

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

2005

Note: The organization may be able to use a copy of this return to satisfy state reporting requirements.

For calendar year **2005**, or tax year beginning _____, and ending _____

G Check all that apply: Initial return Final return Amended return Address change Name change

Use the IRS label. Otherwise, print or type. See Specific Instructions.	Name of organization CAMPBELL HOFFMAN FOUNDATION Number and street (or P.O. box number if mail is not delivered to street address) Room/suite 9893 GEORGETOWN PIKE City or town, state, and ZIP code GREAT FALLS, VA 22066	A Employer identification number 54-1724558 B Telephone number 703-757-7772
H Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		C If exemption application is pending, check here <input type="checkbox"/> D 1. Foreign organizations, check here <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/> E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/> F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) ▶ \$ 2,355,281. (Part I, column (d) must be on cash basis.)		
J Accounting method: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____		

Part I Analysis of Revenue and Expenses <small>(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a).)</small>		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc., received	70,500.		N/A	
	2 Check <input type="checkbox"/> if the foundation is not required to attach Sch. B				
	3 Interest on savings and temporary cash investments	74,115.	74,115.		STATEMENT 1
	4 Dividends and interest from securities	27,562.	23,952.		STATEMENT 2
	5a Gross rents				
	b Net rental income or (loss)				
	6a Net gain or (loss) from sale of assets not on line 10	193,533.			
	b Gross sales price for all assets on line 6a	1,132,992.			
	7 Capital gain net income (from Part IV, line 2)		193,533.		
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances				
b Less: Cost of goods sold					
c Gross profit or (loss)					
11 Other income	15,373.	0.		STATEMENT 3	
12 Total. Add lines 1 through 11	381,083.	291,600.			
Operating and Administrative Expenses	13 Compensation of officers, directors, trustees, etc.	73,504.	7,350.		58,803.
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees				
	b Accounting fees				
	c Other professional fees				
	17 Interest				
	18 Taxes STMT 4	12,139.	615.		4,498.
	19 Depreciation and depletion	572.	0.		
	20 Occupancy				
	21 Travel, conferences, and meetings	921.	0.		0.
	22 Printing and publications				
	23 Other expenses STMT 5	33,044.	12,200.		3,852.
	24 Total operating and administrative expenses. Add lines 13 through 23	120,180.	20,165.		67,153.
	25 Contributions, gifts, grants paid	62,020.			62,082.
26 Total expenses and disbursements. Add lines 24 and 25	182,200.	20,165.		129,235.	
27 Subtract line 26 from line 12:					
a Excess of revenue over expenses and disbursements	198,883.				
b Net investment income (if negative, enter -0-)		271,435.			
c Adjusted net income (if negative, enter -0-)			N/A		

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only.		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value		
Assets	1	Cash - non-interest-bearing				
	2	Savings and temporary cash investments	57,737.	166,531.	166,531.	
	3	Accounts receivable				
		Less: allowance for doubtful accounts				
	4	Pledges receivable				
		Less: allowance for doubtful accounts				
	5	Grants receivable				
	6	Receivables due from officers, directors, trustees, and other disqualified persons				
	7	Other notes and loans receivable				
		Less: allowance for doubtful accounts				
	8	Inventories for sale or use				
	9	Prepaid expenses and deferred charges				
	10a	Investments - U.S. and state government obligations				
	b	Investments - corporate stock STMT 6	1,201,379.	1,089,257.	1,089,257.	
	c	Investments - corporate bonds STMT 7	988,223.	930,055.	930,055.	
	11	Investments - land, buildings, and equipment: basis				
	Less: accumulated depreciation					
12	Investments - mortgage loans					
13	Investments - other STMT 8	0.	150,721.	150,721.		
14	Land, buildings, and equipment: basis STMT 9	8,062.				
	Less: accumulated depreciation STMT 9	7,019.	1,148.	1,043.		
15	Other assets (describe ACCRUED INTEREST)	16,662.	17,674.	17,674.		
16	Total assets (to be completed by all filers)	2,265,149.	2,355,281.	2,355,281.		
Liabilities	17	Accounts payable and accrued expenses				
	18	Grants payable	14,062.	14,000.		
	19	Deferred revenue				
	20	Loans from officers, directors, trustees, and other disqualified persons				
	21	Mortgages and other notes payable				
	22	Other liabilities (describe STATEMENT 10)	4,105.	40,403.		
23	Total liabilities (add lines 17 through 22)	18,167.	54,403.			
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input type="checkbox"/> and complete lines 24 through 26 and lines 30 and 31.					
	24	Unrestricted				
	25	Temporarily restricted				
	26	Permanently restricted				
	Organizations that do not follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 31.					
	27	Capital stock, trust principal, or current funds	746,982.	800,878.		
	28	Paid-in or capital surplus, or land, bldg., and equipment fund	1,500,000.	1,500,000.		
	29	Retained earnings, accumulated income, endowment, or other funds	0.	0.		
30	Total net assets or fund balances	2,246,982.	2,300,878.			
31	Total liabilities and net assets/fund balances	2,265,149.	2,355,281.			

Part III Analysis of Changes in Net Assets or Fund Balances

1	Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	2,246,982.
2	Enter amount from Part I, line 27a	2	198,883.
3	Other increases not included in line 2 (itemize)	3	0.
4	Add lines 1, 2, and 3	4	2,445,865.
5	Decreases not included in line 2 (itemize) UNREALIZED GAINS ON INVESTMENTS	5	144,987.
6	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	2,300,878.

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)		(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a SHORT TERM GAINS - SEE STMT		P	VARIOUS	VARIOUS
b SHORT TERM LOSSES - SEE STMT		P	VARIOUS	VARIOUS
c LONG TERM GAINS - SEE STMT		P	VARIOUS	VARIOUS
d LONG TERM LOSSES - SEE STMT		P	VARIOUS	VARIOUS
e CAPITAL GAINS DIVIDENDS				

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a 384,029.		322,895.	61,134.
b 287,772.		315,107.	<27,335.>
c 450,177.		284,812.	165,365.
d 10,907.		16,645.	<5,738.>
e 107.			107.

(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))
a			61,134.
b			<27,335.>
c			165,365.
d			<5,738.>
e			107.

2 Capital gain net income or (net capital loss). { If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }	2	193,533.
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). If (loss), enter -0- in Part I, line 8	3	N/A

Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.)

If section 4940(d)(2) applies, leave this part blank.

Was the organization liable for the section 4942 tax on the distributable amount of any year in the base period? Yes No
 If "Yes," the organization does not qualify under section 4940(e). Do not complete this part.

1 Enter the appropriate amount in each column for each year; see instructions before making any entries.

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col. (b) divided by col. (c))
2004	166,470.	2,143,550.	.077661
2003	221,576.	2,013,072.	.110069
2002	182,370.	2,074,509.	.087910
2001	51,699.	2,763,011.	.018711
2000	157,858.	2,573,274.	.061345

2 Total of line 1, column (d)	2	.355696
3 Average distribution ratio for the 5-year base period - divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years	3	.071139
4 Enter the net value of noncharitable-use assets for 2005 from Part X, line 5	4	2,305,012.
5 Multiply line 4 by line 3	5	163,976.
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	2,714.
7 Add lines 5 and 6	7	166,690.
8 Enter qualifying distributions from Part XII, line 4	8	129,235.

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions.

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions)

Table with 11 rows for excise tax calculations. Includes fields for exempt operating foundations, domestic organizations, tax under section 511, add lines 1 and 2, subtitle A tax, tax based on investment income, credits/payments, total credits, penalty, tax due, overpayment, and amount credited to 2006 estimated tax.

Part VII-A Statements Regarding Activities

Table with 11 rows for activity statements. Includes questions about influencing legislation, political purposes, Form 1120-POL filing, tax on political expenditures, reimbursement, IRS reporting, unrelated business income, liquidation, section 508(e) requirements, assets, states of registration, Form 990-PF distribution, private operating foundation status, substantial contributors, public inspection requirements, and Form 1041 filing.

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.

Table with columns for question descriptions and Yes/No columns. Includes questions 1a through 6b regarding organizational activities and tax compliance.

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1 List all officers, directors, trustees, foundation managers and their compensation.

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
SEE STATEMENT 12		73,504.	0.	0.

2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."

(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				

Total number of other employees paid over \$50,000 0

3 Five highest-paid independent contractors for professional services. If none, enter "NONE."

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		

Total number of others receiving over \$50,000 for professional services 0

Part IX-A Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1 SEE STATEMENT 11	12,979.
2	
3	
4	

Part IX-B Summary of Program-Related Investments

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.		Amount
1	N/A	
2		
All other program-related investments. See instructions.		
3		
Total. Add lines 1 through 3		0.

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities	1a	2,095,597.
b	Average of monthly cash balances	1b	244,517.
c	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	2,340,114.
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	1e	0.
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	2,340,114.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	35,102.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	2,305,012.
6	Minimum investment return. Enter 5% of line 5	6	115,251.

Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here and do not complete this part.)

1	Minimum investment return from Part X, line 6	1	115,251.
2a	Tax on investment income for 2005 from Part VI, line 5	2a	5,429.
b	Income tax for 2005. (This does not include the tax from Part VI.)	2b	
c	Add lines 2a and 2b	2c	5,429.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	109,822.
4	Recoveries of amounts treated as qualifying distributions	4	7,115.
5	Add lines 3 and 4	5	116,937.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	116,937.

Part XII Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26	1a	129,235.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	129,235.
5	Organizations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	129,235.

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2004	(c) 2004	(d) 2005
1 Distributable amount for 2005 from Part XI, line 7				116,937.
2 Undistributed income, if any, as of the end of 2004:				
a Enter amount for 2004 only			0.	
b Total for prior years:		0.		
3 Excess distributions carryover, if any, to 2005:				
a From 2000				
b From 2001				
c From 2002				
d From 2003	75,326.			
e From 2004	56,344.			
f Total of lines 3a through e	131,670.			
4 Qualifying distributions for 2005 from Part XII, line 4: ▶ \$	129,235.			
a Applied to 2004, but not more than line 2a			0.	
b Applied to undistributed income of prior years (Election required - see instructions)		0.		
c Treated as distributions out of corpus (Election required - see instructions)	0.			
d Applied to 2005 distributable amount				116,937.
e Remaining amount distributed out of corpus	12,298.			
5 Excess distributions carryover applied to 2005 (If an amount appears in column (d), the same amount must be shown in column (a).)	0.			0.
6 Enter the net total of each column as indicated below:				
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	143,968.			
b Prior years' undistributed income. Subtract line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable amount - see instructions		0.		
e Undistributed income for 2004. Subtract line 4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2005. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2006				0.
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(E) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2000 not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2006. Subtract lines 7 and 8 from line 6a	143,968.			
10 Analysis of line 9:				
a Excess from 2001				
b Excess from 2002				
c Excess from 2003	75,326.			
d Excess from 2004	56,344.			
e Excess from 2005	12,298.			

Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9)

N/A

1 a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2005, enter the date of the ruling

b Check box to indicate whether the organization is a private operating foundation described in section 4942(j)(3) or 4942(j)(5)

	Tax year	Prior 3 years			(e) Total
	(a) 2005	(b) 2004	(c) 2003	(d) 2002	
2 a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed					
b 85% of line 2a					
c Qualifying distributions from Part XII, line 4 for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon:					
a "Assets" alternative test - enter:					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter:					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					

Part XV Supplementary Information (Complete this part only if the organization had \$5,000 or more in assets at any time during the year-see page 26 of the instructions.)

1 Information Regarding Foundation Managers:

a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2).)

NONE

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest.

NONE

2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here if the organization only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the organization makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d.

a The name, address, and telephone number of the person to whom applications should be addressed:

JOANN P. KNOX, 9893 GEORGETOWN PIKE, GREAT FALLS, VA 22066, 703-757-7772

b The form in which applications should be submitted and information and materials they should include:

SEE INFORMATION AT WWW.CAMPBELLHOFFMAN.ORG

c Any submission deadlines:

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:

THE FOUNDATION LIMITS ITS GRANT-MAKING ACTIVITIES TO ORGANIZATIONS THAT PROMOTE ACCESS TO HEALTHCARE IN THE NORTHERN VIRGINIA AREA.

Part XV Supplementary Information (continued)

3 Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a Paid during the year				
GRANTMAKERS IN HEALTH	NONE	501(C)(3) PUBLIC CHARITY		2,000.
NORTHERN VIRGINIA DENTAL CLINIC	NONE	501(C)(3) PUBLIC CHARITY		9,000.
NORTHERN VIRGINIA FAMILY SERVICES	NONE	501(C)(3) PUBLIC CHARITY		9,000.
ST. STEPHEN'S	NONE	501(C)(3) PUBLIC CHARITY		9,000.
ALEXANDRIA NEIGHBORHOOD HEALTH SYSTEMS	NONE	501(C)(3) PUBLIC CHARITY		9,000.
NORTHERN VIRGINIA COMMUNITY COLLEGE	NONE	501(C)(3) PUBLIC CHARITY		2,000.
MISSION OF MERCY	NONE	501(C)(3) PUBLIC CHARITY		8,020.
Total				48,020.
b Approved for future payment				
Total SEE STATEMENT 13				14,000.

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

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

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

OMB No. 1545-0047

2005

Name of organization

CAMPBELL HOFFMAN FOUNDATION

Employer identification number

54-1724558

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

501(c)() (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**. (Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule-see instructions.)

General Rule-

For organizations filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. (Complete Parts I and II.)

Special Rules-

For a section 501(c)(3) organization filing Form 990, or Form 990-EZ, that met the 33 1/3% support test under Regulations sections 1.509(a)-3/1.170A-9(e) and received from any one contributor, during the year, a contribution of the greater of \$5,000 or 2% of the amount on line 1 of these forms. (Complete Parts I and II.)

For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, aggregate contributions or bequests of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. (Complete Parts I, II, and III.)

For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, some contributions for use *exclusively* for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. (If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the Parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year.) ► \$ _____

Caution: Organizations that are not covered by the General Rule and/or the Special Rules do not file Schedule B (Form 990, 990-EZ, or 990-PF), but they **must** check the box in the heading of their Form 990, Form 990-EZ, or on line 2 of their Form 990-PF, to certify that they do not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA For Paperwork Reduction Act Notice, see the Instructions
for Form 990, Form 990-EZ, and Form 990-PF.

Schedule B (Form 990, 990-EZ, or 990-PF) (2005)

Name of organization CAMPBELL HOFFMAN FOUNDATION	Employer identification number 54-1724558
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Part I Contributors (See Specific Instructions.)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	KAISER PERMANENTE <hr/> 2101 EAST JEFFERSON STREET <hr/> ROCKVILLE, MD 20849-6611 <hr/>	\$ 50,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
	<hr/> <hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
	<hr/> <hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
	<hr/> <hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
	<hr/> <hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
	<hr/> <hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

2005 DEPRECIATION AND AMORTIZATION REPORT

FORM 990-PF PAGE 1

990-PF

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
1	OFFICE EQUIPMENT		99200DB	5.00	17	4,500.			4,500.	4,500.		0.
2	PRINTER	091500	200DB	5.00	17	570.			570.	537.		33.
3	FAX/COPIER/PRINTER	120402	200DB	5.00	17	505.			505.	360.		58.
4	LAPTOP COMPUTER	061603	200DB	5.00	17	1,870.			1,870.	972.		359.
5	POCKET ORGANIZER	042503	200DB	5.00	17	150.			150.	78.		29.
6	PHONE AND CHARGER	032905	200DB	5.00	19B	467.			467.			93.
	* TOTAL 990-PF PG 1 DEPR					8,062.		0.	8,062.	6,447.	0.	572.

FORM 990-PF INTEREST ON SAVINGS AND TEMPORARY CASH INVESTMENTS STATEMENT 1

SOURCE	AMOUNT
MERRILL LYNCH	74,115.
TOTAL TO FORM 990-PF, PART I, LINE 3, COLUMN A	74,115.

FORM 990-PF DIVIDENDS AND INTEREST FROM SECURITIES STATEMENT 2

SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS	COLUMN (A) AMOUNT
DIVIDENDS	27,669.	107.	27,562.
TOTAL TO FM 990-PF, PART I, LN 4	27,669.	107.	27,562.

FORM 990-PF OTHER INCOME STATEMENT 3

DESCRIPTION	(A) REVENUE PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME
OTHER MISC INCOME	8,258.	0.	
RECOVERY OF PRIOR YEAR GRANT EXPENSE	7,115.	0.	
TOTAL TO FORM 990-PF, PART I, LINE 11	15,373.	0.	

FORM 990-PF TAXES STATEMENT 4

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
EXCISE TAX	6,438.	0.		0.
FOREIGN TAX	53.	53.		0.
PAYROLL TAX	5,623.	562.		4,498.
ANNUAL FEE	25.	0.		0.
TO FORM 990-PF, PG 1, LN 18	12,139.	615.		4,498.

FORM 990-PF	OTHER EXPENSES			STATEMENT	5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
BOARD EXPENSES	5,914.	0.		0.	
BANK FEE	180.	180.		0.	
INSURANCE	750.	0.		0.	
INTERNET ACCESS	450.	0.		0.	
MEALS & ENTERTAINMENT	135.	0.		0.	
MEMBERSHIPS	2,985.	0.		285.	
MILEAGE & PARKING	442.	0.		354.	
OFFICE SUPPLIES	1,490.	0.		0.	
PAYROLL SERVICE FEES	1,329.	133.		0.	
POST OFFICE BOX	240.	0.		0.	
POSTAGE	285.	0.		0.	
TELEPHONE	1,641.	0.		0.	
WEBSITE	1,395.	0.		0.	
GRANT ADMINISTRATION	3,213.	0.		3,213.	
STORAGE SPACE	708.	0.		0.	
INVESTMENT FEES	11,887.	11,887.		0.	
TO FORM 990-PF, PG 1, LN 23	33,044.	12,200.		3,852.	

FORM 990-PF	CORPORATE STOCK		STATEMENT	6
DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE		
CORPORATE STOCK	1,089,257.	1,089,257.		
TOTAL TO FORM 990-PF, PART II, LINE 10B	1,089,257.	1,089,257.		

FORM 990-PF	CORPORATE BONDS		STATEMENT	7
DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE		
CORPORATE BONDS	930,055.	930,055.		
TOTAL TO FORM 990-PF, PART II, LINE 10C	930,055.	930,055.		

FORM 990-PF	OTHER INVESTMENTS	STATEMENT	8
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DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
OTHER INVESTMENTS	FMV	150,721.	150,721.
TOTAL TO FORM 990-PF, PART II, LINE 13		150,721.	150,721.

FORM 990-PF	DEPRECIATION OF ASSETS NOT HELD FOR INVESTMENT	STATEMENT	9
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DESCRIPTION	COST OR OTHER BASIS	ACCUMULATED DEPRECIATION	BOOK VALUE
OFFICE EQUIPMENT	4,500.	4,500.	0.
PRINTER	570.	570.	0.
FAX/COPIER/PRINTER	505.	418.	87.
LAPTOP COMPUTER	1,870.	1,331.	539.
POCKET ORGANIZER	150.	107.	43.
PHONE AND CHARGER	467.	93.	374.
TOTAL TO FM 990-PF, PART II, LN 14	8,062.	7,019.	1,043.

FORM 990-PF	OTHER LIABILITIES	STATEMENT	10
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DESCRIPTION	AMOUNT
EXCISE TAX PAYABLE	721.
DUE FROM OFFICER	0.
DUE TO NOVA RX	39,682.
TOTAL TO FORM 990-PF, PART II, LINE 22, COLUMN B	40,403.

FORM 990-PF SUMMARY OF DIRECT CHARITABLE ACTIVITIES STATEMENT 11

ACTIVITY ONE

MISSION OF MERCY - CAMPBELL HOFFMAN FOUNDATION PROVIDED UNDERWRITING FOR COSTS ASSOCIATED WITH THE MISSION OF MERCY PROJECT AT THE MEDICAL CAMPUS OF NVCC. ALL FIVE OF THE JURISDICTIONS IN NORTHERN VIRGINIA COLLABORATED TO PROVIDE FREE DENTAL CARE TO 920 RESIDENTS. OVER 800 VOLUNTEERS PROVIDED SUPPORT.

EXPENSES

TO FORM 990-PF, PART IX-A, LINE 1

12,979.

FORM 990-PF PART VIII - LIST OF OFFICERS, DIRECTORS TRUSTEES AND FOUNDATION MANAGERS STATEMENT 12

NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN-SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
JOANN P. KNOX 722 FOREST RIDGE DRIVE GREAT FALLS, VA 22066	EXECUTIVE DIRECTOR 30.00	73,504.	0.	0.
LORI COOPER 722 FOREST RIDGE DRIVE GREAT FALLS, VA 22066	SECRETARY 2.00	0.	0.	0.
M.TRACY AULT 722 FOREST RIDGE DRIVE GREAT FALLS, VA 22066	DIRECTOR 2.00	0.	0.	0.
BRIAN DAVIS 722 FOREST RIDGE DRIVE GREAT FALLS, VA 22066	DIRECTOR 2.00	0.	0.	0.
DAVID GAGEN 722 FOREST RIDGE DRIVE GREAT FALLS, VA 22066	TREASURER 2.00	0.	0.	0.
CAROL JAMESON 722 FOREST RIDGE DRIVE GREAT FALLS, VA 22066	PRESIDENT 2.00	0.	0.	0.

LUCY AMERMAN 722 FOREST RIDGE DRIVE GREAT FALLS, VA 22066	DIRECTOR 2.00	0.	0.	0.
KATHIE WESTPHELING 722 FOREST RIDGE DRIVE GREAT FALLS, VA 22066	DIRECTOR 2.00	0.	0.	0.
TOTALS INCLUDED ON 990-PF, PAGE 6, PART VIII		<u>73,504.</u>	<u>0.</u>	<u>0.</u>

FORM 990-PF GRANTS AND CONTRIBUTIONS STATEMENT 13
APPROVED FOR FUTURE PAYMENT

RECIPIENT NAME AND ADDRESS	RECIPIENT STATUS	PURPOSE OF GRANT	RECIPIENT RELATIONSHIP	AMOUNT
ARLINGTON COUNTY DENTAL	501(C)(3) PUBLIC CHARITY		NONE	10,000.
NORTHERN VIRGINIA DENTAL CLINIC	501(C)(3) PUBLIC CHARITY		NONE	1,000.
NORTHERN VIRGINIA FAMILY SERVICES	501(C)(3) PUBLIC CHARITY		NONE	1,000.
ST. STEPHEN'S	501(C)(3) PUBLIC CHARITY		NONE	1,000.
ALEXANDRIA NEIGHBORHOOD HEALTH SYSTEMS	501(C)(3) PUBLIC CHARITY		NONE	1,000.
TOTAL TO FORM 990-PF, PART XV, LINE 3B				<u>14,000.</u>