Recipient Paid During the Year				
Name and Address	Donee Relationship	Found- ation Status	Purpose of Grant	Amount
OREGON BALLET THEATRE 818 SE 6TH AVE PORTLAND, OR 97214		,	DANCE SOME SOME SOME SOME SOME SOME SOME SOM	
OREGON PUBLIC BROADCASTING 7140 SW MACADAM AVE PORTLAND, OR 97219			MISC COMM SUPPORT	95.
OREGON READS 2009 , OR			OREGON READS	247.
OREGON REPERTORY SINGERS 9320 SW BARBUR BLVD PORTLAND, OR 97219			MUSIC PROGRAMS	5,000.
OREGON SHAKESPEARE FESTIVAL 15 S PIONEER ASHLAND, OR 97520			THEATRE PROGRAM	5,000.
OREGON TRAIL SCHOOL DISTRICT PO BOX 5437 SANDY, OR 97055			HIGH SCHOOL LIBARAY PROGRAMS	1,077.
OUR HOUSE OF PORTLAND 2727 SE ALDER PORTLAND, OR 97214			EDUCATION	3,831.
PACIFIC NORTHWEST			CREATIVE ARTS ORG SUPPORT	100.
PEAR 338 NW 6TH AVE PORTLAND, OR 97209			ARTISTIC PROGRAM	4,356.
PORTLAND ART MUSEUM 1219 SW PARK AVE PORTLAND, OR 97205			CREATIVE ARTS ORG SUPPORT	500.
PORTLAND CENTER STAGE 128 NW 11TH AVE PORTLAND, OR 97209			THEATRE PROGRAM	80.
QUILT VISIONS 2825 DEWEY ROAD SAN DIEGO, CA 92106			LIBARAY PROGRAMS	58.
RECYCLING ADVOCATES PO BOX 6736 PORTLAND, OR 97228			CONSERVATIONS GROUPS	750.
			•	

2009	Federal Stat	ements		Page 8
	THE STARSEED FO	DUNDATION		93-1243038
Statement 14 (continued) Form 990-PF, Part XV, Line 3a Recipient Paid During the Year				
Name and Address	Donee Relationship	Found- ation Status	Purpose of Grant	Amount
SANDY ACTION CENTER FOOD DRIVE 38982 PIONEER BLVD SANDY, OR 97055			HUNGER ORGANIZATIONS	\$ 559
SANDY PUBLIC LIBRARY 38980 PROCTOR BLVD SANDY, OR 97055			LITERACY PROGRAMS	3,006
SCRAP 2915 NE MLK BLVD PORTLAND, OR 97212			ARTISTIC PROGRAM	1,000
SPECIAL OLYMPICS OREGON 5901 SW MACADAM AVE PORTLAND, OR 97239			MISC COMM SUPPORT	250
STREET ROOTS 211 NW DAVIS PORTLAND, OR 97209			HUNGER ORGANIZATIONS	350
TUALATIN RIVERKEEPERS 12360 SW MAIN STREET PORTLAND, OR 97223			CONSERVATIONS GROUPS	750
WHITE BIRD NEST PO BOX 99 PORTLAND, OR 97207			DANCE ORGANIZATIONS	5,001
WILDERNESS INQUIRY PROGRAM 808 14TH AVE SE MINNEAPOLIS, MN 55414			CONSERVATION GROUPS	1,000
WORK TRAINING CENTER 2140 FAIR STREET CHICO, CA 95928				2,049
WYEAST ARTISANS GUILD PO BOX 682 SANDY, OR 97055				1,559
			Total	\$ 56,424