### PUBLIC DISCLOSURE COPY (

Department of the Treasury

Return or 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 Open to Public Inspection

Inte	rnal Re	evenue	e Service ´	► The org	anization may l	have to use	e a copy of th	nis return to	satisfy	/ state re	porting re	quiren	nents.		Inspecti	n
A	For th	ne 20	)05 calendar	year, or tax year begi	nning	APR	1, 20	05 i	and en	ding	MAR	31,	2006			
В	Check applic	if able:	Please Use IRS	Name of organization									Employer ic	lentificat	tion numb	er
Г	Add	1								94-08	3439	15				
F	Name type. Number and street (or P.O. box if mail is not delivered to street address) Room/suite F.Te															
Ē										(415)		2-235	2			
Ē	— . Instruc-l									Accounting meti		Cash X	Accrual			
Ē		ended		AN FRANCISC			) 4						Other (specify)	<b>&gt;</b>		
	ΠA <sub>P</sub>	plicati	ion • Sect	ion 501(c)(3) organiza	tions and 4947	7(a)(1) nor	nexempt cha	ritable trus	ts	H and	l are not a	applic	able to sec	tion 527	organiza	tions.
	•	_		t attach à completed S	•		99U-EZ).			H(a) is	this a gro	up ret	urn for affilia	tes?	Yes	X No
				SAVETHEREDV				·····		H(b) If	"Yes," ente	er nun	nber of affiliat		N/A	
				k only one) 🕨 🗶 501(c	· · · · · · · · · · · · · · · · · · ·				527	H(c) A	re all affilia f "No," atta	ites in		A\k	Yes	No
K				f the organization's gro		_				H(d) Ìs	s this a sep	arate	reťurn filed b	y an or-		
				file a return with the IRS				ie a return, t	e				d by a group	ruling?		XNo
	sure	to file	e a complete	return. Some states re	quire a comple	ete return.		***					Number -		N/A	
	_						20.2	17 15	_				the organizat			l to attach
E 777				es 6b, 8b, 9b, and 10b		i- Not		17,15			cn. B (Fon	111 990	, 990-EZ, or	990-PF).		
	art			, Expenses, and			Assets	or Fund	Dala	nces						
	1			s, gifts, grants, and sin				+	1a	1 1 3	3,333	22	a			
				support					1b		7,555	,	· • • • • • • • • • • • • • • • • • • •			
				lic support contributions (grants)					1c	1	1,500	- 0.0	0.			
		d	Total /add li	nes 1a through 1c) (ca	sh \$ 11	.754	.196.	noncash \$			79,03			14	,833,	229.
	١,														, ,	895.
			Program service revenue including government fees and contracts (from Part VII, line 93)  Membership dues and assessments													
		4 Interest on savings and temporary cash investments											7,	040.		
		5 Dividends and interest from securities									1	,419,	990.			
		6 a	Gross rents		SE	E STA	ATEMEN	Т 1	6a				0.			
				expenses					6b							
				come or (loss) (subtrac									6c			320.
,	, .	7	Other invest	ment income (describe	<b>•</b>								) 7			
01100100	<u> </u>	8 a	Gross amou	nt from sales of assets	other		(A) Securi				(B) Othe					
Š			than invento	ory			2,000				2,044					
D	-	b	Less: cost o	r other basis and sales	expenses			,940.			1,327					
				s) (attach schedule)				,940.			717					
				(loss) (combine line 8c,							STM	Т	3 8d		652,	128.
	!			nts and activities (attach					here l	<b>&gt;</b>	J					
	1	а		ue (not including \$					1 _	ı						
				line 1a)					9a							
				expenses other than fu					9b							
				or (loss) from special e of inventory, less retur									9c			
	''			of inventory, less return of goods sold												
				or (loss) from sales of												
	1			ue (from Part VII, line 1											10.	882.
	1:			ue (add lines 1d, 2, 3, 4										16	,924	
_	1														,399	
	2 1		Management and general (from line 44, column (C))											392.		
												1	,545,			
į	sasuadx 1			o affiliates (attach sched												
•	1		-	ises (add lines 16 and 4											,916,	
	_ 1	8		deficit) for the year (sub											,008,	
to to	1 jets	9	Net assets	or fund balances at begi	inning of year (	from line 7	73, column ( <i>f</i>	A))					19	65	,523,	
ž	Assets 7	0	Other chang	ges in net assets or fund	d balances (atta	ich explan	ation)	S	EE	STA	FEMEN	T 4	20			529.
	2	1	Net assets	or fund balances at end	of year (combi	ne lines 18	3, 19, and 20	)					21	67	,982	770.

Form 990 (2005)

Part II Statement of Functional Expenses

All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others.

	Functional Expenses and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others.						
	Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising	
22	Grants and allocations (attach schedule)				STATEMENT 7		
	(cash \$273,885 . noncash \$10621005						
	If this amount includes foreign grants, check here	22	10,894,890.	10,894,890.	STATEMENT 8		
23	Specific assistance to individuals (attach						
	schedule)	23					
24	Benefits paid to or for members (attach						
	schedule)	24					
25	Compensation of officers, directors, etc. * *	25	212,313.	90,076.	55,499.	66,738.	
26	Other salaries and wages	26	1,384,555.	587,414.		435,209.	
27	Pension plan contributions	27	238,935.	101,370.		75,105.	
28	Other employee benefits	28	227,991.	96,169.		71,250.	
29	Payroll taxes	29	118,363.	50,217.	30,941.	37,205.	
30	Professional fundraising fees	30	57 <b>,</b> 667.			57 <b>,</b> 667.	
31	Accounting fees	31	27,810.		27,810.		
32	Legal fees	32	70,428.	21,100.		21,515.	
33	Supplies	33	26,558.	9,258.		10,238.	
34	Telephone	34	11,294.	4,099.	2,751.	4,444.	
35	Postage and shipping	35	32,270.	9,852.	6,003.	16,415.	
36	Occupancy	36	185,978.	67,622.	50,958.	67,398.	
37	Equipment rental and maintenance	37	33,851.	9,150.	8,717.	15,984.	
38	Printing and publications	38	573,297.	57,513.	21,474.	494,310.	
39	Travel	39	63,372.	36,605.		19,924.	
40	Conferences, conventions, and meetings	40	50,171.	10,697.		27,487.	
41	Interest	41	36,513.	36,513.	·		
42	Depreciation, depletion, etc. (attach schedule)	42	42,019.	16,018.	10,746.	15,255.	
43	Other expenses not covered above (itemize):		,,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,,		<b>1</b>		
	1	43a					
	]	43b					
		43c		· · · · · · · · · · · · · · · · · · ·			
Ì	1	43d					
Ì		43e					
1		43f					
'	SEE STATEMENT 5	43q	627,950.	300,556.	217,824.	109,570.	
44	Total functional expenses. Add lines 22		•	*	•		
	through 43. (Organizations completing						
	columns (B)-(D), carry these totals to lines						
	13-15)	44	14,916,225.	12,399,119.	971,392.	1,545,714.	
Jo.	int Costs. Check ► X if you are following		98-2		<u>,                                    </u>		
	any joint costs from a combined educational campai			norted in (B) Program sen	rices? ▶ □	X Yes No	
	Yes," enter (i) the aggregate amount of these joint cos	-		(ii) the amount allocated to		52,748.;	
	) the amount allocated to Management and general \$			(iv) the amount allocated t		6,954.	
7111	, the amount anotated to Management and general w		, and	tes, the amount anotated t	o randidionig ψ	5,5511 5 000 (0005)	

\*\* SEE STATEMENT 6 Form 990 (2005)

### Part III Statement of Program Service Accomplishments (See the instructions.)

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

Wh:	Program Service Expenses			
clie	nts served, publications iss	exempt purpose achievements in a clear and concise manner. State the number of etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) mpt charitable trusts must also enter the amount of grants and allocations to others.)	(Required for 501(c)(3) and (4) orgs., and 4947(a)(1) trusts; but optional for others.)	
а	SEE STATEMEN	T 9		
	(Grants and allocations	\$	10,894,890.) If this amount includes foreign grants, check here	12,399,119.
b				
	•			
		\$	) If the in-	
C	(Grants and allocations	<b>.</b>	) If this amount includes foreign grants, check here	
	<del> </del>			
	(Grants and allocations	\$	) If this amount includes foreign grants, check here	
u				
	(Grants and allocations	\$	) If this amount includes foreign grants, check here	
е	Other program services (a	ittach	schedule)	
	(Grants and allocations	\$	) If this amount includes foreign grants, check here	
<u>f</u>	Total of Program Service	e Expe	nses (should equal line 44, column (B), Program services)	12,399,119.
			* *	Form <b>990</b> (2005)

generative	e: Whe	Balance Sheets (See the instructions.)  are required, attached schedules and amounts wi	ithin the de	escription column	(A)	£		(B)
	snou	uld be for end-of-year amounts only.			Beginning o	туеаг		End of year
	45	Cash - non-interest-bearing				,438.		369,065.
	46	Savings and temporary cash investments			1,524	,231.	46	973,421.
			1 1					
	1	Accounts receivable		161,753.				
	b	Less: allowance for doubtful accounts	47b		90	,370.	47c	161,753.
	48 a	Pledges receivable		3,607,338.				
Assets	b	Less: allowance for doubtful accounts			4,594	<u>,843.</u>	48c	3,607,338.
	49	Grants receivable					49	
	50	Receivables from officers, directors, trustees,						
		and key employees	1 1				50	
	51 a	Other notes and loans receivable						
	b	Less: allowance for doubtful accounts				51c		
	52	Inventories for sale or use					52	
	53	Prepaid expenses and deferred charges			71	,604.	53	64,789.
	54	Investments - securities			54			
	55 a	Investments - land, buildings, and	1 1					
		equipment: basis	55a					
	b	Less: accumulated depreciation	55b				55c	
	56	Investments - other			41,194	,541.	56	51,743,743.
				12,109,189.				
	b	Less: accumulated depreciation STMT 11	57b	162,545.	18,756			11,946,644.
	58	Other assets (describe > DEPOSITS ON	140	,000.	58	1,000.		
				1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	66 651	220		60 067 750
	59	Total assets (must equal line 74). Add lines 45			66,651			68,867,753.
	60	Accounts payable and accrued expenses		F	382	,136.	1	314,512.
	61	Grants payable		F			61	
ģ	62	Deferred revenue					62	
iabilities	63	Loans from officers, directors, trustees, and ke		Г			63	
abil	64 a	Tax-exempt bond liabilities		amym 10	600	0.00	64a	F00 000
Ξ.		Mortgages and other notes payable		STMT 12		,000.	4	500,000.
	65	Other liabilities (describe > ACCRUED VAC	CATIO	/ TTYRTTTTĀ)	6.5	,210.	65	70,471.
					1 105	246		004.000
	66	Total liabilities. Add lines 60 through 65)			1,12/	,346.	66	884,983.
	Orga	anizations that follow SFAS 117, check here	► LX and	d complete lines				
Š		67 through 69 and lines 73 and 74.			24 (0)	751		27 400 402
nce	67	Unrestricted		I I	34,693			37,400,493.
ala	68	Temporarily restricted		Г	30,472	,889.	68	30,219,935.
ВΡ	69	Permanently restricted			35 /	,342.	69	362,342.
Ë	Orga	Organizations that do not follow SFAS 117, check here   and						
P. F		complete lines 70 through 74.						
Net Assets or Fund Balances	70	Capital stock, trust principal, or current funds					70	
SSE	71	Paid-in or capital surplus, or land, building, and				71		
at A	72	Retained earnings, endowment, accumulated in					72	
ž	73	Total net assets or fund balances (add lines 67 through		65 500	000		67 000 770	
	ı	column (A) must equal line 19; column (B) must equa	iai iine 21) .		65,523	328	73	67,982,770. 68,867,753.

Form **990** (2005)

Pŧ	irt IV-A Reconciliation of Revenue per Audited Final instructions.)	nciai Statements Wi	in Revenue	per K	<b>eturn</b> (Se	e the
	Total revenue, gains, and other support per audited financial statemer	nte			a 17.	375,013.
a b	Amounts included on line a but not on Part I, line 12:				<u> </u>	
	Net unrealized gains on investments	h	1			
2						
3						
4	a	b		529.		
•	Add lines <b>b1</b> through <b>b4</b>	L.:-				450,529.
C	Subtract line <b>b</b> from line <b>a</b>					924,484.
d	Amounts included on Part I, line 12, but not on line a:			•••••		
1	Investment expenses not included on Part I, line 6b	l d	1			
	Other (specify):	1.				
	Add lines d1 and d2				d	0.
е					e 16,	924,484.
Pa	Total revenue (Part I, line 12). Add lines c and d  art IV-B Reconciliation of Expenses per Audited Fina	ancial Statements W	ith Expense	s per	Return	
а	Total expenses and losses per audited financial statements				a 14,	916,225.
b	Amounts included on line a but not on Part I, line 17:					
1	Donated services and use of facilities	<u>b</u>	1			
2	Prior year adjustments reported on Part I, line 20	b	2			
3						
4	Other (specify):	1.			_	
	Add lines <b>b1</b> through <b>b4</b>				b	0.
C	Subtract line <b>b</b> from line <b>a</b>				c 14,	916,225.
d	Amounts included on Part I, line 17, but not on line a:	1	1			
1	Investment expenses not included on Part I, line 6b	<u>d</u>	1			
2	Other (specify):					
	Add lines d1 and d2					0.
e	Total expenses (Part I, line 17). Add lines c and d			<u></u>		916,225.
2.56	art V-A Current Officers, Directors, Trustees, and Ke or key employee at any time during the year even if they we				officer, direc	ctor, trustee,
	(A) Name and address	(B) Title and average hours per week devoted to			ontributions to loyee benefit is & deferred	(E) Expense account and
	(Fig. Fallino and address)	position	(11 110t para, ent	compa	s & deferred ensation plans	other allowances
SE	E STATEMENT 14		178,303	3. 34	1,010.	0.
				1	····	
_						
	11 C - 11					
			l	.		

Form **990** (2005)

Pai	t V-A	Current Officers, Directors, Trustees, and Ke	y Employees (continu	ed)			Yes	No
75 a		e total number of officers, directors, and trustees permitted t s			9			
b	listed in Part II-A	officers, directors, trustees, or key employees listed in Form Schedule A, Part I, or highest compensated professional and or II-B, related to each other through family or business relatividuals and explains the relationship(s)	d other independent contr	actors listed in Scl	nedule A,	75b		X
C	listed in Part II-A	officers, directors, trustees, or key employees listed in Form 9 Schedule A, Part I, or highest compensated professional and or II-B, receive compensation from any other organizations, ation through common supervision or common control?	d other independent contr	actors listed in Scl able, that are relat	nedule A,	75c		X
	If "Yes," a describe	elated organizations include section 509(a)(3) supporting org attach a statement that identifies the individuals, explains the relations is the compensation arrangements, including amounts paid to each in	hip between this organization dividual by each related organ	nization.			v	
						75d	X	
era	48'C:1	Former Officers, Directors, Trustees, and Ke Benefits (If any former officer, director, trustee, or key en the year, list that person below and enter the amount of cor	ployee received compens	ation or other ben	efits (describe	d belo	w) dur	
		(A) Name and address NONE	(B) Loans and Advances	(C) Compensation	(D) Contributions employee benefi plans & deferred compensation pla	t ac	E) Expe ecount er allow	and
							·	
								-
Pa	rt VI	Other Information (See the instructions.)	1				Yes	No
76		organization engage in any activity not previously reported to				76		Х
77	If "Yes,	ny changes made in the organizing or governing documents attach a conformed copy of the changes.				77		X
78 a b	If "Yes,	-			N/A	78a 78b		X
79 00 -		ere a liquidation, dissolution, termination, or substantial contr				79	 	X
an a		rganization related (other than by association with a statewic rship, governing bodies, trustees, officers, etc., to any other				80a		X
b		" enter the name of the organization ► N/A	and check whether it is		nonexempt	JUG		-22
81 a	Enter d	rect or indirect political expenditures. (See line 81 instruction	•	1 1	0.			
<u>d</u>		organization file Form 1120-POL for this year?	•			81b Form	990	(2005)

90 a List the states with which a copy of this return is filed ► SEE STATEMENT 15

Located at ▶ 114 SANSOME, ROOM 1200, SAN FRANCISCO, CA

91 a The books are in care of ► ROLANDO COHEN

If "Yes," enter the name of the foreign country

If "Yes," enter the name of the foreign country

account)?

b 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

See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank

Section 4947(a)(1) nonexempt charitable trusts filling Form 990 in lieu of Form 1041- Check here ......

c At any time during the calendar year, did the organization maintain an office outside of the United States?

and enter the amount of tax-exempt interest received or accrued during the tax year .....

523162	
02-03-06	

N/A

Form 990 (2005)

24

No

Х

Х

362-2352

Yes

ZIP + 4 > 94104

Telephone no. ► (415)

.....

and Financial Accounts.

Note: Enter gross amounts unless otherwise	(A)	d business income	(C)	by section 512, 513, or 514	(E)
indicated.	Business	(B) Amount	Exclu-	(D) Amount	Related or exempt
93 Program service revenue:	code	7,71100111	sion code	/Witodit	function income
a SALE-EDUCATIONAL MAT'L					895.
b					
G					
d			-		
e <u> </u>				, , , , , , , , , , , , , , , , , , ,	
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					
94 Membership dues and assessments					
95 Interest on savings and temporary cash investments $\ \dots$			14	7,040.	
96 Dividends and interest from securities			14	1,419,990.	
97 Net rental income or (loss) from real estate:					
a debt-financed property					
b not debt-financed property			16	320.	
98 Net rental income or (loss) from personal property					
99 Other investment income					
00 Gain or (loss) from sales of assets					
other than inventory			18	652,128.	
01 Net income or (loss) from special events					
02 Gross profit or (loss) from sales of inventory		<u> </u>			
103 Other revenue:					e
a ROYALTY INCOME			15	6,680.	
b OTHER PROGRAM INCOME					4,202
C					
d					
e					
104 Subtotal (add columns (B), (D), and (E))			Λ (20000000001 I	2 202 150	E 007
			0.	2,086,158.	5,097.
105 Total (add line 104, columns (B), (D), and (E))					2,091,255.
105 Total (add line 104, columns (B), (D), and (E)) Note: Line 105 plus line 1d, Part I, should equal the am	nount on line 1	2, Part-l ~		<b>&gt;</b> _	2,091,255.
105 Total (add line 104, columns (B), (D), and (E)) Note: Line 105 plus line 1d, Part I, should equal the arr Part VIII Relationship of Activities to the	nount on line 12 e Accompl	2, Partd ishment of Exe	mpt Purp	oses (See the instructio	2,091,255. ns.)
105 Total (add line 104, columns (B), (D), and (E))  Note: Line 105 plus line 1d, Part I, should equal the am  Part VIII Relationship of Activities to the  Line No. Explain how each activity for which income is re	nount on line 12 e Accompl ported in column	2, Part-l ~ ishment of Exe n (E) of Part VII contrib	mpt Purp	oses (See the instructio	2,091,255 ns.)
Note: Line 105 plus line 104, columns (B), (D), and (E))  Part VIII Relationship of Activities to the Line No. Explain how each activity for which income is reexempt purposes (other than by providing funds)	nount on line 12 e Accompl ported in column	2, Part-l ~ ishment of Exe n (E) of Part VII contrib	mpt Purp	oses (See the instructio	2,091,255. ns.)
105 Total (add line 104, columns (B), (D), and (E))  Note: Line 105 plus line 1d, Part I, should equal the am  Part VIII Relationship of Activities to the  Line No. Explain how each activity for which income is re	nount on line 12 e Accompl ported in column	2, Part-l ~ ishment of Exe n (E) of Part VII contrib	mpt Purp	oses (See the instructio	2,091,255. ns.)
Note: Line 105 plus line 104, columns (B), (D), and (E))  Part VIII Relationship of Activities to the Line No.  Explain how each activity for which income is reexempt purposes (other than by providing funds)	nount on line 12 e Accompl ported in column	2, Part-l ~ ishment of Exe n (E) of Part VII contrib	mpt Purp	oses (See the instructio	2,091,255. ns.)
Note: Line 105 plus line 104, columns (B), (D), and (E))  Part VIII Relationship of Activities to the Line No.  Explain how each activity for which income is reexempt purposes (other than by providing funds)	nount on line 12 e Accompl ported in column	2, Part-l ~ ishment of Exe n (E) of Part VII contrib	mpt Purp	oses (See the instructio	2,091,255 ns.)
Note: Line 105 plus line 104, columns (B), (D), and (E))  Part VIII Relationship of Activities to the Line No.  Explain how each activity for which income is reexempt purposes (other than by providing funds SEE STATEMENT 16	nount on line 1: e Accompli ported in columo s for such purpo	2, Part4. – ishment of Exe n (E) of Part VII contrib ses).	mpt Purpouted importan	OSES (See the instruction the accomplishment of the accomplishmen	2,091,255.  ns.) f the organization's
Note: Line 105 plus line 104, columns (B), (D), and (E))  Part VIII Relationship of Activities to the Explain how each activity for which income is reexempt purposes (other than by providing funds SEE STATEMENT 16  Part IX Information Regarding Taxable	e Accompliported in column s for such purpo	2, Part-1.  ishment of Exemple 1 (E) of Part VII contribuses).	mpt Purpouted importan	oses (See the instruction the accomplishment of the accomplishment of the accomplishment of the instruction (See the instruction)	2,091,255.  ns.)  f the organization's
Note: Line 105 plus line 104, columns (B), (D), and (E))  Part VIII Relationship of Activities to the Explain how each activity for which income is reexempt purposes (other than by providing funds SEE STATEMENT 16  Part IX Information Regarding Taxable (A)  Name, address, and EIN of corporation, Percentage of	e Accompliported in column s for such purpo	2, Part4. – ishment of Exe n (E) of Part VII contrib ses).	mpt Purpouted importan	OSES (See the instruction the accomplishment of the accomplishmen	2,091,255.  ns.)  f the organization's
Note: Line 105 plus line 104, columns (B), (D), and (E))  Part VIII Relationship of Activities to the Line No.  Explain how each activity for which income is reexempt purposes (other than by providing funds SEE STATEMENT 16	e Accompliported in columns for such purpo	2, Part-1 ishment of Exe n (E) of Part VII contrib ses). ies and Disrega	mpt Purpouted importan	oses (See the instruction the accomplishment of the accomplishment	2,091,255.  ns.) f the organization's
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Note: Line 105 plus line 104, columns (B), (D), and (E))  Note: Line 105 plus line 1d, Part I, should equal the ampart VIII Relationship of Activities to the Explain how each activity for which income is research purposes (other than by providing funds SEE STATEMENT 16  Part IX Information Regarding Taxable (A)  Name, address, and EIN of corporation, partnership, or disregarded entity  N/A  Part X Information Regarding Transfer (a) Did the organization, during the year, receive any funds (b) Did the organization, during the year, pay premiums, d Note: If "Yes" to (b), file Form 8870 and Form 4720 (c)	e Subsidiar of rest % % % % crs Associa s, directly or indicectly or indirectly or ind	ishment of Exemple (E) of Part VII contributes (C) (C) Nature of activities (C) (C) Nature of activities (C)	npt Purpouted important arded Entire arded E	ities (See the instruction  Total income  it Contracts (See the al benefit contract?	2,091,255  ns.)  f the organization's  ns.)  (E) End-of-year assets  instructions.) Yes X No.
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Note: Line 105 plus line 104, columns (B), (D), and (E))  Note: Line 105 plus line 1d, Part I, should equal the am  Part VIII Relationship of Activities to the  Explain how each activity for which income is re exempt purposes (other than by providing funds)  SEE STATEMENT 16  Part IX Information Regarding Taxable  (A)  Name, address, and EIN of corporation, partnership, or disregarded entity  N/A  Part X Information Regarding Transfer  (a) Did the organization, during the year, receive any funds  (b) Did the organization, during the year, pay premiums, d  Note: If "Yes" to (b), file Form 8870 and Form 4720 (correct, and complete Declaration of preparer (other than Sign  Here Preparer's March 20 (correct) and complete Declaration of preparer (other than Signature of officer	e Subsidiar of rest % % % % crs Associa s, directly or indicectly or indirectly or ind	ishment of Exemple 1. (E) of Part VII contributes (C) Nature of activities  ted with Person rectly, to pay premium the style of activities (I) on a personal benefits (I) on a personal benefits (I) on a personal benefits (I) on a personal benefit (I) on the personal benefit (I) on	nal Benef s on a persona fit contract? s and statements eparer has any k Type or prin	ities (See the instruction (D) Total income  it Contracts (See the al benefit contract?  s, and to the best of my knowledge (See the instruction)  s, and to the best of my knowledge (See the instruction)  s, and to the best of my knowledge (See the instruction)	2,091,255  ns.)  f the organization's  is.)  (E)  End-of-year assets  instructions.)  Yes X No.  yes A No.  ge and belief, it is true,
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Note: Line 105 plus line 104, columns (B), (D), and (E))  Note: Line 105 plus line 1d, Part I, should equal the am  Part VIII Relationship of Activities to the Explain how each activity for which income is re exempt purposes (other than by providing funds)  SEE STATEMENT 16  Part IX Information Regarding Taxable (A)  Name, address, and EIN of corporation, partnership, or disregarded entity  N/A  Part X Information Regarding Transfer (a) Did the organization, during the year, receive any funds (b) Did the organization, during the year, pay premiums, d Note: If "Yes" to (b), file Form 8870 and Form 4720 (Please Sign Here  Preparer's signature  WILLIAM A. SCH	e Subsidiar of rest % % % % % crs Associa s, directly or indirectly or indirectly or indirectly or indirectly of instruction this return, including officer) is based on	ishment of Exemples (E) of Part VII contributes (C)  Nature of activities  ited with Person rectly, to pay premium the control of the companying schedule all information of which provides (B) accompanying schedule all information of the control o	nal Benefit contract?  s and statements eparer has any k Type or print Date 10-19-0	ities (See the instruction (D) Total income  it Contracts (See the al benefit contract?  s, and to the best of my knowledge (See the al benefit contract)  chowledge (See the al benefit contract)  chowledge (See the al benefit contract)	2,091,255.  ns.)  f the organization's  is.)  (E)  End-of-year  assets  instructions.)  Yes X No.  Yes X No.  ge and belief, it is true,  Dorrido Nybe

### **SCHEDULE A**

(Form 990 or 990-EZ)

Organization Exempt Under Section 501(c)(3)

(Except Private Foundation) and Section 501(e), 501(f), 501(k), 501(n), or 4947(a)(1) Nonexempt Charitable Trust

Supplementary Information-(See separate instructions.)

► MUST be completed by the above organizations and attached to their Form 990 or 990-EZ

OMB No. 1545-0047

2005

Department of the Treasury Internal Revenue Service Name of the organization

SAVE-THE-REDWOODS LEAGUE

Employer identification number

94 0843915

Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees (See page 1 of the instructions. List each one. If there are none, enter "None.") (b) Title and average hours per week devoted to Contributions to employee benefit plans & deferred (e) Expense account and other (a) Name and address of each employee paid (c) Compensation more than \$50,000 allowances position compensation PETER COLBY PROGRAM DIR. 114 SANSOME ST #1200, SAN FRANCISCO 35.00 0. 105,000. 24,985 RUSKIN HARTLEY CONSERV. DIR. 114 SANSOME ST #1200 SAN FRANCISCO 35.00 0. 111,150 19,006 DENISE PRICE SPCL. PRJ. ASST. 114 SANSOME ST #1200, SAN FRANCISCO, 35.00 24,845 0. 105,072. CATHERINE FOX DEVELOP. DIR. FRANCISCO 114 SANSOME ST #1200 SAN 35.00 112,126. 18,834. 0. ROLANDO COHEN CFO114 SANSOME ST #1200, SAN FRANCISCO, 35.00 0. 102,777. 16,462 Total number of other employees paid over \$50,000 Part II-A Compensation of the Five Highest Paid Independent Contractors for Professional Services (See page 2 of the instructions. List each one (whether individuals or firms). If there are none, enter "None.") (a) Name and address of each independent contractor paid more than \$50,000 (b) Type of service (c) Compensation MARGARET T. REILLY SAN FRANCISCO, CA 9413GENERAL COUNSEL 530 CHESTNUT STREET #407. 61,850. Total number of others receiving over \$50,000 for professional services 0 Part II-B Compensation of the Five Highest Paid Independent Contractors for Other Services (List each contractor who performed services other than professional services, whether individuals or firms. If there are none, enter "None." See page 2 of the instructions.) (a) Name and address of each independent contractor paid more than \$50,000 (b) Type of service (c) Compensation NONE

523101/02-03-06 LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 and Form 990-EZ.

Schedule A (Form 990 or 990-EZ) 2005

\$50,000 for other services

Total number of other contractors receiving over

0

P	art III Statements About Activities (See page 2 of the instructions.)		Yes	No
2	During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \	1	X	
а	Sale, exchange, or leasing of property?	2a		X
b	Lending of money or other extension of credit?	2b		Х
C	Furnishing of goods, services, or facilities?	20		Х
d	Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)? SEE PART V-A, FORM 990	2d	Х	
е	Transfer of any part of its income or assets?	2e		X
3 a	Do you make grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation of how			
	you determine that recipients qualify to receive payments.)	1		X
	Do you have a section 403(b) annuity plan for your employees?  During the year, did the organization receive a contribution of qualified real property interest under section 170(h)?	3b		X
	Did you maintain any separate account for participating donors where donors have the right to provide advice	3c		Λ.
7 4	on the use or distribution of funds?	4a		Х
b	Do you provide credit counseling, debt management, credit repair, or debt negotiation services?			X
	art IV Reason for Non-Private Foundation Status (See pages 3 through 6 of the instructions.)			
The	e organization is not a private foundation because it is: (Please check only ONE applicable box.)			
5				
6				
7				
8	A Federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v).			
9				
10	An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 170(b)(1)(A)(iv) (Also complete the <b>Support Schedule</b> in Part IV-A.)	•		
11	An organization that normally receives a substantial part of its support from a governmental unit or from the general public.  Section 170(b)(1)(A)(vi). (Also complete the <b>Support Schedule</b> in Part IV-A.)			
11	b A community trust. Section 170(b)(1)(A)(vi). (Also complete the <b>Support Schedule</b> in Part IV-A.)			
12	An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its charitable, etc., functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Also complete the Support Schedule in Part IV-A.)			
13	An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organizations desc (1) lines 5 through 12 above; or (2) sections 501(c)(4), (5), or (6), if they meet the test of section 509(a)(2). Check the box that described the type of supporting organization:  Type 1  Type 2  Type 3  Provide the following information about the supported organizations. (See page 6 of the instructions.)			
	(a) Name(s) of supported organization(s)		ne num om ab	
_	4 An organization organized and operated to test for public safety. Section 509(a)(4). (See page 6 of the instructions.)			
	Schedule A (Form 33-06	990 or	990-E2	Z) 2005

Par	**Support Schedule (C	omplete only if you che e worksheet in the insti	ecked a box on line 10	, 11, or 12.) Use cash	method of accounting	g. Sunting
	dar year (or fiscal year					
	ning in)	(a) 2004	(b) 2003	(c) 2002	(d) 2001	(e) Total
15	Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.)	12,787,005.	5,157,104.	55,634,260.	12,089,318.	85,667,687.
16	Membership fees received					
17	Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc., purpose	1,018.	1,468.	1,912.	2,229.	6,627.
18	Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975	703,125.	540,105.		1,293,180.	
19	Net income from unrelated business		310/1031	7207723.	1,233,100.	3/203/103•
20	activities not included in line 18  Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					
21	The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge					
22	Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets			SEE STATEME	5,010.	5,010.
23	Total of lines 15 through 22	13,491,148.	5,698,677.	56,364,897.	13,389,737.	88,944,459.
24	Line 23 minus line 17		5,697,209.	56,362,985.	13,387,508.	88,937,832.
25	Enter 1% of line 23	134,911.		563,649.		
26	Organizations described on lines 1				0000000000	1,778,757.
b	Prepare a list for your records to sh		•	, ,	5000000000	
	unit or publicly supported organizat		-			16 404 571
	Do not file this list with your return					16,434,571. 88,937,832.
C	Total support for section 509(a)(1)	test: Enter line 24, column	(e)		<u>26c</u>	00,937,032.
a	Add: Amounts from column (e) for	100 3,2	5 010 neb	16 434 57	1. ► 26d	19,704,716.
	Public support (line 26c minus line	22	<u> </u>	10,434,37	26e	69,233,116.
G f	Public support percentage (line 26					77.8444%
27	Organizations described on line 12					
	records to show the name of, and to such amounts for each year: (2004)	otal amounts received in e $\mathrm{N/A}$	ach year from, each "disc	qualified person." <b>Do not f</b>	ile this list with your retu	rn. Enter the sum of
b	For any amount included in line 17 f					
	and amount received for each year,		•		•	
	described in lines 5 through 11b, as				•	
	the larger amount described in (1)	or (2), enter the sum of the	ese differences (the exce	ss amounts) for each yea	r: N/A	
	(2004)					•••••
C	Add: Amounts from column (e) for	lines: 15 _		16		1 -
	17	lines: 15 _ 20 _		_ 21	▶ 27c	N/A
d	Add: Line 27a total	ar	nd line 27b total		<b>&gt;</b> 27d	N/A
е	Public support (line 27c total minus	line 27d total)		<b>N</b> 11	▶ 27e	N/A
f	Total support for section 509(a)(2)					% T / 7∧
g	Public support percentage (lin		and the second s		- L	N/A % N/A %
	Investment income percentag					·
20 L	Jnusual Grants: For an organization show, for each year, the name of the constant of the const	on described in line 10, 11 contributor, the date and a	, or 12 that received any mount of the grant, and	a brief description of the i	nature of the grant. <b>Do no</b>	t file this list with your

NONE

523121 02-03-06

return. Do not include these grants in line 15.

Schedule A (Form 990 or 990-EZ) 2005

Part V Private School Questionnaire (See page 7 of the instructions.)

N/A

### (To be completed ONLY by schools that checked the box on line 6 in Part IV)

29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing		Yes	No
	instrument, or in a resolution of its governing body?	29		
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues,	···		
	and other written communications with the public dealing with student admissions, programs, and scholarships?	30		
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of			
	solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known			
	to all parts of the general community it serves?	31		
	If "Yes," please describe; if "No," please explain. (If you need more space, attach a separate statement.)			
		_		
		_		
		_		
		_		
32	Does the organization maintain the following:			
а	Records indicating the racial composition of the student body, faculty, and administrative staff?			
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	32b		
C	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student			
	admissions, programs, and scholarships?			<u> </u>
d	Copies of all material used by the organization or on its behalf to solicit contributions?	32d		200000000000000000000000000000000000000
	If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.)			
		-		
33	Does the organization discriminate by race in any way with respect to:			
a	Students' rights or privileges?			-
D	Admissions policies?			-
C	Employment of faculty or administrative staff?			-
u	Scholarships or other financial assistance?			<u> </u>
e f	Educational policies?			
1	Use of facilities? Athletic programs?		-	<del>                                     </del>
y h			1	-
"	If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.)	3311		
	in you answered Tes to any of the above, please explain. (If you need more space, attach a separate statement.)			
		-		
		-		
34 a	Does the organization receive any financial aid or assistance from a governmental agency?		100000000000000000000000000000000000000	400000000000000000000000000000000000000
b	Has the organization's right to such aid ever been revoked or suspended?			
7	If you answered "Yes" to either 34a or b, please explain using an attached statement.			
35	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50,			
	1975-2 C.B. 587, covering racial nondiscrimination? If "No," attach an explanation	35		

Schedule A (Form 990 or 990-EZ) 2005

Page 5

Part VI-A Lobbying Expenditures by Electing Public Charities (See page 9 of the instructions.) (To be completed ONLY by an eligible organization that filed Form 5768)

	(10 be completed <b>CHE1</b> by an engine organization that med 10 m 0700)			
Che	eck <b>&gt; a</b> if the organization belongs to an affiliated group. Check <b>&gt; b</b> if	you che	ecked "a" and "limited control"	provisions apply.
	Limits on Lobbying Expenditures  (The term "expenditures" means amounts paid or incurred.)		<b>(a)</b> Affiliated group totals	(b) To be completed for ALL electing organizations
			N/A	
36	Total lobbying expenditures to influence public opinion (grassroots lobbying)	36		0.
37	Total lobbying expenditures to influence a legislative body (direct lobbying)	37		4,886.
38	Total lobbying expenditures (add lines 36 and 37)	38		4,886.
39	Other exempt purpose expenditures	39		14,911,340.
40	Total exempt purpose expenditures (add lines 38 and 39)	40		14,916,226.
41	Lobbying nontaxable amount. Enter the amount from the following table -			
	If the amount on line 40 is - The lobbying nontaxable amount is -			
	Not over \$500,000 20% of the amount on line 40			
	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 \$	41		895,811.
	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 line 41)	42		223,953.
43	Subtract line 42 from line 36. Enter -0- if line 42 is more than line 36	43		0.
44	Subtract line 41 from line 38. Enter -0- if line 41 is more than line 38	44		0.
	Caution: If there is an amount on either line 43 or line 44, you must file Form 4720.			

### 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 45 through 50 on page 11 of the instructions.)

	3515111: 656 1116 1116	tractions for miles 40 times	gir oo on pago 11 or alo illo		
		Lobbying Exp	enditures During 4-Year Av	eraging Period	
Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2004	(c) 2003	(d) 2002	<b>(e)</b> Total
45 Lobbying nontaxable amount	895,811.	800,633.	638,895.	1,000,000.	3,335,339.
46 Lobbying ceiling amount (150% of line 45(e))					5,003,009.
47 Total lobbying expenditures	4,886.	100,000.	0.	150,100.	254,986.
48 Grassroots nontaxable amount	223,953.	200,158.	159,650.	250,000.	833,761.
49 Grassroots ceiling amount (150% of line 48(e))					1,250,642.
50 Grassroots lobbying expenditures					0.

	expenditures				0.
P	art VI=B Lobbying Activity by Nonelecting Public Charities (For reporting only by organizations that did not complete Part VI-A) (See page 11 of the inst	ructions.)			N/A
	ring the year, did the organization attempt to influence national, state or local legislation, including any attem uence public opinion on a legislative matter or referendum, through the use of:	pt to	Yes	No	Amount
а	Volunteers				
	Paid staff or management (Include compensation in expenses reported on lines c through h.)				
C	Media advertisements				
	Mailings to members, legislators, or the public	i i			
е	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 other means				
i	Total lobbying expenditures (Add lines c through h.)				0.
	If "Yes" to any of the above, also attach a statement giving a detailed description of the lobbying activities.	•			

523141 02-03-06

Schedule A (Form 990 or 990-EZ) 2005

94-0843915 Page 6 Schedule A (Form 990 or 990-EZ) 2005 SAVE-1HE-REDWOODS LEAGUE Part VIII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations (See page 12 of the instructions.) Did the reporting organization directly or indirectly engage in any of the following with any other organization described in section 51 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? Yes No a Transfers from the reporting organization to a noncharitable exempt organization of: Х 51a(i) (ii) Other assets b Other transactions: (i) Sales or exchanges of assets with a noncharitable exempt organization (ii) Purchases of assets from a noncharitable exempt organization (iii) Rental of facilities, equipment, or other assets (iv) Reimbursement arrangements (vi) Performance of services or membership or fundraising solicitations Sharing of facilities, equipment, mailing lists, other assets, or paid employees If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting organization. If the organization received less than fair market value in any N/Atransaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received: (a) Amount involved Name of noncharitable exempt organization Description of transfers, transactions, and sharing arrangements Line no 52 a Is the organization directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the X No ..... Code (other than section 501(c)(3)) or in section 527? ...... b If "Yes," complete the following schedule: (b) (c) (a) Name of organization Type of organization Description of relationship

523151

### \*\* PUBLIC DISCLOSURE COPY \*\*

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

Department of the Treasury Internal Revenue Service

Name of organization

### **Schedule of Contributors**

Supplementary Information for line 1 of Form 990, 990-EZ, and 990-PF (see instructions)

OMB	No.	1545-0047

2005

Employer identification number

LHA For Paperwork	Reduction Act Notice, see the Instructions	Schedule	B (Form 990, 990-EZ, or 990-PF) (2005)
they must check the b	is that are not covered by the General Rule and/or the Special pox in the heading of their Form 990, Form 990-EZ, or on line a dule B (Form 990, 990-EZ, or 990-PF).	· ·	· ·
some contribe \$1,000. (If this charitable, etc	501(c)(7), (8), or (10) organization filing Form 990, or Form 99 utions for use <i>exclusively</i> for religious, charitable, etc., purposes box is checked, enter here the total contributions that were c., purpose. Do not complete any of the Parts unless the <b>Gen</b> ly religious, charitable, etc., contributions of \$5,000 or more contributions.	ses, but these contributions did received during the year for an reral Rule applies to this organ	d not aggregate to more than exclusively religious, ization because it received
aggregate co	501(c)(7), (8), or (10) organization filing Form 990, or Form 990 ntributions or bequests of more than \$1,000 for use exclusive the prevention of cruelty to children or animals. (Complete Page 1)	ely for religious, charitable, scie	
sections 1.50	501(c)(3) organization filing Form 990, or Form 990-EZ, that m 9(a)-3/1.170A-9(e) and received from any one contributor, du t on line 1 of these forms. (Complete Parts I and II.)		
contributor. (0	ions filing Form 990, 990-EZ, or 990-PF that received, during t Complete Parts I and II.)	he year, \$5,000 or more (in mo	ney or property) from any one
General Rule-			
-	tion is covered by the <b>General Rule</b> or a <b>Special Rule.</b> ( <b>Note</b> ule and a Special Rule-see instructions.)	: Only a section 501(c)(7), (8), o	r (10) organization can check boxes
	501(c)(3) taxable private foundation		
	4947(a)(1) nonexempt charitable trust treated as	a private foundation	
Form 990-PF	501(c)(3) exempt private foundation		
	527 political organization	·	
	4947(a)(1) nonexempt charitable trust <b>not</b> treated	d as a private foundation	
Form 990 or 990-EZ	X 501(c)( 3 ) (enter number) organization		
Filers of:	Section:		
Organization type (che	SAVE-THE-REDWOODS LEAGUE		94-0843915
			04 004001

for Form 990, Form 990-EZ, and Form 990-PF.

Employer identification number

### SAVE-THE-REDWOODS LEAGUE

94-0843915

Part I	Contributors (See Specific Instructions.)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1		\$ 36,513.	Person Payroll Noncash  (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
2		\$12,415,665.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
3		\$\$ <u>294,938.</u>	Person Payroll Noncash X (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		<b>\$</b>	Person Payroll Noncash (Complete Part II if there is a noncash contribution.

Employer identification number

### SAVE-THE-REDWOODS LEAGUE

94-0843915

Part II	Noncash Property (See Specific Instructions.)		
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	INTEREST ON NOTE PAYABLE		
		\$36,513.	VARIOUS
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
3			
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		<b>\$</b>	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	90, 990-EZ, or 990-PF) (20

2005 DEPRECIATION AND AMORTIZATION REPORT FORM 990 PAGE 2

Amount Of Depreciation	•0	0.	0.	· 0	.0	• 0	0.	• 0	0.	• 0	0.	· 0	2,335.	0.	108.	187.	62.	uction, GO Zone
Current Sec 179																		talization Ded
Accumulated Depreciation	20,806.	1,327.	566.	491.	1,930.	363.	433.	549.	. 566.	380.	497.	322.	12,652.	8,316.	3,082.	5,365.	1,768.	* ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone
Basis For Depreciation	20,806.	1,327.	566.	491.	1,930.	363.	433.	549.	566.	380.	497.	322.	16,351.	8,317.	3,190.	5,552.	1,830.	), Salvage, Bonus
* Reduction In Basis																		TC, Section 179
Bus % Excl																		*
Unadjusted Cost Or Basis	.20,806.	1,327.	566.	491.	1,930.	363.	433.	549.	566.	380.	497.	322.	16,351.	8,317.	3,190.	5,552.	1,830.	(D) - Asset disposed
Line No.	16	16	9	16	9	16	9	16	91	16	9	16	9	16	9	16	91	- Asset
Life	2.00	7.00	7.00	5.00	2.00	5.00	5.00	5.00	7.00	5.00	2,00	5.00	7.00	5.00	2.00	5.00	5.00	0
Method		$_{ m SI}$		SL	딦	$_{ m SI}$		SL		SL		${ m SI}$		SL		${ m SI}$	SI	
Date Acquired	VARIES	061397	110597SL	062698SL	062698SL	071598	092398SL	042599	TS669050	071599	072099SL	072899SL	102199SL	011300SL	060100SL	060100SL	TS006090	
Description	MACHINERY & EQUIPMENT ZEURNITURE & EQUIPMENT VARIESSL	3SLIDE CABINET W/VIEWER061	4GRAY COMPUTER CHAIR	5(D)DELL COMPUTER	6(D)DELL COMPUTER	7HP DESKJET	SPALM PILOT	9HP DESKJET	10CHAIR	1HP DESKJET	12DOCKING STATION	3PALM PILOT	14OFFICE FURNITURE	6COMPUWAVE LAN	SONY LAPTOP	8LCD PROJECTOR	19(D)DELL COMPUTER	
Asset No.		(,)	Ş	ц)	ý	(*	w	O1	ĭ	11	7	13	7	16	17	18	15	528102 01-06-06

### 2005 DEPRECIATION AND AMORTIZATION REPORT FORM 990 PAGE 2

990

Amount Of Depreciation	• 0	103. 1,469.	227.	82.	390.	249.	1,602.	362.	413.	219.	213.	560	134.	383.	423.	1,168.	205.
Current Sec 179																	
Accumulated Depreciation	14,885.	1,426. 20,546.	2,028.	731.	3,503.	1,881.	7,716,	2,352.	1,620.	860.	837.	2,149.	494.	1,406.	1,551.	4,008.	701.
Basis For Depreciation	14,885.	1,529. 22,015.	2,255.	813.	3,893.	2,130.	12,230.	2,714.	2,069.	1,098.	1,070.	2,805.	.676.	1,917.	2,114.	5,841.	1,026.
* Reduction In Basis																	
Bus % Excl																	
Unadjusted Cost Or Basis	14,885.	1,529.	2,255.	813.	3,893.	2,130.	12,230.	2,714.	2,069.	1,098.	1,070.	2,805.	676.	1,917.	2,114.	5,841.	1,026.
Line No.	16	16 16	16	16	91	16	9	16	9	16	91	16	T 6	16	9	16	9
Life	3333333	5.00	5.00	5.00	2.00	5.00	7.00	5.00	2.00	5.00	0°.	5.00	9.00	5.00	2.00	5.00	5.00
Method	TS	SI SI	ᅜ	SI	מ	SL	J.	$_{ m SI}$	ري ري	SI	디디	SI	N H	SL	i H	SL	21
Date Acquired	18006Z90	072000SI 080100SI	100100ST	100100SL	100100ST	111600SL	111700SL	122900SL	042601SL	042601SL	042701SL	052301SL	080101SL	080101SL	080901SL	1011901	102401SL
Description	20SASSCO SALTEY WORK	21(D)DELL COMPUTER 22RAISER EDGE SOFTWARE	23(D) DELL COMPUTER	24NIKON DIGITAL CAMERA	25(D)DELL COMPUTER	26THINKPAD COMPUTER	27 (D) OFFICE FURNITURE	8DELL COMPUTER	29HP PRINTER	30HP PRINTER	31DELL COMPUTER	32IBM COMPUTER	33IBM PALM PILOT	34IBM THINKPAD	35DELL COMPUTER	6DELL SERVER	37DELL COMPUTER
Asset No.	20	22 22	N	77	CX.	26	Ñ	28	N	3(	m	32	'n	34	m m	36	3.

528102 01-06-06

(D) - Asset disposed

## 2005 DEPRECIATION AND AMORTIZATION REPORT FORM 990 PAGE 2

990

Asset No.	Description	Date Acquired	Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Amount Of Depreciation
38	38CONFERENCE TELEPHONE	120301	SL	5.00	16	650			650.	433.		130.
39	39LATERAL FILE CABINET	121101SL		7.00	16	806.			806.	384.		115.
40	40DELL COMPUTER	011802	SL	2.00	16	1,029.			1,029.	652.		206.
4	41SONY VAIO LAPTOP	021502SL		5,00	16	1,996.			1,996.	1,264.		399.
42	DELL PRECISION 42MINITOWER	060702SL		5.00	16	1,136.			1,136.	644.		227.
43	DELL PRECISION 43minitower	060702SL	<u>10</u>	.00	16	1,136.			1,136.	644.		227.
44	(D)OFFICE FURNITURE	080702 <u>sr</u>	IS	00.7	16	3,329.			3,329.	1,269.		435.
45	45HP LASERJET	081502SL	II.	00.	16	1,868.			1,868.	.766		374.
46	SONY LAPTOP	100102	SL	2.00	16	1,965.			1,965.	982.		393.
47	47KYOCERA COPIER	111902SL		5.00	16	19,275.			19,275.	8,995.		3,855.
48	48DELL COMPUTER	112602SL		5.00	16	821.			821.	383.		164.
49	49DELL COMPUTER	020903SL	E H	00.	91	1,018.			1,018.	441.		204.
50	50DELL COMPUTER	020903SL		5.00	16	1,018.			1,018.	441.		204.
Ω	51DELL COMPUTER	020903ET	H H	00*	91	1,018.			1,018.	441.		204.
52	52DELL POWEREDGE SERVER	020903	3ST 2	5.00	16	4,115.			4,115.	1,783.		823.
53	53APC BACK UPS SERVER	021603SL	H H	00.	9	502.			502.	217.		100.
54	54NEC PHONE SYSTEM	040703	3SL 5	2.00	16	13,369.			13,369.	5,348.		2,674.
n	55NEC CORDLESS HEADSETS 042203SL	042203		00.	16	866.			866.	346.		173.

528102 01-06-06

(D) - Asset disposed

2005 DEPRECIATION AND AMORTIZATION REPORT FORM 990 PAGE 2

Amount Of Depreciation	.776	0.	724.	1,116.	2,787.	1,705.	449.	448.	104.	139	497.	* * * * * * * * * * * * * * * * * * * *	.0	• 0		7,952.	1,666.
An												•		•			
Current Sec 179											c	3		0			
Accumulated Depreciation	.776	13,234.									177 000	* 70 6 1 10 1		• 0		53,019.	10,003.
Basis For Depreciation	4,886.	13,234.	4,350.	7,441.	27,873.	17,052.	4,495.	6,733.	2,090.	8,341.	3,796.	• 067 / 006	18694425.	18694425.		60,971.	11,669.
Reduction In Basis											c	* D		.0			
Bus % Excl																	
Unadjusted Cost Or Basis	4,886.	13,234,	4,	7,441.	27,873.	17,052.	4,495.	6,733.	2,090.	8,341.	3,796.	* 0 C / / 7 D C /	18694425.	.8694425.		60,971.	11,669.
No.	16	16	16	16	16	16	16	91	16	9 T	16		***	— <del>—</del>		16	16
Life	5.00	5.00	. • (	7.00	7.00	7.00	5.00	2.00	5.00	7.00	7.00					5.75	5,25
Method	SL	뎞	SL	ն	SL	<u>[]</u>	SL	מ	SI	다 다	SL		н			SL	SI
Date Acquired	041304SL	VARIESSI	062005	071105SL	100305SL	100305	100305SL	120105SL	01010681	030406SL	051005SL		VARIESE			040100	100100
Description	DELL POWER EXTERNAL IDRIVE	(D)FURNITURE &	IMAGO FILES AND 66CABINETS (11)	IMAGO FILES AND	IMAGO REFURBISHED 68WORKSTATIONS (16)	IMAGO FILES (18), PCHAIRS (48) AND TABLES100305SL	70AVT PROJECTION SYSTEM	71HP DESIGNJET 800PS	72AVT PROJECTION SYSTEM TWAGO MRKR BD. CUBICIE	73FURNITURE, AND FLATFI		MACHINERY & EQUIPMENT	LAND	* 990 PAGE 2 TOTAL LAND	OTHER	5(D)TENANT IMPROVEMENTS	57(D)TENANT IMPROVEMENTS 100100 SL
Asset No.	64	99 9	99	67	39	69	7.0	71	72	7	74		<del>, - 1</del>			56	57

528102 01-06-06

(D) - Asset disposed

# 2005 DEPRECIATION AND AMORTIZATION REPORT FORM 990 PAGE 2

990

Amount Of Depreciation	311.	696. 647.	11,272.			
Current Sec 179			.0			
Accumulated Depreciation		1,854. 1,724.	67,739.			
Basis For Depreciation	1,450.	2,550. 2,371.	-6845273. -6766262. 12228921.			
* Reduction In Basis			.0			
Bus % Excl						
Unadjusted Cost Or Basis	1,450.	2,550. 2,371.	-6845273. -6766262. 12228921.			
No.		16 16				
Life	· *****	2.75 2.75				
Method	SL	SL	H			
Date Acquired	071302SL	040403SL 040703SL	RIES S			
Ac	21. 0 7.	13 0 4 0 4	EVA.			
_	IMPROVEMENTS IMPROVEMENTS	ROVEMENT	OOK VALU TOTAL 990 PAC			
Description	(D) TENANT IMPROVEMENTS - DOOR (D) TENANT IMPROVEMENTS	- PAINTING (D)TENANT IMPROVEMENTS - CARPETING	75ADJ LAND TO BOOK VALUEVARIES * 990 PAGE 2 TOTAL OTHER * GRAND TOTAL 990 PAGE 2 DEPR			
			ADJ LAI * 990 ] OTHER * GRANI 2 DEPR			
Asset No.	58.	60	7,			

22

(D) - Asset disposed

FORM 990	RENTAL INCOM	E		STATEMENT 1
KIND AND LOCATION OF PROPERTY	w.		ACTIVITY NUMBER	GROSS RENTAL INCOME
CABIN RENTED TO FOREST RANGERS	3		1	320.
TOTAL TO FORM 990, PART I, LIN	IE 6A		,	320.
FORM 990 GAIN (LOSS) FF	ROM PUBLICLY T	RADED SECURI	TIES	STATEMENT 2
DESCRIPTION	GROSS SALES PRICE	COST OR OTHER BASIS		
1,500,000 SHS FEDERAL NATIONAL MORTGAGE ASSN 500,000 SHS FANNIE MAE STEP	1,500,000.	1,565,190.	0	65,190.
UP	500,000.	499,750.	0	250.
TO FORM 990, PART I, LINE 8	2,000,000.	2,064,940.	0	-64,940.

FORM 990 GAI	N (LOSS) FROM S	SALE OF OTH	ER ASSETS	S	TATEMENT	3
DESCRIPTION		DATE ACQUIR			THOD UIRED	
LOSS ON SALE OF EQUIPM	ENT	VARIOU	s vario	US PUR	CHASED	
NAME OF BUYER	GROSS SALES PRICE O	COST OR THER BASIS	EXPENSE OF SALE	DEPREC	NET GAI OR (LOS	
	0.	119,732.	0.	115,195	-4,53	37.
DESCRIPTION		DATE ACQUIR			THOD UIRED	
GAIN ON SALE OF LAND		VARIOU	s VARIO	US PUR	CHASED	
NAME OF BUYER	GROSS SALES PRICE O	COST OR THER BASIS	EXPENSE OF SALE	DEPREC	NET GAI	
	2,044,800.	1,323,195.	0.	0	721,60	)5.
TO FM 990, PART I, LN	8 2,044,800.	1,442,927.	0.	115,195	717,06	58.
FORM 990 OTHER	CHANGES IN NET	ASSETS OR	FUND BALAN	ICES S	TATEMENT	4
DESCRIPTION					AMOUNT	
UNREALIZED GAIN ON INV		ND		44444	142,52 308,00	
TOTAL TO FORM 990, PAR	RT I, LINE 20				450,52	29.
FORM 990	ОТН	ER EXPENSES	;	S	TATEMENT	5
	(A)	(B) PROGRAM	)) )	C) SEMENT	(D)	
DESCRIPTION	TOTAL	SERVICE		SENERAL	FUNDRAISI	NG
CONSULTANTS INSURANCE INVESTMENT FEES SERVICES AND FEES	11,853. 51,423. 56,883. 210,385.	4,6 19,5 25,9	0.	7,197. 13,100. 56,883. 19,919.	18,79 64,51	0.
APPRAISALS AND	210,303.	23/3	31.	,	01/0.	15.

SAVE-THE-REDWOODS LEAGUE		(		94-0843915
OTHER PROJECT COSTS OTHER FUNDRAISING	108,596.	101,937.	5,083.	1,576.
COSTS	12,976.	0.	0.	12,976.
FURNITURE AND EQUIPMENT	23,054.	8,189.	7,063.	7,802.
MISCELLANEOUS	15,447.	4,284.	8,504. 0.	2,659. 0.
LOBBYING MARKETING/PUBLIC	4,886.	4,886.	0.	0.
RELATIONS	1,320.	0.	75.	1,245.
TOTAL TO FM 990, LN 43	627,950.	300,556.	217,824.	109,570.

FORM 990 OFFIC	CER COMPENSATIO PART II, LIN		ST	CATEMENT 6
NAME OF OFFICER, ETC.	COMPENSATION	EMPLOYEE BEN. PLANS	EXPENSE ACCOUNTS	TOTALS
KATHERINE E. ANDERTON	178,303.	34,010.		212,313.
A. PROGRAM SERVICES	75,600.	14,420.		90,020.
B. MANAGEMENT AND GENERAL	46,537.	8,877.		55,414.
C. FUNDRAISING	55,987.	10,679.		66,666.
TOTAL MANAGEMENT AND GENER.  TOTAL FUNDRAISING  TOTAL OFFICER, ETC., COMPE		ED ON PARTS V	-A AND V-B =	55,414. 66,666. 212,100.
FORM 990 CA	SH GRANTS AND A	ALLOCATIONS	ניצ	PATEMENT 7
CLASSIFICATION DONEE'S NA	ME DONEE'	S ADDRESS	DONEE'S RELATIONSHIP	AMOUNT
SEE ATTACH	MENT A		NONE	273,885.
TOTAL INCLUDED ON FORM 990				273,885.

10,621,005.

TOTAL INCLUDED ON FORM 990, PART II, LINE 22

FORM 990 NONCASH GRANTS AND ALLOCATIONS STATEMENT 8 CLASS OF ACTIVITY: DONEE'S NAME DONEE'S ADDRESS SEE ATTACHMENT B RELATIONSHIP OF DONEE DESCRIPTION OF PROPERTY DATE OF GIFT METHOD USED TO DETERMINE BOOK VALUE BOOK VALUE AMOUNT GIVEN METHOD USED TO DETERMINE FAIR MARKET VALUE 0. 10,621,005.

FORM 990 STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS

STATEMENT

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### DESCRIPTION OF PROGRAM SERVICE ONE

IN THE FISCAL YEAR-ENDED MARCH 31, 2006, SAVE-THE-REDWOODS LEAGUE PLAYED A CRITICAL ROLE IN THE PERMANENT PRESERVATION OF REDWOOD WATERSHED AND HABITAT LANDS BY ACQUIRING TITLE OR CONSERVATION EASEMENTS OVER 7,357 ACRES, VALUED AT \$10.4 MILLION, AND TRANSFERRING 7,162 ACRES OF LAND, VALUED AT \$16.3 MILLION, TO CALIFORNIA STATE PARKS FOR PERMANENT PROCTECTION. THIS TRANSFER OF LAND GENERATED PROGRAMMATIC ACCOMPLISHMENT OF \$10.4 MILLION. GRANTS FOR INTERPRETIVE CENTERS, REFORESTATION, HABITAT RESTORATION, COOPERATIVE PRESERVATION, TRAIL CREATION OR RESTORATION AND RELATED RESEARCH EXCEEDED \$192,000. IN ADDITION, THE LEAGUE DEMONSTRATED ITS ONGOING COMMITMENT TO CONSERVATION EDUCATION THROUGH ITS GRANT-MAKING ACTIVITIES OF MORE THAN \$81,000 AND THE PUBLICATION OF MAPS AND INFORMATIONAL MATERIALS FOR THE LEAGUE'S PARTNERS AND MEMBERS.

		GRANTS	EXPENSES
TO FORM 990, PART III, LINE A		10,894,890.	12,399,119.
FORM 990 OTHER	R INVESTMENTS		STATEMENT 10
DESCRIPTION	134 344 345	VALUATION METHOD	AMOUNT
INVESTMENTS		MARKET VALUE	51,743,743.
TOTAL TO FORM 990, PART IV, LINE 56	, COLUMN B		51,743,743.

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STATEMENT

FORM 990

COST OR ACCUMULATED BOOK VALUE DESCRIPTION OTHER BASIS DEPRECIATION 18,694,425. 0. 18,694,425. LAND 20,806. 20,806. 0. FURNITURE & EQUIPMENT 1,327. 0. 1,327. SLIDE CABINET W/VIEWER 566. 566. 0. GRAY COMPUTER CHAIR 0. HP DESKJET 363. 363. 433. 433. PALM PILOT 549. 0. 549. HP DESKJET 566. 566. 0. CHAIR 0. 380. 380. HP DESKJET 0. DOCKING STATION 497. 497. 322. 322. 0. PALM PILOT 16,351. 14,987. 1,364. OFFICE FURNITURE 8,316. 8,317. 1. COMPUWAVE LAN 0. 3,190. 3,190. SONY LAPTOP LCD PROJECTOR 5,552. 5,552. 0. SASSCO SALTEY WORK 14,885. 14,885. 0. 22,015. 0. 22,015. RAISER EDGE SOFTWARE 813. 0. 813. NIKON DIGITAL CAMERA 2,130. 2,130. THINKPAD COMPUTER 0. 0. 2,714. 2,714. DELL COMPUTER 2,033. 2,069. 36. HP PRINTER 1,079. 1,098. 19. HP PRINTER 1,070. 1,050. 20. DELL COMPUTER 2,805. 2,709. 96. IBM COMPUTER 676. 628. 48. IBM PALM PILOT 1,789. 1,917. 128. IBM THINKPAD DELL COMPUTER 2,114. 1,974. 140. 5,841. 665. 5,176. DELL SERVER 120. DELL COMPUTER 1,026. 906. CONFERENCE TELEPHONE 650. 563. 87. 806. 499. 307. LATERAL FILE CABINET 1,029. 858. 171. DELL COMPUTER 1,996. 1,663. 333. SONY VAIO LAPTOP 1,136. 265. DELL PRECISION MINITOWER 871. 1,136. 871. 265. DELL PRECISION MINITOWER 1,868. 1,371. 497. HP LASERJET 1,965. SONY LAPTOP 1,375. 590. 19,275. 6,425. 12,850. KYOCERA COPIER DELL COMPUTER 821. 547. 274. 1,018. 645. 373. DELL COMPUTER 1,018. 645. 373. DELL COMPUTER 1,018. 373. DELL COMPUTER 645. 1,509. 4,115. 2,606. DELL POWEREDGE SERVER APC BACK UPS SERVER 502. 317. 185. NEC PHONE SYSTEM 13,369. 8,022. 5,347. 866. 519. 347. NEC CORDLESS HEADSETS

DEPRECIATION OF ASSETS NOT HELD FOR INVESTMENT

SAVE-THE-REDWOODS LEAGUI			94-0843915
DELL POWER EXTERNAL DRIVE	4,886.	1,954.	2,932.
IMAGO FILES AND CABINETS (11)	4,350.	724.	3,626.
IMAGO FILES AND CABINETS (13)	7,441.	1,116.	6,325.
IMAGO REFURBISHED WORKSTATIONS	·	·	
(16)	27,873.	2,787.	25,086.
IMAGO FILES (18), CHAIRS (48)	•	·	
AND TABLES (8)	17,052.	1,705.	15,347.
AVT PROJECTION SYSTEM	4,495.	449.	4,046.
HP DESIGNJET 800PS	6,733.	448.	6,285.
AVT PROJECTION SYSTEM	2,090.	104.	1,986.
IMAGO MRKR BD, CUBICLE	•		·
FURNITURE, AND FLATFILE	8,341.	139.	8,202.
TENANT IMPROVEMENTS - OFFICE	•		•
RENOVATION	3,796.	497.	3,299.
ADJ LAND TO BOOK VALUE	-6,845,273.	0.	-6,845,273.
TOTAL TO FORM 990, PART IV, LN 57	12,109,189.	162,545.	11,946,644.

FORM 990	MI	OTHER NOT	CES AND	LOANS PAY	ABLE		STATEMENT	12
LENDER'S	NAME	TERMS	5 OF RI	EPAYMENT				
DAVID & I	LUCILLE PACK	 KARD						
DATE OF NOTE	MATURITY DATE	ORIGINA LOAN AMOUI		INTEREST RATE				
12/09/04	12/09/07	500,	000.	5.00%				
SECURITY	PROVIDED BY	BORROWER	PURPO	OSE OF LOAN	1			
NONE			PURCI	HASE OF REI	DWOOD LAND			
RELATIONS	SHIP OF LENI	DER						
CONTRIBUT	ror ION OF CONSI	IDERATION			FMV OF CONSIDERATI	ION	BALANCE DU	E
NONE						0.	500,0	00.
TOTAL INC	CLUDED ON FO	ORM 990, PAR	T IV, 1	LINE 64, CO	OLUMN B		500,0	00.
FORM 990	(	OTHER REVENU	E NOT	INCLUDED ON	n FORM 990		STATEMENT	13
DESCRIPT	ION						AMOUNT	
		REVALUATION	OF LAN	D			308,0 142,5	
UNKEALLZI	ED LOSS ON :	INVESTMENTS					142,3	2).

PART V-A - LIST OF OFFICERS, DIRECTORS, STATEMENT 14 FORM 990 TRUSTEES AND KEY EMPLOYEES

NAME AND ADDRESS		TITLE AND AVRG HRS/WK		EMPLOYEE BEN PLAN CONTRIB	
KATHERINE E. ANDERTON 114 SANSOME STREET, ROOM 1 SAN FRANCISCO, CA 94104	.200	SECRETARY 35.00	178,303.	34,010.	0.
EDWIN F. CLAASSEN 114 SANSOME STREET, ROOM 1 SAN FRANCISCO, CA 94104	.200	PRESIDENT 2.00	0.	0.	0.
RICHARD C. OTTER 114 SANSOME STREET, ROOM 1 SAN FRANCISCO, CA 94104	200	CHAIRMAN 2.00	0.	0.	0.
SANDRA DONNELL-FAGGIOLI 114 SANSOME STREET, ROOM 1 SAN FRANCISCO, CA 94104	1200	DIRECTOR 1.00	0.	0.	0.
FRANK W. WENTWORTH 114 SANSOME STREET, ROOM 1 SAN FRANCISCO, CA 94104	1200	TREASURER 2.00	0.	0.	0.
JAMES L. LARSON 114 SANSOME STREET, ROOM 1 SAN FRANCISCO, CA 94104	1200	DIRECTOR 1.00	0.	0.	0.
SARAH CONNICK 114 SANSOME STREET, ROOM 1 SAN FRANCISCO, CA 94104	1200	DIRECTOR 1.00	0.	0.	0.
PETE DANGERMOND 114 SANSOME STREET, ROOM 1 SAN FRANCISCO, CA 94104	1200	VICE PRESIDENT 2.00	0.	0.	0.
MARY WRIGHT 114 SANSOME STREET, ROOM 1 SAN FRANCISCO, CA 94104	1200	DIRECTOR 1.00	0.	0.	0.
WILLIAM J. LIBBY 114 SANSOME STREET, ROOM 1 SAN FRANCISCO, CA 94104	1200	DIRECTOR 1.00	0.	0.	0.
TOTALS INCLUDED ON FORM 99	90, PART	V-A	178,303.	34,010.	0.

SAVE-THE-REDW	OODS LEAGU	I	1			(		
TODA 000	TTOM	OF	CMAMEC	DECETTION	CODV	ΛE	אמנוחה	

FORM 990 LIST OF STATES RECEIVING COPY OF RETURN STATEMENT 15
PART VI, LINE 90

### STATES

AL, AK, AR, AZ, CA, CO, CT, FL, GA, IL, IN, KS, KY, LA, ME, MD, MA, MI, MN, MS, NV, NH, NJ, NM, NY, NC, ND, OH, OK, OR, PA, RI, SC, TN, UT, VT, VA, WA, WV, WI

FORM 990	PART VIII -	RELATIONSHIP	OF ACTIVITIES	TO ST	<b>FATEMENT</b>	16
	ACCOMPI	ISHMENT OF EXE	MPT PURPOSES			

### LINE EXPLANATION OF RELATIONSHIP OF ACTIVITIES

THE DISTRIBUTION OF EDUCATIONAL MATERIALS TO SAVE-THE-REDWOODS LEAGUE MEMBERS AND REDWOOD PARK INTERPRETIVE ASSOCIATIONS FOSTERS A BETTER UNDERSTANDING OF THE VALUE OF THE PRIMEVAL FORESTS OF AMERICA AS NATURAL OBJECTS OF EXTRAORDINARY INTEREST TO PRESENT AND FUTURE GENERATIONS.

103B OTHER INCOME FROM ASSET DISPOSITION

SCHEDULE A	OTHER INC	OME	នា	PATEMENT 17
DESCRIPTION	2004 AMOUNT	2003 AMOUNT	2002 AMOUNT	2001 AMOUNT
OTHER INCOME	0.	0.	0.	5,010.
TOTAL TO SCHEDULE A, LINE 22	0.	0.	0.	5,010.

Save the Redwoods League Cash Grants & Allocations FEIN: 94-0843915 March 31, 2006

Name of Recipient	Street Address	City	State	ZIP	Туре	Date Am	Amount
CA Department of Parks & Recreation	P. O. Box 2006	Eureka	Ą	95502	Interpretive Center Grant	6/29/2005	\$4,000.00
CA Department of Parks & Recreation	P. O. Box 942896	Sacramento	S	94296	Interpretive Center Grant	5/27/2005	\$20,000.00
USDA Forest Service	P. O. Box 894183	Los Angeles	S	90189	Redwood Research Grant	3/14/2006	\$13,769.00
IISDA Forest Service	P. O. Box 894183	Los Angeles	S	90189	Redwood Research Grant	3/15/2006	\$15,000.00
Recents University of CA. Berkeley	2195 Hearst Ave, Rm 130	Berkeley	S	94720	Redwood Research Grant	2/21/2006	\$12,599.00
Recents University of CA. Berkeley	2195 Hearst Ave, Rm 130	Berkeley	S	94720	Redwood Research Grant	2/6/2006	\$15,000.00
Recents University of Wisconsin, Madison	750 University Avenue	Madison	<u>N</u>	53706	Redwood Research Grant	3/28/2006	\$10,925.00
CA Polytechnic State University	n/a	SanLuisObispo	δ	93407	Redwood Research Grant	3/14/2006	\$15,000.00
Humboldt State University Foundation	1 Harpst Street	Arcafa	S	95521	Redwood Research Grant	3/16/2006	\$15,000.00
CA Department of Parks & Recreation N. Coast	3431 Fort Avenue	Eureka	Š	95503	Cooperative Preservation Grant	6/29/2005	\$45,325.00
Humboldt State University Foundation	P. O. Box 1185	Arcala	Š	95518	Redwood Education Grant	10/27/2005	\$750.00
YMCA Point Bonita Outdoor & Conference Ctr	981 Fort Barry, GGNRA	Sausalito	S	94965	Redwood Education Grant	11/21/2005	\$3,200.00
Woodland Joint Unified School District	525 Beamer Street	Woodland	CA	95695	Redwood Education Grant	11/21/2005	\$5,000.00
Stewards of the Coast & Redwoods	P. O. Box 2006	Duncan Mills	CA	95430	Redwood Education Grant	3/24/2006	\$6,000.00
Seguina Natural History Association	47050 Generals Hwy, Box 10	Three Rivers	Š	93271	Redwood Education Grant	12/1/2005	\$5,000.00
San Francisco Botanical Garden Society		San Francisco	S	94122	Redwood Education Grant	12/1/2005	\$3,000.00
Salmon Protection & Watershed Network	P. O. Box 400	Forest Knalls	S	94933	Redwood Education Grant	12/1/2005	\$3,000.00
Rio Dell Elementary School District	95 Center Street	Rio Dell	Š	95540	Redwood Education Grant	12/1/2005	\$2,000.00
Mendocino Woodlands Camp Association	P. O. Box 267	Mendocino	Š	95460	Redwood Education Grant	11/21/2005	\$4,500.00
Ink People Center of the Arts	411 Twelfth Street	Eureka	S	95501	Redwood Education Grant	11/21/2005	\$4,145.00
Humboldt County Office of Education	901 Myrtle Avenue	Eureka	Š	95501	Redwood Education Grant	12/1/2005	\$4,000.00
Hamilton Flementary School	One Main Gate Rd	Noveto	S	94949	Redwood Education Grant	10/25/2005	\$3,000.00
Golden Gate Parks Conservancy	Building 201 Fort Mason	San Francisco	CA	94123	Redwood Education Grant	12/20/2005	\$2,500.00
Golden Gate Parks Conservancy	Building 201 Fort Mason	San Francisco	S	94123	Redwood Education Grant	12/2/2005	\$5,000.00
Fureka High School	1915 "J" Street	Eureka	S	95501	Redwood Education Grant	12/20/2005	\$2,500.00
East Bay Conservation Corps	1021 Third Street	Oakland	CA	94607	Redwood Education Grant	11/21/2005	\$5,000.00
Del Norte County Unified School District	301 West Washington Blvd.	Cressent City	CA	95531	Redwood Education Grant	11/21/2005	\$5,000.00
Center for Land-Based Learning	5265 Putah Creek Road	Winters	S	95695	Redwood Education Grant	11/10/2005	\$5,000.00
Calaveras Bio Trees Association	P. O. Box 120	Arno d	Š	95223	Redwood Education Grant	11/10/2005	\$2,620.00
Bove & Girls Clubs of San Francisco	55 Hawthorne Street, Ste 600	San -rancisco	S	94105	Redwood Education Grant	10/27/2005	\$5,000.00
Acom Soune	1241 Adams Street, #1088	St. Helena	CA	94574	Redwood Education Grant	11/21/2006	\$5,000.00
University of California Regents	145 Mulford Hall	Berkəley	Š	94720	Environmental Stewardship	7/12/2005	\$2,500.00
CrescentCity-Del Norte Chamber of Commerce	1001 Front Street	Crespent City	S	95531	Development County Tourism	1/24/2006	\$500.00
CA Department of Parks & Recreation	P. O. Box 2006	Eureka	CA	95502	Mill Creek Forest Ecology	9/21/2005	\$21,552.00
Univ Foundation/CA State University, Chico	400 West 1st Street	Chica	S	95929	CA State Chico Educational Programs	10/25/2005	\$1,500.00

### ATTACHMENT B

Save the Redwoods League Non-Cash Grants & Allocations FEIN: 94-0843915 FY 2005-2006

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Accinion of Commission	Street Address	Ċİţ	State	ZIP	Type	Transfer Date Amount	mount
On Descriptions of Description	One Canitol Mail Ste 500	Sacramento	CA	94296	Land Deeded	9/27/2005	\$89,000.00
CA Departition Fairs & Necleation	Or Caption man,					9/27/2005	\$178,000.00
						3/15/2006	\$910,000.00
						3/22/2006	\$370,000.00
						3/22/2006	\$1,303,703.70
						3/22/2006	\$1,446,296.30
						3/27/2006	\$15,927.71
						3/27/2006	\$2,628,072.29
						3/29/2006	\$600,000.00
						3/31/2006	\$1,200,000.00
					•		\$8,741,000.00
the management of the second second	1695 Heindon Road	Arcata	Š	95520	Land Deeded	2/22/2005	\$400,000.00
Duleau of Laila Mariayeriera						2/25/2005	\$1,300,000.00
						. 1	\$1,700,000.00
NON-CASH ALLOCATIONS							
			Allocation Name	Name	Type	Write-off Date Amount	mount
The continue of the continue o	ront fiscal year		Prosolino Easement	asement	Conservation Easement	3/31/2006	\$60,000.00
CONSERVATION EASEMENTS WHITEFOUR IN CONTENT INSCALLY CA	ומונ ווסכמו לכמו		Stansberry	Stansberry Easement	Conservation Easement	3/31/2006	\$120,000.00
						1	\$100,000,00
TOTAL NONCASH GRANTS & ALLOCATIONS	SNOIL				FORM 990, PG. 2, LINE 22	INE 22	\$10,621,000.00