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Form **990**

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

► The organization may have to use a copy of this return to satisfy state reporting requirements

OMB No 1545-0047

2010

					Anspection
		2010 calendar year, or tax year beginning 07-01-2010 and ending 06-30-2011 C Name of organization		D Employer	identification number
_		SEVENTH GÉNERATION FUND FOR INDIAN DEV			
_	Iress ch	Doing Business As		68-0027	247
_	ne cha			E Telephone	number
Inıt	ıal retu	Number and street (or P O box if mail is not delivered to street address)	Room/suite	(707) 82	5-7640
_ Ter	mınate	PO Box 4569			
- Am	ended			G Gross receip	ots \$ 1,195,783
– App	lication	Arcata, CA 95518 n pending			
		F Name and address of principal officer	H(a) Is this a	group return for affil	ıates?
			10 (110 01	group recurring ann	ideas y res
				affiliates included	
					t (see instructions)
Ta	x-exen	npt status	H(c) Group	exemption n	umber F
w	ebsit e	e: ▶ www 7 genfund org			
		<u> </u>			M Chata of Land describe CA
	n or or rt I	ganization ✓ Corporation ✓ Trust ✓ Association ✓ Other ► Summary	L Year of for	nation 1984	M State of legal domicile CA
Га					
		Briefly describe the organization's mission or most significant activities SUPPORT OF NATIVE AMERICAN PROGRAMS			
3	:				
Governance					
<u>.</u>	,		more than 25	0% of its net	as sats
3		·	more than 25	3 / 3 OF ILS HEL 8	1 0
ø		Number of voting members of the governing body (Part VI, line 1a)		4	9
<u> </u>				5	17
Activities &		Total number of individuals employed in calendar year 2010 (Part V, line 2a). Total number of volunteers (estimate if necessary)		6	17
Ş		Total unrelated business revenue from Part VIII, column (C), line 12		7a	0
		Net unrelated business taxable income from Form 990-T, line 34		7a 7b	0
		Net difference business taxable medine from 15th 1550-17, fine 54-1-1	Prior	Year	Current Year
	8	Contributions and grants (Part VIII, line 1h)	71101	1,340,484	1,129,229
ā	9	Program service revenue (Part VIII, line 2g)		28,630	37,431
Ravent	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		6,424	18,929
ã	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		1,748	10,194
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line			
		12)		1,377,286	1,195,783
	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)		293,153	367,072
	14	Benefits paid to or for members (Part IX, column (A), line 4)			0
χ ₂	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	-	436,366	522,577
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		130,300	0
<u>⊕</u>	ь	Total fundraising expenses (Part IX, column (D), line 25) ►30,854			
Ð	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)		744,300	531,641
	18	Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)		1,473,819	1,421,290
	19	Revenue less expenses Subtract line 18 from line 12		-96,533	-225,507
æ 60			Beginning	of Current	<u> </u>
ē Š				ar	End of Year
net Assets of Fund Bafances	20	Total assets (Part X, line 16)		866,015	558,770
2 E	21	Total liabilities (Part X, line 26)		137,702	55,964
	22	Net assets or fund balances Subtract line 21 from line 20		728,313	502,806
Par	t II	Signature Block			
anowl		Ities of perjury, I declare that I have examined this return, including accompanying sch and belief, it is true, correct, and complete. Declaration of preparer (other than officer)			
		*****		.2-03-06	
Sign		Signature of officer	Dat	e	
Here	2	Tia Oros Peters Executive Director			
		Type or print name and title	1		
		Print/Type preparer's signature Preparer's signature Kim Windsor Date of the Windsor		heck if self- mployed 🕨 🦵	PTIN
Paid		Firm's name Hunter Hunter & Hunt CPAs		<u> </u>	Firm's EIN
Prepa		Firm's address • 1315 Fourth Street			
Use (Only	Fureka CA 95501			Phone no ► (707) 476- 0674

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

┌Yes ┌No

F	r	n	n	9	9	U	(2	U	1	U)	

age	2
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Par		nt of Program Service hedule O contains a respo				F
1	Briefly describe t	he organization's mission				
SUP	PORT OF NATIVE	AMERICAN PROGRAMS				
2	Did the organization	on undertake any significar D or 990-EZ?		ervices during the yea		Yes 🔽 No
	If "Yes," describe	these new services on Sch	iedule O			
3	Did the organization	on cease conducting, or ma	ake sıgnıfıca • • • •	nt changes in how it co		Yes ▼ No
	If "Yes," describe	these changes on Schedul	e O			
4	Section 501(c)(3)		ns and secti	on 4947(a)(1) trusts	e largest program services by ex are required to report the amoun service reported	
4a	(Code) (Expenses \$	454,583	ıncludıng grants of \$	204,484) (Revenue \$	8,245)
	advocacy and wome		SGF provides s	upport to grassroots Native	o empower them to participate in all for communities and cultural arts organizat to express cultural diversity	
	(Code) (Expenses \$	339,546	including grants of \$	117,568) (Revenue \$	6,221)
7.5	SGF provides small g	rants and technical assistance to	Indigenous pe	oples involved in front line	grassroots action, advocacy for environi idustries or by companies or practices th	mental and social justice and
	(Code) (Expenses \$	298,911	including grants of \$	45,020) (Revenue \$	22,965)
4c	•	, , , ,	,	3 3 '	45,020) (Revenue \$ mmunity-based projects striving for hol	, ,
		ts traditional agricultural method			able strategies for development that pre	
4d	Other program s	ervices (Describe in Sche	dule O)			
	(Expenses \$	ınclu	ding grants o	f\$) (Revenue \$)
4e	Total program se	rvice expenses►\$	1,093,04	10		

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instruction)? 🤨	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		Νο
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	Yes	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 2	8	Yes	
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in term, permanent,or quasi- endowments? If "Yes," complete Schedule D, Part V	10		Νo
11	If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line10? If "Yes," complete Schedule D, Part VI.	11a		Νο
Ь	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.	11b	Yes	
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.	11c		N o
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.	11d		No
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
Ь	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? <i>If</i> " <i>Yes,"</i> complete Schedule F, Parts I and IV	14b	Yes	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the U S? If "Yes," complete Schedule F, Parts II and IV	15	Yes	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the U S ? If "Yes," complete Schedule F, Parts III and IV .	16		No
17	Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If</i> "Yes," complete Schedule G, Part I (see instructions)	17		N o
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If</i> "Yes," complete Schedule G, Part II	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		N o
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		Νo
Ь	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? Note. Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20b		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23		No
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b-24d and complete Schedule K. If "No," go to line 25	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		Νo
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		Νο
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		Νo
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Νο
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		Νο
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27	Yes	
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b	Yes	
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	Yes	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Νο
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? <i>If</i> "Yes," complete Schedule R, Part I	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		No
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35		No
а	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2			
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	

Form 990 (2010)

Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response to any question in this Part V		.୮	
			Yes	No
а	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable			
h	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable			
_	1b 0			
C	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes	
1	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements filed for the calendar year ending with or within the year covered by this return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?			
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
	Did the organization have unrelated business gross income of \$1,000 or more during the			
	year?	3a		N (
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		N ·
1	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4a		N c
b	If "Yes," enter the name of the foreign country 🕨			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		N
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		N (
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?			N.
		5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	6a		N ·
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		N ·
a	Organizations that may receive deductible contributions under section 170(c). Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and	7a		N
-	services provided to the payor?			
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		N
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		_N
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d 0			
_	Did the construction of the description of the desc			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		N (
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		N
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		l No
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a	- 9		
	Form 1098-C?	7h		No
	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess			
	business holdings at any time during the year?	8		N c
	Sponsoring organizations maintaining donor advised funds.			
	Did the organization make any taxable distributions under section 4966?	9a		No
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		N c
)	Section 501(c)(7) organizations. Enter Initiation fees and capital contributions included on Part VIII, line 12 10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club			
_	facilities			
L	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
Ь	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		N O
	If "Yes," enter the amount of tax-exempt interest received or accrued during the	124		IN .
	year 12b			
	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a		N.
ь	Enter the amount of reserves the organization is required to maintain by the states			
	in which the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand 13c			
la	Did the organization receive any payments for indoor tanning services during the tax year?	14a		N c
L	If "Vec " has it filed a Form 720 to report these payments? If "No " provide an explanation in Schedule O	14b		N.

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Check if Schedule O contains a response to any question in this Part VI										. F	7
---	--	--	--	--	--	--	--	--	--	-----	---

_Se	ction A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	Yes	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		Νο
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Does the organization have members or stockholders?	6		Νο
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a		No
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
ь	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		Νο
	ection B. Policies (This Section B requests information about policies not required by the Internal venue Code.)			
	•		Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a		No
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	10b		Νο
11a	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?			
		11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	Yes	
13	Does the organization have a written whistleblower policy?	13	Yes	
14	Does the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a		Νo
b	Other officers or key employees of the organization	15b		Νο
	If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
h	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its	_04		
	participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16b		Νο
Se	ction C. Disclosure	· I		
17	List the States with which a copy of this Form 990 is required to be filed ▶OK, NY, MN, CA			
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)			
	(3)s only) available for public inspection. Indicate how you make these available. Check all that apply Own website. Another's website. Upon request			

- Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table
- State the name, physical address, and telephone number of the person who possesses the books and records of the organization 🕨 20 Tia Oros Ex Director

425 I Street

Arcata, CA 95521

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

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

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

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

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

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

Check this box if neither the organ	ization nor any re	lated o	rganı	zatio	nco	mpen	sate	d any current office	r, dırector, or trust	ee
(A) Name and Title	(B) Average hours		tion (that a	(che		II		(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other
	per week (describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
(1) TUPAC ENRIQUE-ACOSTA BOARD MEMBER	2 30	х						100	0	0
(2) TONYA GONNELLA FRICHNER Vice-Chairperso	2 30	х						100	0	0
(3) TIA OROS PETERS Executive Direc	40 00			х				52,133	0	16,907
(4) SUSANA GELIGA BOARD MEMBER	2 30	х						100	0	0
(5) ROSALIE LITTLE THUNDER Chairperson	2 30	х						160	0	0
(6) RAY WILLIAMS Director	2 30	х						100	0	0
(7) HENRIETTA MANN BOARD MEMBER	2 30	Х						100	0	0
(8) Dr LUIS MACAS Board Member	2 30	х						100	0	0
(9) CHRISTOPHER H PETERS President & CEO	40 00			х				61,192	0	34,512
(10) Chief Oren Lyons Board Member	2 30	Х						100	0	0
(11) ARTHUR MANUEL Secretary	2 30	Х						100	0	0

\$100,000 in compensation from the organization ▶0

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

	(A) Name and Title	(B) Average hours per	1	tion (that a					(D) (E) Reportable Reportable compensation compensation from related			(F) Estimated amount of other compensation	
		week (describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Officei	Ke) employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)		from t organizati relat organiza	the ion and ed
_													
_								-			+		
_	Total from continuation sheet							>	114,285		_		51,419
<u> </u>	Total (add lines 1b and 1c)								,				31,419
	Total number of individuals (in \$100,000 in reportable compe	-				ted	above)) who	received more tha	n			
										r		Yes	No
	On line 1a? If "Yes," complete S							ee,o •	or highest compens	ated employee	3		No
	For any individual listed on line organization and related organi												
	Did any person listed on line 1			• nancs	• •	fron	• • • • •	• Inrol	lated organization o	r individual for	4		No
	services rendered to the organ		-						_		5		Νo
Se	ction B. Independent Co	ntractors											
	Complete this table for your five \$100,000 of compensation fro	e highest comper		ndep	ende	ent c	ontrac	tors	that received more	than			
	N:	(A) ame and business add	dress						Descr	(B) iption of services		(C Comper	
_											-		
_													

		2010)					Р	age 9
Part V		Statement of Revenu	ue		(A) Total revenue	(B) Related or exempt	(C) Unrelated business revenue	(D) Revenue
						function		from tax under section
								512, 513, oi 514
<u> </u>	1a	Federated campaigns	1a					
로 () ()	b	Membership dues	. 1b					
, E	С	Fundraising events	. 1c					
<u>_</u> =	d	Related organizations	. 1d					
을 등	е	Government grants (contributions)	1 e					
and other similar amounts	f All other contributions, gifts, grants, and similar amounts not included above q Noncash contributions included in lines 1a-1f \$							
		Total. Add lines 1a-1f			1,129,229			
	<u></u>	Total Add Inics Id II I		Business Code	, ,			
Program Serwice Revenue	2a	Consulting income		900099	37,431	37,431		
-Bev	b							
15e	c							
38	d							
Tan I	e f	All other program service rev	venue					
္နို					27.424			
		Total. Add lines 2a-2f Investment income (including			37,431			
		and other similar amounts)		-	1,195			1,1
		Income from investment of tax-ex			0			
	5	Royalties			0			
	6 -	Gross Rents	(ı) Real	(II) Personal				
		Less rental						
	c	expenses Rental income						
		or (loss) Net rental income or (loss)	-		0			
-		[(ı) Securities	(II) O ther				
		Gross amount from sales of assets other	17,734					
	Ь	than inventory Less cost or						
		other basis and sales expenses						
		Gain or (loss)	17,734		17,734	17,734		
,		Net gain or (loss)			17,734	17,734		
3		(not including	ig events					
2		\$ of contributions reported on	line 1c)					
<u> </u>		See Part IV, line 18						
	ь	Less direct expenses						
		Net income or (loss) from fur			0			
			ctivities See Part IV, line 19 . a					
		Less direct expenses Net income or (loss) from ga		b	0			
ŀ		Gross sales of inventory, les						
		returns and allowances .	a					
		Less cost of goods sold .						
	С	Net income or (loss) from sa Miscellaneous Revenue	les of inventory F	Business Code	0			
	11a	Miscellaneous Revenue		Business Code 900099	10,194			10,1
	b				·			<u> </u>
	c							
	d	All other revenue						
	e	Total. Add lines 11a-11d			10,194			
	4.		₽		10,194			
	12	Total revenue. See Instruction	ons • • • • • • • • • • • • • • • •		1,195,783	55,165		11,3

,				Page 10
			(D)	
ot include amounts reported on lines 6b,	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising expenses
Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	354,746		general expenses	Схрепэсэ
Grants and other assistance to individuals in the U.S. See Part IV, line 22		22,7		
Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16	12,326	12,326		
Benefits paid to or for members	0			_
Compensation of current officers, directors, trustees, and key employees	164,743	123,557	37,067	4,119
Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0			
Other salaries and wages	302,165	226,623	67,987	7,555
Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	2,656	1,993	598	65
Other employee benefits	14,879	11,159	3,348	372
Payroll taxes	38,134	28,601	8,580	953
Fees for services (non-employees)	0	·		
	620		620	
	27,699		27,699	
	0		·	
	0			
	0			
-			29 858	6,464
		,	25,555	5,151
·	0			
-	0			
			16.083	1,787
		,	 	4,728
Payments of travel or entertainment expenses for any federal,	,	122,131	02,237	1,720
	76.196	57.147	17.144	1,905
	0	,	,	·
	0			
	0			
	1.560	1.170	351	39
Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)	-,	-,-::		
TELEPHONE	26,359	19,769	5,931	659
SUPPLIES	26,567	19,925	5,978	664
Postage and Shipping	13,342	10,006	3,002	334
MISCELLANEOUS	15,091	11,318	3,396	377
Equipment Rental & Maint	10,791	8,093	2,428	270
All other expenses	22,734	17,102	5,069	563
Total functional expenses. Add lines 1 through 24f	1,421,290	1,093,040	297,396	30,854
Joint costs. Check here ► ✓ If following SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				
	Section 501(c)(3) and 501(c)(4) organizations must be there organizations must complete column (A) but are not required to a cot include amounts reported on lines 6b, b, 9b, and 10b of Part VIII. Grants and other assistance to governments and organizations in the U S See Part IV, line 21 Grants and other assistance to individuals in the U S See Part IV, line 22 Grants and other assistance to governments, organizations, and individuals outside the U S See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Other salaries and wages Pension plan contributions (include section 401(k) and section 403(b) employer contributions) Other employee benefits Payroll taxes Fees for services (non-employees) Management Legal Accounting Lobbying Professional fundraising services See Part IV, line 17 Investment management fees Other Advertising and promotion Office expenses Occupancy Travel Payments of travel or entertainment expenses for any federal, state, or local public officials Conferences, conventions, and meetings Interest Payments to affiliates Depreciation, depletion, and amortization Insurance Other expenses I temize expenses not covered above (List misscellaneous expenses in line 24f I filine 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O) TELEPHONE SUPPLIES Postage and Shipping MISCELLANEOUS Equipment Rental & Maint All other expenses. Total functional expenses. A dd lines 1 through 24f Joint costs. Check here ▶ if following SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a	Section 501(c)(3) and 501(c)(4) organizations must complete column (a) but are not required to complete column (b), by the are not required to complete column (b), by the are not required to complete column (b), by the are not required to complete column (b), by the are not required to complete column (b), by the are not required to complete column (b), by the are not required to complete column (b), by the are not required to complete column (b), by the are not required to complete column (c), by the are not required to complete column (c), by the are not required to complete column (c), by the are not required to complete column (c), by the are not required to complete column (c), by the are not required to complete column (c), by the are not required to complete column (c), by the are not required to complete column (c), by the are not required to complete column (c), by the are not required to complete column (c), by the are not required to complete column (c), by the are not required to complete column (c) and the are not required to complete column (c) and the are not required to complete column (c) and the are not required to complete column (c) and the area of the ar	In their organizations must complete columns (B) (b) (C), and to include amounts resported onlines (B), (C), and to include amounts resported onlines (B), (C), and (B), (D), and (D) or include amounts resported on lines (B), (D), and (D), (D), and (D) or include amounts resported on lines (B), (D), and (D), (D), and (D) or include amounts resported on lines (B), (D), and (D), (D), and (D), (D), (D), (D), (D), (D), (D), (D),	The the roganizations must complete column (A) but are not required to complete column (B), (C), and (D), (B), (C), and (D), (D), and (D) of Part VIII. Grants and other assistance to governments and organizations in the US See Part IV, line 21

Part X Balance Sheet (A) (B) Beginning of year End of year 0 1 Cash—non-interest-bearing 534,025 447.757 2 2 Savings and temporary cash investments 244,500 1,000 3 3 14,737 4 5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of 5 0 Schedule L . 6 Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers, and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) 0 6 0 2,424 7 0 8 Inventories for sale or use 8 Prepaid expenses and deferred charges 33,702 9 26,813 10a Land, buildings, and equipment cost or other basis Complete Part 70.030 10a VI of Schedule D 10b 70.030 ь Less accumulated depreciation 10c 0 0 11 11 46,705 63,367 12 Investments—other securities See Part IV, line 11 12 0 13 13 Investments—program-related See Part IV, line 11 . . 0 14 14 4,659 15 5,096 15 16 866.015 16 558,770 **Total assets.** Add lines 1 through 15 (must equal line 34) . . . 93.130 17 26,511 17 Accounts payable and accrued expenses . 18 18 19 19 20 20 Liabilities 21 Escrow or custodial account liability Complete Part IV of Schedule D . . 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified 22 23 23 Secured mortgages and notes payable to unrelated third parties . . 24 2.099 24 Unsecured notes and loans payable to unrelated third parties 25 42.473 25 29.453 Other liabilities Complete Part X of Schedule D 26 137,702 26 55.964 Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117, check here ▶ 🔽 and complete lines 27 Balances through 29, and lines 33 and 34. 27 Unrestricted net assets 198,159 27 502,806 530,154 Temporarily restricted net assets 28 28 Fund 29 Permanently restricted net assets Organizations that do not follow SFAS 117, check here 🕨 🥅 and complete lines 30 through 34. 5 30 30 Capital stock or trust principal, or current funds Assets 31 Paid-in or capital surplus, or land, building or equipment fund 31 32 32 Retained earnings, endowment, accumulated income, or other funds ¥ 728,313 33 502,806 33 Total net assets or fund balances 34 Total liabilities and net assets/fund balances 866.015 558,770 34

Pa	Check if Schedule O contains a response to any question in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1		1 1	195,78
2	Total expenses (must equal Part IX, column (A), line 25)	2			121,29
3	Revenue less expenses Subtract line 2 from line 1	3			225,50
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		7	728,31
5	Other changes in net assets or fund balances (explain in Schedule O)	5			
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6		5	502,80
Pai	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII			୮	
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
c	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of t audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain its Schedule O		2c	Yes	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were is on a separate basis, consolidated basis, or both	ssued			
	▼ Separate basis				
3а	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	e	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the raudit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	equired	3b		Νo

SCHEDULE A (Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

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

OMB No 1545-0047

Inspection

		ne organiz		STANLIDEN.		•	Employer identif	icat ion ı	number	1	
SEVEI	NIN GE	INEKATION	FUND FOR IND	DIAN DEV			68-0027247				
Pa	rt I	Reas	on for Pu	blic Charity Stat	tus (All organization	s must complete this pa		tions			
						ugh 11, check only one bo					
1	Ť					lescribed in section 170(b					
2	Ē										
3	A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).										
4	Ē	A medi	cal research	•	-	hospital described in sect	• • •	iii). Ent	er the		
5	An organization operated for the benefit of a college or university owned or operated by a governmental unit desc						describ	ed in			
section 170(b)(1)(A)(iv). (Complete Part II)											
6		A feder	al, state, or	local government or	governmental unit desc	:ribed in section 170(b)(1))(A)(v).				
7	V	describ	ed ın	at normally receives A)(vi) (Complete Pa	·	support from a governmen	ntal unit or from the	e genera	l public	:	
8	Г				170(b)(1)(A)(vi) (Co	mplete Part II)					
9		An organization that normally receives (1) more than 331/3% of its support from contributions, membership fees, and gross									
	,	receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/3% of									
		its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses									
		acquire	d by the org	janization after June	30, 1975 See section	509(a)(2). (Complete Part	: III)				
10	Г					public safety See section !					
11	Γ	An orga one or i the box	nızatıon orç nore publicl	ganized and operated y supported organiza	l exclusively for the ben ations described in sect orting organization and	efit of, to perform the func ion 509(a)(1) or section 5 complete lines 11e throug I - Functionally integrated	tions of, or to carry 109(a)(2) See sect Ih 11h		(a)(3).	Chec	
e	Γ	other th	-		=	rolled directly or indirectly plicly supported organizati		-	-		
f	If the organization received a written determination from the IRS that it is a Type I, Type II or Type III supporting organiza check this box					ation <u>,</u>					
g			ugust 17, 2 g persons?	2006, has the organi	zatıon accepted any gıfi	or contribution from any o	of the				
		(i) a pe	rson who dı	rectly or indirectly c	ontrols, either alone or t	ogether with persons desc	cribed in (ii)		Yes	No	
		and (III)	below, the	governing body of th	e the supported organız	ation?		11g(i)			
		(ii) a fa	mily membe	er of a person describ	ped in (i) above?			11g(ii)			
		(iii) a 3	5% control	led entity of a persor	n described in (i) or (ii) a	above?		11g(iii)		
h		Provide	the followin	ng information about	the supported organizat	cion(s)					
				(iii) Type of	(iv)	(v)	(vi)				

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (see	(iv) Is the organizati col (i) list your gove docume	ion in ted in rning	(v) Did you not organizati col (i) of suppor	on in your	(vi) Is the organizati col (i) orga	on in anized	(vii) A mount of support
		instructions))	Yes	No	Yes	No	Yes	No	
Total									

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

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

	ulluel Part III. II tile	; organization	ialis to quality u	nuer the tests if	sted below, pie	ase co	ilibiete r	art III.)
S	ection A. Public Support							
Cale	endar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2	010	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	1,275,02	2 1,829,130	1,282,514	1,340,484	:	1,129,229	6,856,379
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf							0
3	The value of services or facilities furnished by a governmental unit to							0
	the organization without charge							
4	Total. Add lines 1 through 3	1,275,02	2 1,829,130	1,282,514	1,340,484	:	1,129,229	6,856,379
5	The portion of total contributions by each person (other than a governmental unit or publicly							
	supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)							3,458,353
6	Public Support. Subtract line 5 from line 4							3,398,026
S	ection B. Total Support		•		•			
Cale	endar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 20	010	(f) Total
7	A mounts from line 4	1,275,022	1,829,130	1,282,514	1,340,484	1	,129,229	6,856,379
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar	12,075	15,723	4,554	6,411		1,195	39,958
9	Net income from unrelated business activities, whether or not the business is regularly							0
10	Carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)	4,640			1,748		8,041	14,429
11	Total support (Add lines 7 through 10)							6,910,766
12	Gross receipts from related activiti	es, etc (See ins	tructions)	'	•	12		264,006
13	First Five Years If the Form 990 is check this box and stop here	for the organizati	on's first, second,	. thırd, fourth, or fil	th tax year as a !	501(c)(3		ation,
S	ection C. Computation of Pub							
14	Public Support Percentage for 2010) (line 6 column	(f) divided by line	11 column (f))		14		49 170 %
15	Public Support Percentage for 2009	∋ Schedule A, Pa	rt II, line 14			15		54 970 %
16a	33 1/3% support test—2010. If the and stop here. The organization qua				ne 14 is 33 1/3%	or more	, check th	nis box ►⁄
	33 1/3% support test—2009. If the box and stop here. The organization 10%-facts-and-circumstances test-is 10% or more, and if the organization Part IV how the organization mee	n qualifies as a p —2010. If the org tion meets the "f	ublicly supported anization did not c acts and circumst	organization :heck a box on line :ances" test, chec	e 13, 16a, or 16b k this box and st	o and line	e 14 Explain	► □
b	organization 10%-facts-and-circumstances test- 15 is 10% or more, and if the organ Explain in Part IV how the organiza supported organization	nization meets th	e "facts and cırcu	mstances" test, c	heck this box and	stop he	ere.	▶ □
18	Private Foundation If the organizat instructions	ion did not check	a box on line 13,	16a, 16b, 17a or	17b, check this I	box and	see	▶ □

Schedule A (Form 990 or 990-EZ) 2010 Page 3 Part III Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.) Section A. Public Support Calendar year (or fiscal year beginning (a) 2006 **(b)** 2007 (c) 2008 (d) 2009 (e) 2010 (f) Total ın) 🟲 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 3 received from disqualified **b** A mounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year c Add lines 7a and 7b Public Support (Subtract line 7c from line 6) Section B. Total Support Calendar year (or fiscal year beginning **(e)** 2010 (a) 2006 **(b)** 2007 (c) 2008 (d) 2009 (f) Total ın) 9 Amounts from line 6 Gross income from interest, 10a dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b c Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include 12 gain or loss from the sale of capital assets (Explain in Part Total support (Add lines 9, 10c, 11 and 12) First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage

15	Public Support Percentage for 2010 (line 8 column (f) divided by line 13 column (f))	15	
16	Public support percentage from 2009 Schedule A, Part III, line 15	16	
S	ection D. Computation of Investment Income Percentage		
17	Investment income percentage for 2010 (line 10c column (f) divided by line 13 column (f))	17	
18	Investment income percentage from 2009 Schedule A , Part III, line 17	18	

19a 33 1/3% support tests—2010. If the organization did not check the box on line 14, and line 15 is more than 33 1/3% and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

33 1/3% support tests—2009. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

Private Foundation If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions

Schedule A (Fo	orm 990 or 990-EZ) 2010	Pag
Part IV	Supplemental Information. Supplemental Information. Complete this required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. additional information. (See instructions).	•

Facts And	Circumstances	Test

Schedule A (Form 990 or 990-EZ) 2010

DLN: 93493066011372

OMB No 1545-0047

Open to Public Inspection

SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ► Complete if the organization is described below.

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

If the organization answered "Yes," to Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities),

- ◆ Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- ◆ Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B
- Section 527 organizations Complete Part I-A only

If the organization answered "Yes," to Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

	ENTH GENERATION FUND FOR INDIAN	DEV		Employer ider	tification number
				68-0027247	
ar	I-A Complete if the or	ganization is exempt und	er section 501(c) or is a section 527	organization.
L	Provide a description of the or	ganızatıon's dırect and ındırect p	olitical campaign act	tivities in Part IV	
2	Political expenditures			▶	\$
3	Volunteer hours				
ar	t I-B Complete if the or	ganization is exempt und	er section 501(c)(3).	
L	Enter the amount of any excis	e tax incurred by the organization	under section 495	5	\$
2	Enter the amount of any excis	e tax incurred by organization ma	nagers under sectio	n 4955 🕨	\$
3	If the organization incurred a s	section 4955 tax, did it file Form	4720 for this year?		┌ Yes ┌ No
1a	Was a correction made?				┌ Yes ┌ No
b	If "Yes," describe in Part IV				
ar	t I-C Complete if the or	ganization is exempt und	er section 501(c) except section 50:	L(c)(3).
L	Enter the amount directly exp	ended by the filing organization fo	r section 527 exem	pt function activities 🕨	\$
2	Enter the amount of the filing of exempt funtion activities	organization's funds contributed t	o other organization	s for section 527	\$
3	Total exempt function expend	itures Add lines 1 and 2 Enter h	ere and on Form 112	20-POL, line 17b ►	\$
1	Did the filing organization file	Form 1120-POL for this year?			√
5	Enter the names, addresses a organization made payments amount of political contributio separate segregated fund or a	unds Also enter the nization, such as a			
	(a) Name	(b) Address	(c) EIN	(d) A mount paid from filing organization's funds If none, enter -0-	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-
		i			I

section 4911 tax for this year?

┌ Yes ┌ No

P	art II-A Complete if the organization under section 501(h)).	is exempt under section 501(c)(3)	and filed Form 5768	(election
	Check If the filing organization belongs to			
<u>B</u>	Check If the filing organization checked bo	x A and "limited control" provisions apply		
	Limits on Lobbying I (The term "expenditures" means a		(a) Filing O rganization's Totals	(b) Affiliated Group Totals
1a	Total lobbying expenditures to influence public of	opinion (grass roots lobbying)		
b	Total lobbying expenditures to influence a legisl	ative body (direct lobbying)		
c	Total lobbying expenditures (add lines 1a and 1	b)		
d	Other exempt purpose expenditures			
е	Total exempt purpose expenditures (add lines 1	c and 1d)		
f	Lobbying nontaxable amount Enter the amount columns			
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:		
	Not over \$500,000	20% of the amount on line 1e		
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000		
	Over \$17,000,000	\$1,000,000		
	Grassroots nontaxable amount (enter 25% of li	ne 1f)		
h	Subtract line 1g from line 1a If zero or less, ent	er -0-		
i	Subtract line 1ffrom line 1c If zero or less, ento	er - O-		

4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.)

j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting

	Lobbying Expe	nditures During 4	l-Year Avera	ging Period		
	Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) Total
_2a	Lobbying non-taxable amount	228,151	225,808	222,382		676,341
b	Lobbying ceiling amount (150% of line 2a, column(e))					1,014,512
c	Total lobbying expenditures	12,095	1,895	1,413		15,403
d	Grassroots non-taxable amount	57,038	56,452	55,596		169,086
e	Grassroots ceiling amount (150% of line 2d, column (e))					253,629
f	Grassroots lobbying expenditures	12,095	1,895	1,413		15,403

art II-B	Complete if the organization is exempt under section 501(c)(3) and has	NOT filed Fo	rm 5768
	(election under section 501(h)).		

		1.	a)) (1		
		Yes	No		\ moun	nt
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of					
а	Volunteers?			_		
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			-		
c	Media advertisements?					
d	Mailings to members, legislators, or the public?					
e	Publications, or published or broadcast statements?					
f	Grants to other organizations for lobbying purposes?					
g	Direct contact with legislators, their staffs, government officials, or a legislative body?					
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
i	Other activities? If "Yes," describe in Part IV					
j	Total lines 1c through 1i					
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?					
b	If "Yes," enter the amount of any tax incurred under section 4912					
C	If "Yes," enter the amount of any tax incurred by organization managers under section 4912					
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
	** THE A. Commisse if the every instinction is every medical exception FA4/s\/4\ exception [n
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section 5501(c)(6).	501(c)(5), (or se		
	501(c)(6).	501(c)(5), « 		Yes	No
1	501(c)(6). Were substantially all (90% or more) dues received nondeductible by members?	501(c)(5), (1		
1 2	501(c)(6). Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less?	501(c)(5), (1 2		
1 2 3	501(c)(6). Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year?			1 2 3	Yes	No
1 2 3	501(c)(6). Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less?	501(c)(5), (1 2 3	Yes	No
1 2 3	501(c)(6). Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year? **III-B** Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part I	501(c)(5), (1 2 3	Yes	No
1 2 3 Par	501(c)(6). Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year? **III-B** Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part I answered "Yes".	501(c II-A,)(5), (1 2 3	Yes	No
1 2 3 Par	Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year? **TII-B** Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part I answered "Yes". Dues, assessments and similar amounts from members Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political	501(c II-A,)(5), (1 2 3	Yes	No
1 2 3 Par 1 2	Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year? III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part I answered "Yes". Dues, assessments and similar amounts from members Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).	501(c II-A,)(5), (1 2 3	Yes	No
1 2 3 Par 1 2	Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year? **TII-B** Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part I answered "Yes". Dues, assessments and similar amounts from members Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year	501(c II-A,)(5), (1 2 3	Yes	No
1 2 3 Par 1 2	Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year? **TII-B** Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part I answered "Yes". Dues, assessments and similar amounts from members Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year Carryover from last year	501(c II-A, 1 2a 2b)(5), (1 2 3	Yes	No
1 2 3 Par 1 2 a b	Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year? III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part I answered "Yes". Dues, assessments and similar amounts from members Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and	501(c II-A, 1 2a 2b 2c)(5), (1 2 3	Yes	No
1 2 3 Par 1 2 a b c	Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year? **TIII-B** Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part I answered "Yes". Dues, assessments and similar amounts from members Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess	2a 2b 2c 3)(5), (1 2 3	Yes	No

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, and Part II-B, line 1 Also, complete this part for any additional information

Ident if ier Return Reference | Explanation DLN: 93493066011372

OMB No 1545-0047

Open to Public Inspection

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12. ► Attach to Form 990. ► See separate instructions.

Name of the organization **Employer identification number** SEVENTH GENERATION FUND FOR INDIAN DEV 68-0027247 Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the

	organization answered "Yes" to Form 99	0, Part IV, line 6.	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advi- funds are the organization's property, subject to the		or advised Yes No
6	Did the organization inform all grantees, donors, and used only for charitable purposes and not for the ben conferring impermissible private benefit		
Pai	t II Conservation Easements. Complete	ıf the organızatıon answered "Yes" t	o Form 990, Part IV, line 7.
1	Purpose(s) of conservation easements held by the or Preservation of land for public use (e.g., recreati Protection of natural habitat Preservation of open space	on or pleasure) Preservation of an Preservation of a c	certified historic structure
2	Complete lines 2a-2d if the organization held a quali easement on the last day of the tax year	fied conservation contribution in the form	of a conservation
	,,,,,,,		Held at the End of the Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
c	Number of conservation easements on a certified his	toric structure included in (a)	2c
d	Number of conservation easements included in (c) ac	cquired after 8/17/06	2d
3	Number of conservation easements modified, transfe	rred, released, extinguished, or terminate	ed by the organization during
	the taxable year 🛌		
4	Number of states where property subject to conserva	stion easement is located .	
5	Does the organization have a written policy regarding enforcement of the conservation easements it holds?	the periodic monitoring, inspection, hand	
6	Staff and volunteer hours devoted to monitoring, insp		nents during the year 🛌
7	A mount of expenses incurred in monitoring, inspecti	and enforcing conservation easements	s during the year 🕨 \$
8	Does each conservation easement reported on line 2		- · · · · · · · · · · · · · · · · · · ·
	170(h)(4)(B)(ı) and 170(h)(4)(B)(ıı)?		Г Yes
9	In Part XIV, describe how the organization reports contained sheet, and include, if applicable, the text of the organization's accounting for conservation easen	he footnote to the organization's financial nents	statements that describes
Par	Complete if the organization answered '		or Other Similar Assets.
1a	If the organization elected, as permitted under SFAS art, historical treasures, or other similar assets held provide, in Part XIV, the text of the footnote to its fin	for public exhibition, education or research	ch in furtherance of public service,
b	If the organization elected, as permitted under SFAS historical treasures, or other similar assets held for provide the following amounts relating to these items	oublic exhibition, education, or research i	
	(i) Revenues included in Form 990, Part VIII, line 1		▶ \$
	(ii) Assets included in Form 990, Part X		► \$
2	If the organization received or held works of art, histofollowing amounts required to be reported under SFA	· · · · · · · · · · · · · · · · · · ·	
а	Revenues included in Form 990, Part VIII, line 1		▶ \$

b Assets included in Form 990, Part X

Par	Organizations Maintaining Co	llections of Art	t, His	tori	cal Tı	reasur	es, or O	the	r Similar As	sets	(con	tinued)
3	Using the organization's accession and other items (check all that apply)	r records, check an	y of th	ne foll	_		-		se of its collect	:ion		
а	Public exhibition		d	Γ	Loan	orexch	ange progr	ams				
b	Scholarly research		e	Γ	O the	r						
c	Preservation for future generations											
4	Provide a description of the organization's co Part XIV	ollections and expla	ain hov	w they	/ furthe	er the or	ganızatıon	's ex	empt purpose	n		
5	During the year, did the organization solicit of assets to be sold to raise funds rather than t									┌ Yes	s	√ No
Par	Escrow and Custodial Arrang Part IV, line 9, or reported an an	•			_		answere	d "Ye	es" to Form 9	90,		
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?	ıan or other ınterm	ediary	for c	ontribu	itions or	other ass	ets r		Г Ye	5	 Г No
b	If "Yes," explain the arrangement in Part XIV	/ and complete the	follow	ıng ta	able		_					
							-		An	nount		
c	Beginning balance						-	1c				
d	Additions during the year						-	1d				
e	Distributions during the year						-	1e				
f	Ending balance							1f				
2a	Did the organization include an amount on Fo		e 21?							∏ Yes	5	No
b	If "Yes," explain the arrangement in Part XIV				مارال ام	-"		D =	h TV / long 40			
Ра	rt V Endowment Funds. Complete	(a)Current Year		Mere Prior Y			<u>Orm 990,</u> Years Back		Three Years Back	(e) Fou	ur Yea	ars Back
1a	Beginning of year balance	(,	<u> </u>	,		(-)		(/-		(- / · · ·		
b	Contributions											
c	Investment earnings or losses											
d	Grants or scholarships											
e	Other expenditures for facilities and programs											
f	Administrative expenses											
g	End of year balance											
2	Provide the estimated percentage of the yea	r end balance held	as									
а	Board designated or quasi-endowment 🕨											
b	Permanent endowment 🕨											
c	Term endowment ▶											
3a	Are there endowment funds not in the posses	ssion of the organiz	ation	that a	re hel	d and ad	mınıstered	d for	the	Г .,		
	organization by (i) unrelated organizations								3a(es	No
	(ii) related organizations							٠.	3a(+	
b	If "Yes" to 3a(II), are the related organization				ule R?				31	,	寸	
4	Describe in Part XIV the intended uses of th	e organızatıon's en	dowme	ent fu	nds							
Par	t VI Investments—Land, Buildings	s, and Equipme	nt. S	ee F	orm 9	90, Pai	rt X, line	10.				
	Description of investment					or other estment)	(b) Cost or basis (oth		(c) Accumulate depreciation	111	1) Bo	ok value
1a	Land											
b	Buildings		•									
c	Leasehold improvements		•									
d	Equipment						7	0,030	70,	030		
	Other											
Tota	I. Add lines 1a-1e <i>(Column (d) should equal Fo</i>	orm 990, Part X, colu	mn (B)), line	10(c).)	·		•	►			

Part VIII Investments—Other Securities. See	orm 990, Part X, line 12		
(a) Description of security or category	(b) Book value		d of valuation
(including name of security)	(2,200	Cost or end-of	-year market value
(1)Financial derivatives			
(2)Closely-held equity interests			
Other			
-			
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)	63,367		
Part VIII Investments—Program Related. See	Form 990, Part X, line	13.	
			d of valuation
(a) Description of investment type	(b) Book value		- year market value
		I .	
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)			
Total. (Column (b) should equal Form 990, Part X, col (B) line 13) Part IX Other Assets. See Form 990, Part X, lin	e 15.		
			(b) Book value
Part IX Other Assets. See Form 990, Part X, In			(b) Book value
Part IX Other Assets. See Form 990, Part X, In			(b) Book value
Part IX Other Assets. See Form 990, Part X, In			(b) Book value
Part IX Other Assets. See Form 990, Part X, In			(b) Book value
Part IX Other Assets. See Form 990, Part X, In			(b) Book value
Part IX Other Assets. See Form 990, Part X, In			(b) Book value
Part IX Other Assets. See Form 990, Part X, In			(b) Book value
Part IX Other Assets. See Form 990, Part X, In			(b) Book value
Part IX Other Assets. See Form 990, Part X, In			(b) Book value
Part IX Other Assets. See Form 990, Part X, Im			(b) Book value
Part IX Other Assets. See Form 990, Part X, Im			(b) Book value
Part IX Other Assets. See Form 990, Part X, Im			(b) Book value
Part IX Other Assets. See Form 990, Part X, Im			(b) Book value
Part IX Other Assets. See Form 990, Part X, Im			(b) Book value
Part IX Other Assets. See Form 990, Part X, Im			(b) Book value
Part IX Other Assets. See Form 990, Part X, Im			(b) Book value
Part IX Other Assets. See Form 990, Part X, Im			(b) Book value
Part IX Other Assets. See Form 990, Part X, lin (a) Description	tion		(b) Book value
Part IX Other Assets. See Form 990, Part X, lin (a) Description (b) Should equal Form 990, Part X, col.(B) line 19	5.)		(b) Book value
Part IX Other Assets. See Form 990, Part X, Im (a) Description (b) Should equal Form 990, Part X, col.(B) line 19 Part X Other Liabilities. See Form 990, Part X,	5.)		(b) Book value
Part IX Other Assets. See Form 990, Part X, lin (a) Description (b) Should equal Form 990, Part X, col.(B) line 19	5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 19 Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability	5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 19 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 19 Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability	5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 19 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 19 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 19 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 19 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 19 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 19 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 19 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 19 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 19 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 19 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 19 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 19 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 19 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 19 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 19 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 19 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	5.)		(b) Book value

Pa	rt XI Reconciliation of Change in Net Assets from Form 990 to Financial Statemen	nts	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	1,195,783
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	1,421,290
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	-225,507
4	Net unrealized gains (losses) on investments	4	
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	
9	Total adjustments (net) Add lines 4 - 8	9	
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9	10	-225,507
Par	t XII Reconciliation of Revenue per Audited Financial Statements With Revenue p	er R	
1	Total revenue, gains, and other support per audited financial statements	1	1,210,390
2	A mounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIV)		
e	Add lines 2a through 2d	2e	14,607
3	Subtract line 2e from line 1	3	1,195,783
4	A mounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIV) 4b		
c	Add lines 4a and 4b	4c	
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	1,195,783
	Reconciliation of Expenses per Audited Financial Statements With Expenses	per	
1	Total expenses and losses per audited financial statements	1	1,435,897
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
b	Prior year adjustments		
c	Other losses	1	
d	Other (Describe in Part XIV) 2d 14,607		
e	Add lines 2a through 2d	2e	14,607
3	Subtract line 2e from line 1	3	1,421,290
4	A mounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIV)		
c	Add lines 4a and 4b	4с	
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	1,421,290
Pa	rt XIV Supplemental Information		

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b. Also complete this part to provide any

Ident if ier	Return Reference	Explanation
Part X	Part X FIN48 Footnote	Seventh Generation Fund for Indian Development is exempt from federal income tax under Section 501(c)(3) of the Internal Revenue Code and similar state provisions. The open audit periods are 2007 through 2009 In June 2006, the Financial Accounting Standards Board issued ASC 740-10 (formerly known as FASB Interpretation No. 48, Accounting for Uncertainty in Income Taxes), which requires that any reserves, or related accruals, be recorded in the financial statements for any uncertain tax positions that the organization has taken or expects to take on a tax return. As of July 1, 2009, the Organization adopted ASC 740-10 The Agency has analyzed the tax positions taken for filing with the Internal Revenue Service and the state of California. The organization believes that income tax filing positions will be sustained upon examination and does not anticipate any adjustments that would result in a material adverse affect on the financial statements.
Part XIII, Line 2d	Part XIII, Line 2d Other expenses and losses per audited F/S	In-kınd expenses \$14607
Part XII, Line 2d	Part XII, Line 2d Other revenue amounts included in F/S but not included on form 990	Realized gain on investments \$0 In-kind donation \$14607
Part III, Line 1a	Part III, Line 1a If organization elected under SFAS 116 to not report are, historical treasures, o	Collection items acquired either through purchase or donation are not capitalized. Purchases of collection items are recorded as decreases in unrestricted net assets if purchased with unrestricted assets and as decreases in temporarily restricted or permanently restricted net assets if purchased with donor-restricted assets. In accordance with the provisions of SFAS No. 116, Accounting for Contributions Received and Contributions Made, SGF does not capitalize donated works of art or recognize them as revenues or gains. That Statement provides that such donations need not be recognized if they are added to collections that are held for public exhibition, education, or research in furtherance of public exhibition, education, or research in furtherance of public service rather than financial gain, are protected, kept unencumbered, cared for, and preserved, and are subject to a policy that requires the proceeds from sales of collection items to be used to acquire other items for collections. Contributions of collection items are not recognized in the statement of activities. Proceeds from sales or insurance recoveries are reflected on the statement of activities based on the absence or existence and nature of donor-imposed restrictions.

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DLN: 93493066011372

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2010

OMB No 1545-0047

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SCHEDULE F (Form 990)

Department of the Treasury Internal Revenue Service ► Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16.

► Attach to Form 990. ► See separate instructions.

Statement of Activities Outside the United States

Name of the organization SEVENTH GENERATION FUND FOR INDIAN DE **Employer identification number**

D.a.	t I General Information	n on Activiti	es Outside +	he United States C	68-0027247	ation answored
ĒĊ	"Yes" to Form 990, Pai			ne omieu states. C	omplete il tile organiz	audii alisweled
1	For grantmakers. Does the	•		s to substantiate the	amount of the grants	or
	assistance, the grantees' elig					
	the grants or assistance? . $% \left(1\right) =\left(1\right) \left(1$					✓ Yes
2	For grant makers. Describe in Pa United States	rt V the organiz	atıon's proceduı	res for monitoring the us	e of grant funds outside t	he
3	Activites per Region (Use Part	V ıf addıtıonal s	pace is needed)		
	(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region or independent contractors	region (by type) (e g ,	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region/investments in region
	South America	0	0		Women's Leadership	5,92!
	Sub-Sahara Africa	0	0		Enviro Justice	6,40
_	Cut total					40.00
	Sub-total Total from continuation sheets to Part I					12,32

c Totals (add lines 3a and 3b)

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			Sub-Sahara Afr	Enviro Just	6,401				
	-								
2	Enter total nu	mber of recipie	ent organizations l	ısted above that are r	ecognized as charitie	es by the foreign c	ountry, recognized	as	I
	tax-exempt b	y the IRS, or fo	or which the grant	tee or counsel has pro	ovided a section 501(c)(3) equivalency	letter	. ▶	
3	Enter total nu	mber of other o	organizations or e	entities					(Form 990) 2010

Part III	Grants and Ot	her Assistance to	Individuals	Outside the Unit	ed States. Complete	ıf the organızatıon a	nswered "Yes" to Form 9	990, Part IV, line 16.
	Use Part V if ad	ditional space is ne-	eded.					

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) A mount of cash grant	(e) Manner of cash disbursement	(f) A mount of non-cash	(g) Description of non-cash	(h) Method of valuation
					assistance	assistance	(book, FMV, appraisal, other)
			<u> </u>			1	
			<u>. </u>		!		
			<u>. </u>				
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Part IV Foreign Forms

1	Was the organization a U S transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926 (see instructions for Form 926)	Γ	Yes	✓	Νo
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520 and/or Form 3520-A. (see instructions for Forms 3520 and 3520-A)	Γ	Yes	굣	Νo
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with respect to Certain Foreign Corporations. (see instructions for Form 5471)	Γ	Yes	▽	Νo
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see instructions for Form 8621)	Г	Yes	r	Νo
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with respect to Certain Foreign Partnerships. (see instructions for Form 8865)	Г	Yes	্	Νo
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see instructions for Form 5713).	Г	Yes	⊽	Νo

Schedule F (Form 990) 2010

Part V Supplemental Information

information.

Complete this part to provide the information (see instructions) required in Part I, line 2, and any additional

Identifier	ReturnReference	Explanation
Grantmaker's Description of How Grants are Used in Foreign Country		Program Director and Staff require a representative to sign a grant agreement, monitor grantees, and require submission of
		supporting documentation to verify expenditures

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General Information on Grants and Assistance

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

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

OMB No 1545-0047

DLN: 93493066011372

Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Schedule I

(Form 990)

SEVENTH GENERATION FUND FOR INDIAN DEV

Employer identification number

68-0027247

Form 990, Part I'	V, line 21 for any	o Governments and recipient that received eded.	d more than \$5,000.	Check this box if no	o one recipient recei	ived more than \$5,0	
1 (a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of gran or assistance
1) United Charitable Prog 5201 Leesburg Pike Suite 105 Falls Church, VA 22044	20-4286082		5,500	0			
2) Tonatierra Community PO Box 24009 Phoenix, AZ 85074	86-0723874		8,600	0			
3) Native MovementPO Box 396 Flagstaff, AZ 85074	68-0535413		15,000	0			
4) Native ActionPO Box 109 .ame Deer, MT 59043	81-0450694		6,000	0			
5) Lipan Apache Band TX 515 Freiling San Antonio, TX 78213	74-2953146		9,801	0			
6) Indigenous Peoples Council onPO Box 72 Nixon, NV 89424	88-0425570		5,382	0			
7) Defenders of the Black HillsPO Box 2003 Rapid City, SD 57709	32-0117272		6,000	0			
8) Coastal Band Chumash 1700 Arizona Ave Atascadero, CA 93422	77-0040269		6,000	0			
9) Centro Binacional para 744 Abby Street Fresno, CA 93701	77-0337939		10,000	0			
10) A merican Indian nstitutePO Box 1388 Bozeman, MT 59771	81-0339551		13,150	0			

	,
Part III	Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.
	Use Schedule I-1 (Form 990) if additional space is needed.

(a)Type of grant or assistance	(b) Number of recipients	(c)A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance

Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.

Ident if ier	Return Reference	Explanation
Grantmaker's Description		Program Director and Staff require a representative to sign a grant agreement, monitor grantees, and require submission of
of How Grants are Used		supporting documentation to verify expenditures

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DLN: 93493066011372

Employer identification number

Transactions with Interested Persons

Schedule L (Form 990 or 990-EZ)

► Complete if the organization answered
"Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c,
or Form 990-EZ, Part V lines 38a or 40b.

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

OMB No 1545-0047

2010

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

Complete if the organiza (a) Name of disq									,		orrected
1 (a) Name of disq	uaiiiieu	person			(b) Desc	(b) Description of transaction				Yes	No
											+
2 Enter the amount of tax impos	ed on t	he orgar	nization man	agers or				ear unde	r		
								P	• s —		
section 4958									т		
section 4958	, on line	2, abo	ve, reımburs	ed by th	e organization .			•	• \$		
3 Enter the amount of tax, If any					e organization .			•	* \$ <u> </u>		
3 Enter the amount of tax, If any	From	Intere	sted Pers	sons.				P	* \$ /, line 38	a	
3 Enter the amount of tax, If any	From zation a	Intere	sted Pers	sons.		, or Forr	n 990-E	(f)			
3 Enter the amount of tax, If any	From zation a	Intere	sted Pers	sons. form 990	, Part IV , line 26	, or Forr (e) I	n 990-E	(f) Appro	ved	(g)Writ	
3 Enter the amount of tax, if any Part II Loans to and/or Complete if the organi	From zation a (b) L or from	Intere	ested Pers d "Yes" on F	sons. Form 990		, or Forr	n 990-E	(f)	ved d or		
The second of th	From zation a (b) L or from	Intere	ested Pers d "Yes" on F (c)Orig	sons. Form 990	, Part IV , line 26	, or Forr (e) I	n 990-E	(f) Appro by boar	ved d or	(g)Writ	
The second of th	From zation a (b) L or from	Intere	ested Pers d "Yes" on F (c)Orig	sons. Form 990	, Part IV , line 26	, or Forr (e) I defau	n 990-E n lt?	(f) Appro by boar commit	ved d or tee?	(g)Writ	nt?
The second of th	From zation a (b) L or from	Intere	ested Pers d "Yes" on F (c)Orig	sons. Form 990	, Part IV , line 26	, or Forr (e) I defau	n 990-E n lt?	(f) Appro by boar commit	ved d or tee?	(g)Writ	nt?
The second of th	From zation a (b) L or from	Intere	ested Pers d "Yes" on F (c)Orig	sons. Form 990	, Part IV , line 26	, or Forr (e) I defau	n 990-E n lt?	(f) Appro by boar commit	ved d or tee?	(g)Writ	nt?
The second of th	From zation a (b) L or from	Intere	ested Pers d "Yes" on F (c)Orig	sons. Form 990	, Part IV , line 26	, or Forr (e) I defau	n 990-E n lt?	(f) Appro by boar commit	ved d or tee?	(g)Writ	nt?
The second of th	From zation a (b) L or from	Intere	ested Pers d "Yes" on F (c)Orig	sons. Form 990	, Part IV , line 26	, or Forr (e) I defau	n 990-E n lt?	(f) Appro by boar commit	ved d or tee?	(g)Writ	nt?
The second of th	From zation a (b) L or fro	Intere	ested Pers d "Yes" on F (c)Orig	sons. Form 990	, Part IV , line 26	, or Forr (e) I defau	n 990-E n lt?	(f) Appro by boar commit	ved d or tee?	(g)Writ	nt?
2 Enter the amount of tax, if any Part II Loans to and/or Complete if the organical Name of interested person and purpose	From zation a (b) L or fro organi	Intere	csted Pers d "Yes" on F (c)Orig principal a	sons. Form 990 ginal amount	(d)Balance due	, or Forr (e) I defau	n 990-E n lt?	(f) Appro by boar commit	ved d or tee?	(g)Writ	nt?
2 Enter the amount of tax, If any Part II Loans to and/or Complete If the organical Name of Interested person and purpose	From zation a (b) L or fro organi	Intere	(c)Orig principal a	sons. Form 990 ginal amount	(d)Balance due	, or Forr (e) I defau Yes	m 990-E	(f) Appro by boar commit	ved d or tee?	(g)Writ	nt?
2 Enter the amount of tax, If any Part II Loans to and/or Complete If the organical Name of Interested person and purpose	From zation a (b) L or fro organi	Intered inswered oan to om the zation? From Enefitted in answered in answered in the zation?	(c)Orig principal a	sons. Form 990 ginal amount	(d)Balance due Persons. rm 990, Part IV	, or Forr (e) I defau Yes	m 990-E	(f) Appro by boar commit	ved d or tee?	(g)Writ	nt?
Tart II Loans to and/or Complete If the organi a) Name of Interested person and purpose tal	(b) L or fro organi To nce Be	Intered inswered oan to om the zation? From Enefitted in answered in answered in the zation?	(c)Original and interest of the second secon	sons. Form 990 ginal amount sested F " on Folinip between	(d)Balance due Persons. rm 990, Part IV	, or Forr (e) I defau Yes	m 990-E	(f) A ppro by boai commit Yes	ved rd or tee? No	(g)Writ	No
art II Loans to and/or Complete if the organi a) Name of interested person and purpose tal	(b) L or fro organi To nce Be	Interests on to om the zation? From Prom Interests on to om the zation?	(c)Orig principal a ing Interese wered "Yes b)Relationsh	sons. Form 990 ginal amount sested F " on Folinip between	(d)Balance due Persons. rm 990, Part IV	, or Forr (e) I defau Yes	m 990-E	(f) A ppro by boai commit Yes	ved rd or tee? No	(g)Writ agreeme Yes	No No
art II Loans to and/or Complete if the organi a) Name of interested person and purpose tal	From zation a (b) L or fro organi To nce Be	Interestant on the control of the co	(c)Original and interest of the second secon	sons. Form 990 ginal amount sested F " on Folinip between	(d)Balance due Persons. rm 990, Part IV	, or Forr (e) I defau Yes	m 990-E	(f) A ppro by boai commit Yes	ved rd or tee? No	(g)Writ agreeme Yes	No

Part IV Business Transactions Involving Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the	(c) A mount of transaction	(d) Description of transaction	(e) Sharing organization' revenues?	
	organization			Yes	No
(1) Chisa Oros	Child of E D &CEO	10,887	Employee Compensation		Νο
(2) Rosalie Little ThunderTatanka Oyate	Director	10,220	Contract/Buffalo Summit		Νο

Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule L (see instructions)

Ident if ier	Return Reference	Explanation
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Schedule L (Form 990 or 990-EZ) 2010

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SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

Attach to Form 990

Name of the organization SEVENTH GENERATION FUND FOR INDIAN DEV Employer identification number

68-0027247

ldentifier	Return Reference	Explanation
Form 990, Part VI, Line 19	Form 990, Part VI, Line 19 Other Organization Documents Publicly Available	Governing docs, policies, and financial statements are available upon request

ldentifier	Return Reference	Explanation
Form 990, Part VI, Line 12c	Form 990, Part VI, Line 12c Explanation of Monitoring and Enforcement of Conflicts	Every board meeting starts with the Board Members reviewing their work and activities if a situation or issue is noted where there might be a possible conflict of interest, it is discussed and resolved

ldentifier	Return Reference	Explanation
Form 990, Part VI, Line 11	Form 990, Part VI, Line 11 Form 990 Review Process	Management reviews the completed forms with members of the finance committee

ldentifier	Return Reference	Explanation
Form 990, Part VI, Line 2	Form 990, Part VI, Line 2 Description of Business or Family Relationship of Officers, Directors, $\operatorname{\text{\it Et}}$	President/CEO is married to the Executive Director