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Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)		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 . . . . .	41,710	136,844	136,844	
	3	Accounts receivable ▶ <u>835</u>				
		Less allowance for doubtful accounts ▶ <u></u>		835	835	
	4	Pledges receivable ▶ <u>32,503</u>				
		Less allowance for doubtful accounts ▶ <u></u>	61,003	32,503	32,503	
	5	Grants receivable . . . . .				
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions) . . . . .				
	7	Other notes and loans receivable (attach schedule) ▶ <u></u>				
		Less allowance for doubtful accounts ▶ <u></u>				
	8	Inventories for sale or use . . . . .				
	9	Prepaid expenses and deferred charges . . . . .				
	10a	Investments—U S and state government obligations (attach schedule)				
	b	Investments—corporate stock (attach schedule) . . . . .				
	c	Investments—corporate bonds (attach schedule) . . . . .				
	11	Investments—land, buildings, and equipment basis ▶ <u></u>				
	Less accumulated depreciation (attach schedule) ▶ <u></u>					
12	Investments—mortgage loans . . . . .					
13	Investments—other (attach schedule) . . . . .					
14	Land, buildings, and equipment basis ▶ <u></u>					
	Less accumulated depreciation (attach schedule) ▶ <u></u>					
15	Other assets (describe ▶ <u></u> )					
16	<b>Total assets</b> (to be completed by all filers—see the instructions Also, see page 1, item I)	102,713	170,182	170,182		
Liabilities	17	Accounts payable and accrued expenses . . . . .	29,354	13,721		
	18	Grants payable . . . . .	5,000	2,066		
	19	Deferred revenue . . . . .				
	20	Loans from officers, directors, trustees, and other disqualified persons				
	21	Mortgages and other notes payable (attach schedule) . . . . .				
	22	Other liabilities (describe ▶ <u></u> )	279	0		
	23	<b>Total liabilities</b> (add lines 17 through 22) . . . . .	34,633	15,787		
Net Assets or Fund Balances	<b>Foundations that follow SFAS 117, check here ▶ <input checked="" type="checkbox"/> and complete lines 24 through 26 and lines 30 and 31.</b>					
	24	Unrestricted . . . . .	68,080	154,395		
	25	Temporarily restricted . . . . .				
	26	Permanently restricted . . . . .				
	<b>Foundations that do not follow SFAS 117, check here ▶ <input type="checkbox"/> and complete lines 27 through 31.</b>					
	27	Capital stock, trust principal, or current funds . . . . .				
	28	Paid-in or capital surplus, or land, bldg , and equipment fund				
	29	Retained earnings, accumulated income, endowment, or other funds				
30	<b>Total net assets or fund balances</b> (see instructions) . . . . .	68,080	154,395			
31	<b>Total liabilities and net assets/fund balances</b> (see instructions) .	102,713	170,182			

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 68,080
2	Enter amount from Part I, line 27a . . . . .	2 86,315
3	Other increases not included in line 2 (itemize) ▶ <u></u>	3 0
4	Add lines 1, 2, and 3 . . . . .	4 154,395
5	Decreases not included in line 2 (itemize) ▶ <u></u>	5 0
6	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 .	6 154,395

**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 )
<b>1a</b>			

(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)
<b>a</b>			
<b>b</b>			
<b>c</b>			
<b>d</b>			
<b>e</b>			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(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	
<b>a</b>			
<b>b</b>			
<b>c</b>			
<b>d</b>			
<b>e</b>			

<b>2</b> Capital gain net income or (net capital loss) <span style="float: right;">{ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }</span>	<b>2</b>	
<b>3</b> 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) (see instructions) If (loss), enter -0- in Part I, line 8 <span style="float: right;">{ }</span>	<b>3</b>	

**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 foundation liable for the section 4942 tax on the distributable amount of any year in the base period? ☐ Yes ☒ No

If "Yes," the foundation 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))
2015	509,296	152,437	3 341026
2014	537,983	118,055	4 557054
2013	615,823	229,038	2 688737
2012	509,531	376,892	1 351928
2011	501,091	785,708	0 637757

<b>2</b> Total of line 1, column (d) . . . . .	<b>2</b>	12 576502
<b>3</b> 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 . . . . .	<b>3</b>	2 515300
<b>4</b> Enter the net value of noncharitable-use assets for 2016 from Part X, line 5 . . . . .	<b>4</b>	152,657
<b>5</b> Multiply line 4 by line 3 . . . . .	<b>5</b>	383,978
<b>6</b> Enter 1% of net investment income (1% of Part I, line 27b) . . . . .	<b>6</b>	0
<b>7</b> Add lines 5 and 6 . . . . .	<b>7</b>	383,978
<b>8</b> Enter qualifying distributions from Part XII, line 4 , . . . . .	<b>8</b>	469,413

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)**

<b>1a</b>	Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1 Date of ruling or determination letter _____ (attach copy of letter if necessary—see instructions)		
<b>b</b>	Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input checked="" type="checkbox"/> and enter 1% of Part I, line 27b . . . . .	<b>1</b>	0
<b>c</b>	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col (b)		
<b>2</b>	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	<b>2</b>	0
<b>3</b>	Add lines 1 and 2. . . . .	<b>3</b>	0
<b>4</b>	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	<b>4</b>	0
<b>5</b>	<b>Tax based on investment income.</b> Subtract line 4 from line 3. If zero or less, enter -0- . . . . .	<b>5</b>	0
<b>6</b>	Credits/Payments		
<b>a</b>	2016 estimated tax payments and 2015 overpayment credited to 2016	<b>6a</b>	
<b>b</b>	Exempt foreign organizations—tax withheld at source . . . . .	<b>6b</b>	
<b>c</b>	Tax paid with application for extension of time to file (Form 8868) . . . . .	<b>6c</b>	
<b>d</b>	Backup withholding erroneously withheld . . . . .	<b>6d</b>	
<b>7</b>	Total credits and payments. Add lines 6a through 6d. . . . .	<b>7</b>	0
<b>8</b>	Enter any <b>penalty</b> for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached	<b>8</b>	
<b>9</b>	<b>Tax due.</b> If the total of lines 5 and 8 is more than line 7, enter <b>amount owed</b> . . . . . ▶	<b>9</b>	0
<b>10</b>	<b>Overpayment.</b> If line 7 is more than the total of lines 5 and 8, enter the <b>amount overpaid</b> . . . . . ▶	<b>10</b>	
<b>11</b>	Enter the amount of line 10 to be <b>Credited to 2017 estimated tax</b> ▶ <b>Refunded</b> ▶	<b>11</b>	

**Part VII-A Statements Regarding Activities**

	Yes	No
<b>1a</b> During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? . . . . .	<b>1a</b>	No
<b>b</b> Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for definition)? . . . . . <i>If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities</i>	<b>1b</b>	No
<b>c</b> Did the foundation file <b>Form 1120-POL</b> for this year? . . . . .	<b>1c</b>	No
<b>d</b> Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation ▶ \$ _____ 0 (2) On foundation managers ▶ \$ _____ 0		
<b>e</b> Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers ▶ \$ _____ 0		
<b>2</b> Has the foundation engaged in any activities that have not previously been reported to the IRS? . . . . . <i>If "Yes," attach a detailed description of the activities</i>	<b>2</b>	No
<b>3</b> Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? <i>If "Yes," attach a conformed copy of the changes</i> . . . . .	<b>3</b>	No
<b>4a</b> Did the foundation have unrelated business gross income of \$1,000 or more during the year? . . . . .	<b>4a</b>	No
<b>b</b> If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year? . . . . .	<b>4b</b>	
<b>5</b> Was there a liquidation, termination, dissolution, or substantial contraction during the year? . . . . . <i>If "Yes," attach the statement required by General Instruction T</i>	<b>5</b>	No
<b>6</b> Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? . . . . .	<b>6</b>	Yes
<b>7</b> Did the foundation have at least \$5,000 in assets at any time during the year? <i>If "Yes," complete Part II, col (c), and Part XV</i> . . . . .	<b>7</b>	Yes
<b>8a</b> Enter the states to which the foundation reports or with which it is registered (see instructions) ▶ NC		
<b>b</b> If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? <i>If "No," attach explanation</i> .	<b>8b</b>	Yes
<b>9</b> Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? <i>If "Yes," complete Part XIV</i> . . . . .	<b>9</b>	Yes
<b>10</b> Did any persons become substantial contributors during the tax year? <i>If "Yes," attach a schedule listing their names and addresses</i> . . . . .	<b>10</b>	No

**Part VII-A Statements Regarding Activities** (continued)

<b>11</b>	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions). . . . .	<b>11</b>		<b>No</b>
<b>12</b>	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions) . . . . .	<b>12</b>		<b>No</b>
<b>13</b>	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address <b>REDWOODSGROUP.COM/FOUNDATION</b>	<b>13</b>	<b>Yes</b>	
<b>14</b>	The books are in care of <b>KEVIN A TRAPANI</b> Telephone no <b>(919) 462-9730</b>			

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<b>15</b>	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> —Check here . . . . . <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the year . . . . . <b>15</b>			
<b>16</b>	At any time during calendar year 2016, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) If "Yes," enter the name of the foreign country <b>▶</b>	<b>16</b>	<b>Yes</b>	<b>No</b>

**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.**

<b>1a</b>	During the year did the foundation (either directly or indirectly)		<b>Yes</b>	<b>No</b>
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(6) Agree to pay money or property to a government official? ( <b>Exception.</b> Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days ). <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
<b>b</b>	If any answer is "Yes" to 1a(1)–(6), did <b>any</b> of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? <input type="checkbox"/> <b>1b</b>			<b>No</b>
<b>c</b>	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2016? <input type="checkbox"/> <b>1c</b>			<b>No</b>
<b>2</b>	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
<b>a</b>	At the end of tax year 2016, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2016? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," list the years <b>▶ 20____, 20____, 20____, 20____</b>			
<b>b</b>	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to <b>all</b> years listed, answer "No" and attach statement—see instructions ). <input type="checkbox"/> <b>2b</b>			
<b>c</b>	If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here <b>▶ 20____, 20____, 20____, 20____</b>			
<b>3a</b>	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
<b>b</b>	If "Yes," did it have excess business holdings in 2016 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2016 ). <input type="checkbox"/> <b>3b</b>			
<b>4a</b>	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	<b>4a</b>		<b>No</b>
<b>b</b>	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2016?	<b>4b</b>		<b>No</b>

<p><b>5a</b> During the year did the foundation pay or incur any amount to</p> <p><b>(1)</b> Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p><b>(2)</b> Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p><b>(3)</b> Provide a grant to an individual for travel, study, or other similar purposes? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p><b>(4)</b> Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? (see instructions). <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p><b>(5)</b> Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p><b>b</b> If any answer is "Yes" to 5a(1)–(5), did <b>any</b> of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>Organizations relying on a current notice regarding disaster assistance check here. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p><b>c</b> If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p><i>If "Yes," attach the statement required by Regulations section 53.4945–5(d)</i></p>	<p><b>5b</b></p>	
<p><b>6a</b> Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p><b>b</b> Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p><i>If "Yes" to 6b, file Form 8870</i></p>	<p><b>6b</b></p>	<p><b>No</b></p>
<p><b>7a</b> At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p><b>b</b> If yes, did the foundation receive any proceeds or have any net income attributable to the transaction? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>	<p><b>7b</b></p>	

**1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).**

(a) Name and address	Title, and average hours per week (b) 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 Additional Data Table				

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

[illegible]

<b>Total</b> number of other employees paid over \$50,000. . . . .	0
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**Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)****3 Five highest-paid independent contractors for professional services (see instructions). 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
<b>1</b> THE NATIONAL YOUTH SERVING ORGANIZATIONS FOR CHILD PROTECTION IS A NEW NETWORK CONVENED AND SUPPORTED BY THE REDWOODS GROUP FOUNDATION IN 2016. THE NETWORK IS MADE UP OF 8 OF THE LARGEST YOUTH SERVING NON PROFIT NETWORKS IN THE COUNTRY, AND PROVIDES A SPACE FOR THEM TO COLLABORATE ON PREVENTING CHILD SEXUAL ABUSE. PARTICIPATING ORGANIZATIONS INCLUDE AMERICAN CAMP ASSOCIATION, JCC ASSOCIATION, NATIONAL CHILDREN'S ALLIANCE, SALVATION ARMY OF THE USA, YMCA OF THE USA, YWCA USA, BOYS & GIRLS CLUBS OF AMERICA AND MENTOR. THE FOUNDATION PROVIDES BACKBONE SUPPORT TO THE NETWORK, WHICH HAS SO FAR FOCUSED ON PARTNERING WITH THE CDC TO REVIEW THEIR 2007 RECOMMENDATIONS ON BEST PRACTICES FOR PREVENTION IN YOUTH SERVING PROGRAMS, AND COLLABORATING WITH PREVENTCONNECT.ORG TO LAUNCH A DATABASE OF TOOLS AND RESOURCES FOR CHILD PROTECTION IN YOUTH SERVING SETTINGS, ALONG WITH AN E-LEARNING GUIDE ON HOW TO DETERMINE THE BEST POLICIES FOR AN INDIVIDUAL ORGANIZATION.	61,631
<b>2</b> THE YMCA GUARDIANS AGAINST CHILD SEXUAL ABUSE IS A NETWORK OF LOCAL YMCA LEADERS, AND PARTNERS FROM THE REDWOODS GROUP FOUNDATION, DARKNESS TO LIGHT AND PRAESIDIUM, FOCUSED ON ACTIVATING THE YMCA MOVEMENT'S POWER TO PREVENT CHILD SEXUAL ABUSE. INITIAL SEED FUNDING WAS PROVIDED TO YMCAS TO HELP THEM START COMMUNITY PREVENTION INITIATIVES & THE FOUNDATION NOW OFFERS BACKBONE STAFFING AND STRATEGIC SUPPORT TO HELP THEIR EFFORTS SCALE. THE YMCA GUARDIANS FOCUS ON STRENGTHENING INTERNAL CULTURES OF PREVENTION AT YMCAS, AND ALSO ON CREATING EXTERNAL IMPACT IN THEIR COMMUNITIES BY TRAINING ADULTS ON PREVENTION AND REACHING THEM THROUGH AWARENESS CAMPAIGNS. TO DATE THE NETWORK HAS TRAINED OVER 100,000 ADULTS ON PREVENTION, LEADS A NATIONAL YMCA AWARENESS BUILDING CAMPAIGN DURING CHILD ABUSE PREVENTION MONTH AND PARTNERS WITH YMCA OF THE USA TO ENCOURAGE AND SUPPORT ALL YMCAS IN ASSESSING AND STRENGTHENING THEIR INTERNAL CHILD PROTECTION PRACTICES AS WELL.	39,723
<b>3</b>	
<b>4</b>	

**Part IX-B Summary of Program-Related Investments (see instructions)**

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



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

<b>1</b>	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
<b>a</b>	Average monthly fair market value of securities.	<b>1a</b>	0
<b>b</b>	Average of monthly cash balances.	<b>1b</b>	121,644
<b>c</b>	Fair market value of all other assets (see instructions).	<b>1c</b>	33,338
<b>d</b>	<b>Total</b> (add lines 1a, b, and c).	<b>1d</b>	154,982
<b>e</b>	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation).	<b>1e</b>	0
<b>2</b>	Acquisition indebtedness applicable to line 1 assets.	<b>2</b>	0
<b>3</b>	Subtract line 2 from line 1d.	<b>3</b>	154,982
<b>4</b>	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	<b>4</b>	2,325
<b>5</b>	<b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3. Enter here and on Part V, line 4.	<b>5</b>	152,657
<b>6</b>	<b>Minimum investment return.</b> Enter 5% of line 5.	<b>6</b>	7,633

**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.)

<b>1</b>	Minimum investment return from Part X, line 6.	<b>1</b>	
<b>2a</b>	Tax on investment income for 2016 from Part VI, line 5.	<b>2a</b>	
<b>b</b>	Income tax for 2016 (This does not include the tax from Part VI).	<b>2b</b>	
<b>c</b>	Add lines 2a and 2b.	<b>2c</b>	
<b>3</b>	Distributable amount before adjustments. Subtract line 2c from line 1.	<b>3</b>	
<b>4</b>	Recoveries of amounts treated as qualifying distributions.	<b>4</b>	
<b>5</b>	Add lines 3 and 4.	<b>5</b>	
<b>6</b>	Deduction from distributable amount (see instructions).	<b>6</b>	
<b>7</b>	<b>Distributable amount</b> as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	<b>7</b>	

**Part XII Qualifying Distributions** (see instructions)

<b>1</b>	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
<b>a</b>	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26.	<b>1a</b>	469,413
<b>b</b>	Program-related investments—total from Part IX-B.	<b>1b</b>	0
<b>2</b>	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes.	<b>2</b>	
<b>3</b>	Amounts set aside for specific charitable projects that satisfy the		
<b>a</b>	Suitability test (prior IRS approval required).	<b>3a</b>	
<b>b</b>	Cash distribution test (attach the required schedule).	<b>3b</b>	
<b>4</b>	<b>Qualifying distributions.</b> Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4.	<b>4</b>	469,413
<b>5</b>	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b (see instructions).	<b>5</b>	0
<b>6</b>	<b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4.	<b>6</b>	469,413

**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 2015	(c) 2015	(d) 2016
<b>1</b> Distributable amount for 2016 from Part XI, line 7				
<b>2</b> Undistributed income, if any, as of the end of 2016				
<b>a</b> Enter amount for 2015 only. . . . .				
<b>b</b> Total for prior years 20____, 20____, 20____				
<b>3</b> Excess distributions carryover, if any, to 2016				
<b>a</b> From 2011. . . . .				
<b>b</b> From 2012. . . . .				
<b>c</b> From 2013. . . . .				
<b>d</b> From 2014. . . . .				
<b>e</b> From 2015. . . . .				
<b>f</b> Total of lines 3a through e. . . . .				
<b>4</b> Qualifying distributions for 2016 from Part XII, line 4 ▶ \$ _____				
<b>a</b> Applied to 2015, but not more than line 2a				
<b>b</b> Applied to undistributed income of prior years (Election required—see instructions). . . . .				
<b>c</b> Treated as distributions out of corpus (Election required—see instructions). . . . .				
<b>d</b> Applied to 2016 distributable amount. . . . .				
<b>e</b> Remaining amount distributed out of corpus				
<b>5</b> Excess distributions carryover applied to 2016 (If an amount appears in column (d), the same amount must be shown in column (a) )				
<b>6 Enter the net total of each column as indicated below:</b>				
<b>a</b> Corpus Add lines 3f, 4c, and 4e Subtract line 5				
<b>b</b> Prior years' undistributed income Subtract line 4b from line 2b . . . . .				
<b>c</b> 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. . . . .				
<b>d</b> Subtract line 6c from line 6b Taxable amount—see instructions . . . . .				
<b>e</b> Undistributed income for 2015 Subtract line 4a from line 2a Taxable amount—see instructions . . . . .				
<b>f</b> Undistributed income for 2016 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2017 . . . . .				
<b>7</b> Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions). . . . .				
<b>8</b> Excess distributions carryover from 2011 not applied on line 5 or line 7 (see instructions). . . . .				
<b>9 Excess distributions carryover to 2017.</b> Subtract lines 7 and 8 from line 6a . . . . .				
<b>10</b> Analysis of line 9				
<b>a</b> Excess from 2012. . . . .				
<b>b</b> Excess from 2013. . . . .				
<b>c</b> Excess from 2014. . . . .				
<b>d</b> Excess from 2015. . . . .				
<b>e</b> Excess from 2016. . . . .				

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

**1a** If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2016, enter the date of the ruling. . . . . **2014-08-20**

**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				(e) Total
	(a) 2016	(b) 2015	(c) 2014	(d) 2013	
<b>2a</b> Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed . . . . .	1,516	2,432	504	8,243	12,695
<b>b</b> 85% of line 2a . . . . .	1,289	2,067	428	7,007	10,791
<b>c</b> Qualifying distributions from Part XII, line 4 for each year listed . . . . .	469,413	509,296	537,986	615,823	2,132,518
<b>d</b> Amounts included in line 2c not used directly for active conduct of exempt activities . . . . .	0	0	0	0	0
<b>e</b> Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c . . . . .	469,413	509,296	537,986	615,823	2,132,518
<b>3</b> Complete 3a, b, or c for the alternative test relied upon					
<b>a</b> "Assets" alternative test—enter					
<b>(1)</b> Value of all assets . . . . .					0
<b>(2)</b> Value of assets qualifying under section 4942(j)(3)(B)(i) . . . . .					0
<b>b</b> "Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed. . . . .	5,089	5,081	3,935	7,635	21,740
<b>c</b> "Support" alternative test—enter					
<b>(1)</b> Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) . . . . .					0
<b>(2)</b> Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii). . . . .					0
<b>(3)</b> Largest amount of support from an exempt organization . . . . .					0
<b>(4)</b> Gross investment income . . . . .					0

**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 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) )

**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

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

Check here ☐ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation 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 or e-mail address of the person to whom applications should be addressed

ROBIN RENNELLS  
2801 SLATER ROAD STE 220  
MORRISVILLE, NC 275608477  
(919) 462-9730

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

SPECIFIED FORMS AVAILABLE UPON REQUEST

**c** Any submission deadlines

THE 2016 GRANT REQUEST DEADLINES WERE MARCH 29, APRIL 18, AND SEPTEMBER 28

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

THE FOUNDATION TYPICALLY DOES NOT PROVIDE FUNDING TO ARTS FOR THE GENERAL PUBLIC, AID FOR DOMESTIC ANIMALS, RELIGIOUS ORGANIZATIONS REQUESTING FUNDS FOR RELIGIOUS PURPOSES, LABOR ORGANIZATIONS, FRATERNAL OR SOCIAL ORGANIZATIONS, PARTISAN POLITICAL CAUSES OR CANDIDATES, OR INDIVIDUALS OR ORGANIZATIONS THAT BENEFIT ONE INDIVIDUAL OR AN INDIVIDUAL'S FAMILY

**Part XV** **Supplementary Information** (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	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
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i> See Additional Data Table				
<b>Total</b> . . . . .			<b>3a</b>	307,982
<b>b</b> <i>Approved for future payment</i>				
<b>Total</b> . . . . .			<b>3b</b>	0

Enter gross amounts unless otherwise indicated

Enter gross amounts unless otherwise indicated	Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See instructions )
	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	
<b>1</b> Program service revenue					
<b>a</b> FEES FOR SERVICES					2,307
<b>b</b> _____					
<b>c</b> _____					
<b>d</b> _____					
<b>e</b> _____					
<b>f</b> _____					
<b>g</b> Fees and contracts from government agencies					
<b>2</b> Membership dues and assessments. . . . .					
<b>3</b> Interest on savings and temporary cash investments . . . . .					
<b>4</b> Dividends and interest from securities. . . . .					
<b>5</b> Net rental income or (loss) from real estate					
<b>a</b> Debt-financed property. . . . .					
<b>b</b> Not debt-financed property. . . . .					
<b>6</b> Net rental income or (loss) from personal property					
<b>7</b> Other investment income. . . . .					
<b>8</b> Gain or (loss) from sales of assets other than inventory . . . . .					
<b>9</b> Net income or (loss) from special events					
<b>10</b> Gross profit or (loss) from sales of inventory					
<b>11</b> Other revenue <b>a</b> _____					
<b>b</b> _____					
<b>c</b> _____					
<b>d</b> _____					
<b>e</b> _____					
<b>12</b> Subtotal Add columns (b), (d), and (e). . . . .		0		0	2,307
<b>13 Total.</b> Add line 12, columns (b), (d), and (e). . . . .					2,307

## Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

[illegible]

## Part XVII

- |       | Yes | No |
|-------|-----|----|
| 1a(1) |     | No |
| 1a(2) |     | No |
| 1b(1) |     | No |
| 1b(2) |     | No |
| 1b(3) |     | No |
| 1b(4) |     | No |
| 1b(5) |     | No |
| 1b(6) |     | No |
| 1c    |     | No |

[illegible]

- 2a** Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? ☐ Yes ☒ No

- b** If "Yes," complete the following schedule

(a) Name of organization	(b) Type of organization	(c) Description of relationship

**Sign  
Here**

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

	2017-10-12
Signature of officer or trustee	Date

\_\_\_\_\_

Title

May the IRS discuss this return with the preparer shown below (see instr )? ☒ Yes ☐ No

**Paid  
Preparer  
Use Only**

Print/Type preparer's name  JOHN HUSKINS	Preparer's Signature	Date  2017-10-12	Check if self-employed <input type="checkbox"/>	PTIN  P01081531
Firm's name ► JOHNSON LAMBERT LLP				Firm's EIN ► 52-1446779
Firm's address ► 4242 SIX FORKS RD STE 1500  RALEIGH, NC 27609				Phone no (919) 719-6400

**Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation**

(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
MARC ADEE 2801 SLATER ROAD SUITE 220 MORRISVILLE, NC 27560	BOARD MEMBER 1 00	0	0	0
MACK KENDALL 2801 SLATER ROAD SUITE 220 MORRISVILLE, NC 27560				
KEVIN A TRAPANI 2801 SLATER ROAD SUITE 220 MORRISVILLE, NC 27560	PRESIDENT/TREASURER 1 00	0	0	0
JENNIFER A TRAPANI 2801 SLATER ROAD SUITE 220 MORRISVILLE, NC 27560				
WILLIAM C MECKLENBURG JR 2801 SLATER ROAD SUITE 220 MORRISVILLE, NC 27560	VICE PRESIDENT 1 00	0	0	0
DAN BAUM 2801 SLATER ROAD SUITE 220 MORRISVILLE, NC 27560		87,106	10,322	0

**Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment**

<div>Recipient</div> <div>Name and address (home or business)</div>	<div>If recipient is an individual, show any relationship to any foundation manager or substantial contributor</div>	<div>Foundation status of recipient</div>	<div>Purpose of grant or contribution</div>	<div>Amount</div>
<b>a</b> <i>Paid during the year</i>				
UNITED WAY OF THE GREATER TRIANGLE  2400 PERIMETER PARK DRIVE SUITE 150 MORRISVILLE, NC 27560		501(C)(3)	GENERAL SUPPORT/CHARITABLE MATCH	93,000
YMCA OF FREDERICK COUNTY 1000 NORTH MARKET STREET FREDERICK, MD 21701		501(C)(3)	GENERAL SUPPORT	25,000
BOYS & GIRLS CLUB SAN MARCOS 1 POSITIVE PLACE SAN MARCOS, CA 92069		501(C)(3)	SAFETY GRANT	25,000
YMCA OF GREATER ROCHESTER 444 E MAIN STREET ROCHESTER, NY 14604		501(C)(3)	GENERAL SUPPORT	15,000
HABITAT FOR HUMANITY OF DURHAM 215 N CHURCH STREET DURHAM, NC 27701		501(C)(3)	CHARITABLE MATCH	10,780
<b>Total . . . . . ▶</b> <b>3a</b>				307,982




Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	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
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
YMCA OF GREATER BOSTON 316 HUNTINGTON AVENUE BOSTON, MA 02115		501(C)(3)	SAFETY GRANT/GENERAL SUPPORT	10,000
YMCA OF THE TRIANGLE AREA 801 CORPORATE CENTER DRIVE SUITE 200 RALEIGH, NC 27607		501(C)(3)	CHARITABLE MATCH	9,000
YMCA OF METRO DALLAS 601 N AKARD STREET DALLAS, TX 75201		501(C)(3)	SWIM/WATER SAFETY/GENERAL SUPPORT	5,944
CAMP HOLIDAY TRAILS 400 HOLIDAY TRAILS LANE CHARLOTTESVILLE, VA 22903		501(C)(3)	SAFETY GRANT	5,000
YMCA OF THE ROCKIES PO BOX 20800/2515 TUNNEL RD ESTES PARK, CO 80511		501(C)(3)	SAFETY GRANT	5,000
<b>Total . . . . . ▶</b> <b>3a</b>				307,982


**Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment**


Recipient	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
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
YMCA OF MONTCLAIR 25 PARK STREET MONTCLAIR, NJ 07042		501(C)(3)	SAFETY GRANT	5,000
PHILADELPHIA FREEDOM VALLEY YMCA 400 FAYETTE STREET STE 250 PHILADELPHIA, PA 19428		501(C)(3)	GENERAL SUPPORT	5,000
HABITAT FOR HUMANITY OF WAKE COUNTY 2420 RALEIGH BLVD RALEIGH, NC 27604		501(C)(3)	GENERAL SUPPORT	5,000
YMCA OF SILICON VALLEY 80 SARATOGA AVE SANTA CLARA, CA 95051		501(C)(3)	GENERAL SUPPORT	5,000
ARMED SERVICES YMCA OF THE USA 7405 ALBAN STATION CT STE B215 SPRINGFIELD, VA 22150		501(C)(3)	GENERAL SUPPORT	5,000
<b>Total . . . . .</b> ► <b>3a</b>				307,982

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	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
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
YMCA BLUE RIDGE ASSEMBLY 84 BLUE RIDGE CIRCLE BLACK MOUNTAIN, NC 28711		501(C)(3)	BLRS CONTRIBUTION	3,500
BOGALUSA YMCA 411 AVENUE B BOGALUSA, LA 704273709		501(C)(3)	SWIM/WATER SAFETY	2,500
TREASURE VALLEY FAMILY YMCA 1177 W STATE STREET BOISE, ID 83702		501(C)(3)	SAFETY GRANT	2,500
YMCA OF THE USA 101 N WACKER DRIVE CHICAGO, IL 60606		501(C)(3)	GENERAL SUPPORT	2,034
MILAN FAMILY YMCA 5207 INDUSTRIAL DR MILAN, TN 38358		501(C)(3)	SAFETY GRANT	2,000
<b>Total . . . . . ▶</b> <b>3a</b>				307,982

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	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
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
YMCA OF METRO MILWAUKEE 161 W WISCONSIN AVE SUITE 400 MILWAUKEE, WI 53203		501(C)(3)	SWIM/WATER SAFETY	2,000
SHASTA FAMILY YMCA 1155 N COURT STREET REDDING, CA 96001		501(C)(3)	SAFETY GRANT	2,000
YMCA OF DELAWARE 100 W 10TH ST SUITE 1100 WILMINGTON, DE 19801		501(C)(3)	SWIM/WATER SAFETY	2,000
YMCA OF HARRISON COUNTY PO BOX 156 CORYDON, IN 47112		501(C)(3)	SWIM/WATER SAFETY	1,500
MERRIMACK VALLEY YMCA 101 AMESBURY STREET 4TH FLOOR LAWRENCE, MA 01840		501(C)(3)	SAFETY GRANT	1,500
<b>Total . . . . . ▶</b> <b>3a</b>				307,982

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	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
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
NEW CASTLE COMMUNITY YMCA 20 W WASHINGTON STREET NEW CASTLE, PA 16101		501(C)(3)	SAFETY GRANT	1,500
RONALD MCDONALD HOUSE NORTHERN CA 2555 49TH STREET SACRAMENTO, CA 95817		501(C)(3)	SWIM/WATER SAFETY	1,378
TROY BOYS & GIRLS CLUB 1700 7TH AVENUE TROY, NY 12180		501(C)(3)	SAFETY GRANT	1,250
RISING ABOVE THE STORMS PO BOX 656 MORRISVILLE, NC 27560		501(C)(3)	CHARITABLE MATCH	1,200
BOYS & GIRLS CLUB OF WAKE COUNTY 701 N RALEIGH BLVD RALEIGH, NC 27610		501(C)(3)	CHARITABLE MATCH	1,200
<b>Total</b> . . . . . 				307,982
<b>3a</b>				

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	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
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
THE SALVATION ARMY OF WAKE COUNTY 1863 CAPITAL BLVD RALEIGH, NC 27604		501(C)(3)	CHARITABLE MATCH/DOLLARS FOR DOERS	1,160
TRIANGLE VOLLEYBALL CLUB 9301 GLOBE CENTER DR SUITE 140 MORRISVILLE, NC 27560		501(C)(3)	DOLLARS FOR DOERS	1,080
DONALD REYNOLDS YMCA OF WARREN 207 N MAIN STREET WARREN, AR 71671		501(C)(3)	SWIM/WATER SAFETY	1,066
HUNTERDON COUNTY YMCA 1410 ROUTE 22 WEST ANNANDALE, NJ 08801		501(C)(3)	SAFETY GRANT	1,000
AUBURN-LEWISTON YMCA 62 TURNER STREET AUBURN, ME 04210		501(C)(3)	SWIM/WATER SAFETY	1,000
<b>Total</b> . . . . . 				307,982
<b>3a</b>				

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	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
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
WACCAMAW INDIAN PEOPLE 591 BLUEWATER RD AYNOR, SC 29511		501(C)(3)	CHARITABLE MATCH	1,000
BALTIMORE CHILD ABUSE CENTER 2300 N CHARLES STREET SUITE 400 BALTIMOR, MD 21218		501(C)(3)	SAFETY GRANT	1,000
B'NAI B'RITH CAMP 9400 SW BEAVERTON-HILLSDALE HWY SUITE 200 BEAVERTON, OR 97005		501(C)(3)	SAFETY GRANT	1,000
CHILDREN'S CRANIOFACIAL ASSOCIATION 13140 COIT ROAD SUITE 517 DALLAS, TX 75204		501(C)(3)	CHARITABLE MATCH	1,000
YMCA OF EL PASO 810 WYOMING EL PASO, TX 79902		501(C)(3)	SAFETY GRANT	1,000
<b>Total</b> . . . . . 				307,982
<b>3a</b>				

**Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	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
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
FOND DU LAC FAMILY YMCA 90 W 2ND ST FOND DU LAC, WI 54935		501(C)(3)	GENERAL SUPPORT	1,000
YMCA OF THE PRAIRIE PO BOX 618 HOLDREGE, NE 68949		501(C)(3)	SAFETY GRANT	1,000
YMCA OF HONOLULU 1441 PALI HIGHWAY HONOLULU, HI 96813		501(C)(3)	16 ANNUAL CAMPAIGN	1,000
MT HOOD KIWANIS CAMP 3636 WOODVIEW TRACE INDIANAPOLIS, IN 46268		501(C)(3)	SAFETY GRANT	1,000
BOY SCOUTS OF AMERICA 1325 WEST WALNUT HILL LANE IRVING, TX 750152079		501(C)(3)	SAFETY GRANT	1,000
<b>Total . . . . . ▶</b> <b>3a</b>				307,982





Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	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
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
YMCA OF FLORIDA'S FIRST COAST 40 EAST ADAMS ST JACKSONVILLE, FL 32202		501(C)(3)	SAFETY GRANT	1,000
LAWTON YMCA 5 SW 5TH ST LAWTON, OK 73501		501(C)(3)	SAFETY GRANT	1,000
GREATER MISSOULA FAMILY YMCA 3000 S RUSSELL STREET MISSOULA, MT 598018547		501(C)(3)	SWIM/WATER SAFETY	1,000
MONROE FAMILY YMCA 1111 W ELM AVE MONROE, MI 481622885		501(C)(3)	SAFETY GRANT	1,000
GIVE DIRECTLY PO BOX 3221 NEW YORK, NY 10008		501(C)(3)	CHARITABLE MATCH	1,000
<b>Total . . . . . ▶</b> <b>3a</b>				307,982

**Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	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
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
PRINCETON FAMILY YMCA 59 PAUL ROBESON PLACE PRINCETON, NJ 08540		501(C)(3)	SAFETY GRANT	1,000
YMCA OF PUEBLO 3200 E SPAULDING AVE PUEBLO, CO 81008		501(C)(3)	SWIM/WATER SAFETY	1,000
JOHN A ALEXANDER FAMILY YMCA 1603 HILLSBOROUGH STREET RALEIGH, NC 27605		501(C)(3)	CHARITABLE MATCH	1,000
NC STATE UNIVERSITY PO BOX 7203 RALEIGH, NC 27695		501(C)(3)	GENERAL SUPPORT	1,000
YMCA OF ROWAN COUNTY 215 GUFFY ST SALISBURY, NC 28147		501(C)(3)	SAFETY GRANT	1,000
<b>Total . . . . . ▶</b> <b>3a</b>				307,982

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	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
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
COMMUNITY YMCA 170 PATTERSON AVE SHREWSBURY, NJ 07702		501(C)(3)	SWIM/WATER SAFETY	1,000
SUMMIT AREA YMCA 490 MORRIS AVENUE SUMMIT, NJ 07901		501(C)(3)	SAFETY GRANT	1,000
GREATER SUSQUEHANNA VALLEY YMCA 1150 N 4TH STREET SUNBURY, PA 17801		501(C)(3)	SWIM/WATER SAFETY	1,000
NJ YMCA STATE ALLIANCE DINNER 407 GREENWOOD AVE TRENTON, NJ 08609		501(C)(3)	GENERAL SUPPORT	1,000
AUTISM SOCIETY OF SOUTHERN ARIZONA 2600 N WYATT DR TUCSON, AZ 85714		501(C)(3)	SAFETY GRANT	1,000
<b>Total . . . . . ▶</b> <b>3a</b>				307,982

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	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
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
ALBANY YMCA 1701 GILLIONVILLE ROAD ALBANY, GA 31707		501(C)(3)	SAFETY GRANT	988
FORT MADISON FAMILY YMCA 220 26TH ST FORT MADISON, IA 52627		501(C)(3)	SWIM/WATER SAFETY	900
WATER SMART TOTS PO BOX 2231 RIVERVIEW, FL 33568		501(C)(3)	SAFETY GRANT	840
YMCA OF WESTERN NC 53 ASHLAND AVE SUITE 105 ASHEVILLE, NC 28801		501(C)(3)	CHARITABLE MATCH	750
JUNIATA VALLEY YMCA 105 1ST AVE BURNHAM, PA 17009		501(C)(3)	SAFETY GRANT	750
<b>Total . . . . .</b> 				307,982
<b>3a</b>				

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	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
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
COURT FOR KIDS PO BOX 873786 VANCOUVER, WA 98687		501(C)(3)	CHARITABLE MATCH	740
YMCA OF BEAUFORT COUNTY 1801 RICHMOND AVENUE PORT ROYAL, SC 29935		501(C)(3)	SWIM/WATER SAFETY	600
MONTGOMERY COUNTY FAMILY YMCA 101 E CHERRY STREET RED OAK, IA 51566		501(C)(3)	SAFETY GRANT	600
B LAB 15 WATERLOO AVE BERWYN, PA 19312		501(C)(3)	SAFETY GRANT	500
TS STARTUPS LLC 1050 WALNUT ST 202 BOULDER, CO 80302		501(C)(3)	GENERAL SUPPORT	500
<b>Total . . . . .</b> 				307,982
<b>3a</b>				

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	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
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
HARRISBURG AREA YMCA 701 N FRONT STREET HARRISBURG, PA 17101		501(C)(3)	SWIM/WATER SAFETY	500
YMCA OF GREATER OKLAHOMA CITY 500 N BROADWAY SUITE 500 OKLAHOMA CITY, OK 73102		501(C)(3)	SAFETY GRANT	500
THRESHOLD 609 GARY STREET DURHAM, NC 27703		501(C)(3)	CHARITABLE MATCH/DOLLARS FOR DOERS	470
BOYS & GIRLS CLUB OF LAKE EUFAULA PO BOX 1058 EUFAULA, AL 36072		501(C)(3)	SAFETY GRANT	450
NEIGHBOR TO NEIGHBOR PO BOX 25628 RALEIGH, NC 27611		501(C)(3)	DOLLARS FOR DOERS	400
<b>Total . . . . . ▶</b> <b>3a</b>				307,982

**Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	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
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
RALEIGH RESCUE MISSION 314 E HARGETT ST RALEIGH, NC 27601		501(C)(3)	DOLLARS FOR DOERS	340
ST BALDRICK'S FOUNDATION 1333 S MAYFLOWER AVE SUITE 400 MONROVIA, CA 91016		501(C)(3)	CHARITABLE MATCH/DOLLARS FOR DOERS	305
JDRF 5510 SIX FORKS RD SUITE 107 RALEIGH, NC 27609		501(C)(3)	SAFETY GRANT	300
JC RAULSTROM ARBORETUM NC STATE UNIVERSITY CAMPUS BOX 7522 RALEIGH, NC 27695		501(C)(3)	CHARITABLE MATCH/DOLLARS FOR DOERS	290
AKRON AREA YMCA 50 S MAIN ST LL100 AKRON, OH 44308		501(C)(3)	SAFETY GRANT	250
<b>Total . . . . . ▶</b> <b>3a</b>				307,982

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	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
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
ANN ARBOR YMCA 400 W WASHINGTON ANN ARBOR, MI 48103		501(C)(3)	SWIM/WATER SAFETY	250
BAINBRIDGE-DECATUR COUNTY YMCA 1818 E SHOTWELL STREET BAINBRIDGE, GA 39819		501(C)(3)	SWIM/WATER SAFETY	250
BOYS & GIRLS CLUB OF BROCKTON 233 WARREN AVE BROCKTON, MA 023014321		501(C)(3)	SAFETY GRANT	250
BOYS & GIRLS CLUB OF THE BIG HORNS 58 NORTH ADAMS BUFFALO, WY 82834		501(C)(3)	GENERAL SUPPORT	250
BOYS & GIRLS CLUB OF CENTRAL WYOMING 1701 EAST K STREET CASPER, WY 82601		501(C)(3)	SAFETY GRANT	250
<b>Total . . . . .</b> ► <b>3a</b>				307,982



Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	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
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
BOYS & GIRLS CLUB OF OCOEE REGION 385 3RD ST SW CLEVELAND, TN 37311		501(C)(3)	SAFETY GRANT	250
CAMP SUMMIT 17210 CAMPBELL RD SUITE 180-W DALLAS, TX 75240		501(C)(3)	CHARITABLE MATCH	250
YMCA OF METRO DETROIT 1401 BROADWAY AVENUE SUITE 3A DETROIT, MI 48226		501(C)(3)	SWIM/WATER SAFETY	250
GREATER SCRANTON YMCA 706 N BLAKELY STREET DUNMORE, PA 18512		501(C)(3)	SWIM/WATER SAFETY	250
YMCA OF CECIL COUNTY 25 YMCA BLVD ELKTON, MD 21921		501(C)(3)	SWIM/WATER SAFETY	250
<b>Total . . . . . ▶</b> <b>3a</b>				307,982

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	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
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
FAMILY WELLNESS LLC 2960 SETER PARKWAY FARGO, ND 58104		501(C)(3)	SAFETY GRANT	250
BOYS & GIRLS CLUB OF FRANKLIN SIMPSON PO BOX 888/103 S COURT ST FRANKLIN, KY 42135		501(C)(3)	SAFETY GRANT	250
BOYS & GIRLS CLUB OF HARRISONBURG & ROCKINGHAM COUNTY PO BOX 1223 HARRISONBURG, VA 228031223		501(C)(3)	SAFETY GRANT	250
BOYS & GIRLS CLUB OF THE BIG ISLANDS 100 KAMAKAHONU ST HILO, HI 96720		501(C)(3)	GENERAL SUPPORT	250
BOYS & GIRLS CLUB HUDSON COUNTY 225 MORRIS BOULEVARD JERSEY CITY, NJ 07304		501(C)(3)	SAFETY GRANT	250
<b>Total . . . . .</b> ► <b>3a</b>				307,982

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	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
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
HABITAT FOR HUMANITY OF FLATHEAD VALLEY 275 CORPORATE DR KALISPELL, MT 59901		501(C)(3)	GENERAL SUPPORT	250
KEARNEY FAMILY YMCA 4500 6TH AVENUE KEARNEY, NE 68845		501(C)(3)	SAFETY GRANT	250
MARTINSVILLE-HENRY COUNTY YMCA 3 STARLING AVE MARTINSVILLE, VA 24112		501(C)(3)	SWIM/WATER SAFETY	250
YMCA OF GREATER NEW ORLEANS 1050 S JEFFERSON DAVIS PKWY SUITE 241 NEW ORLEANS, LA 70125		501(C)(3)	SAFETY GRANT	250
WEST SUBURBAN YMCA 276 CHURCH STREET NEWTON, MA 02458		501(C)(3)	SAFETY GRANT	250
<b>Total . . . . .</b> ► <b>3a</b>				307,982


Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	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
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
YMCA OF METRO NORTH 2 CENTENNIAL DRIVE SUITE 4A PEABODY, MA 01960		501(C)(3)	GENERAL SUPPORT	250
RANDOLPH YMCA 14 DOVER CHESTER ROAD RANDOLPH, NJ 07869		501(C)(3)	SWIM/WATER SAFETY	250
BOYS & GIRLS CLUB OF CARBON COUNTY PO BOX 2063/724 E BROOKS RAWLINS, WY 82301		501(C)(3)	SAFETY GRANT	250
YMCA OF GREATER WILLIAMSON COUNTY 1812 N MAYS STREET/PO BOX 819 ROUND ROCK, TX 78664		501(C)(3)	SAFETY GRANT	250
SHEBOYGAN COUNTY YMCA 812 BROUGHTON DRIVE SHEBOYGAN, WI 53081		501(C)(3)	SAFETY GRANT	250
<b>Total . . . . .</b> ► <b>3a</b>				307,982

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	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
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
THE SALVATION ARMY BOYS & GIRLS CLUB OF SUMTER PO BOX 2229/187 S LAFAYETTE ST SUMTER, SC 29150		501(C)(3)	SAFETY GRANT	250
YMCA OF GREATER TOLEDO 1500 NSUPERIOR 2ND FLOOR TOLEDO, OH 43604		501(C)(3)	SAFETY GRANT	250
BOYS & GIRLS CLUB OF TOPEKA 550 SE 27TH ST TOPEKA, KS 66605		501(C)(3)	SAFETY GRANT	250
VALPARAISO FAMILY YMCA 1201 CUMBERLAND CROSSING DR VALPARAISO, IN 46383		501(C)(3)	SWIM/WATER SAFETY	250
GREATER WATERBURY FAMILY YMCA 136 WEST MAIN STREET WATERBURY, CT 06702		501(C)(3)	SAFETY GRANT	250
<b>Total . . . . . ▶</b> <b>3a</b>				307,982

**Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	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
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
YMCA OF GREATER BRANDYWINE 1 EAST CHESTNUT STREET WEST CHESTER, PA 19380		501(C)(3)	SAFETY GRANT	250
OCEAN COMMUNITY YMCA 95 HIGH STREET WESTERLY, RI 02891		501(C)(3)	GENERAL SUPPORT	250
YMCA OF WESTFIELD 220 CLARK STREET WESTFIELD, NJ 07090		501(C)(3)	SAFETY GRANT	250
COMMUNITY BOYS & GIRLS CLUB 901 NIXON ST WILMINGTON, NC 28401		501(C)(3)	SAFETY GRANT	250
BIG BROTHERS BIG SISTERS 909 AVIATION PKWY STE 1500 MORRISVILLE, NC 27560		501(C)(3)	DOLLARS FOR DOERS	230
<b>Total . . . . . ▶</b> <b>3a</b>				307,982

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	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
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
DANA-FARBER CANCER INSTITUTE 10 BROOKLINE PLACE WEST 6TH FLOOR BROOKLINE, MA 02445		501(C)(3)	CHARITABLE MATCH	200
KNOTS OF LOVE 2973 HARBOR BLVD 822 COSTA MESA, CA 92626		501(C)(3)	DOLLARS FOR DOERS	200
FUQUA SCHOOL OF BUSINESS PO BOX 90581 DURHAM, NC 27708		501(C)(3)	CHARITABLE MATCH	200
GREEN CHAIR 1853 CAPITAL BLVD RALEIGH, NC 27604		501(C)(3)	DOLLARS FOR DOERS	200
WUNC 120 FRIDAY CENTER DRIVE CHAPEL HILL, NC 27517		501(C)(3)	CHARITABLE MATCH	120
<b>Total . . . . .</b> 				307,982
<b>3a</b>				

**Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	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
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
JCC ASSOCIATION 520 EIGHTH AVENUE 4TH FLOOR NEW YORK, NY 10018		501(C)(3)	GENERAL SUPPORT	72
YMCA OF MARQUETTE COUNTY 1420 PINE STREET MARQUETTE, MI 49855		501(C)(3)	DOLLARS FOR DOERS	70
HEIFER PROJECT 1 WORLD AVENUE LITTLE ROCK, AR 72202		501(C)(3)	CHARITABLE MATCH	60
FOOD BANK OF NC 3808 TARHEEL DRIVE RALEIGH, NC 27609		501(C)(3)	DOLLARS FOR DOERS	40
ALZHEIMER'S WALK 225 N MICHIGAN AVE CHICAGO, IL 60601		501(C)(3)	CHARITABLE MATCH	25
<b>Total . . . . . ▶</b> <b>3a</b>				307,982



**TY 2016 Accounting Fees Schedule****Name:** THE REDWOODS GROUP FOUNDATION INC**EIN:** 77-0698917

<b>Category</b>	<b>Amount</b>	<b>Net Investment Income</b>	<b>Adjusted Net Income</b>	<b>Disbursements for Charitable Purposes</b>
ACCOUNTING FEES	3,300	0	16	3,284

**TY 2016 Other Expenses Schedule****Name:** THE REDWOODS GROUP FOUNDATION INC**EIN:** 77-0698917**Other Expenses Schedule**

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
BANK SERVICE FEES	2,788	2,788	0	0
MISCELLANEOUS EXPENSE	4,712	0	23	4,689
TELEPHONE	646	0	3	643
DUES & SUBSCRIPTIONS	905	0	4	901
OFFICE SUPPLIES	386	0	2	384
EMPLOYMENT EXPENSES	605	0	3	602
MARKETING	3,804	0	19	3,785

## TY 2016 Other Income Schedule

**Name:** THE REDWOODS GROUP FOUNDATION INC

**EIN:** 77-0698917

### Other Income Schedule

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
FEES FOR SERVICES	2,307		2,307

**TY 2016 Other Liabilities Schedule****Name:** THE REDWOODS GROUP FOUNDATION INC**EIN:** 77-0698917

Description	Beginning of Year - Book Value	End of Year - Book Value
RELATED PARTY PAYABLE	279	0

**TY 2016 Other Professional Fees Schedule****Name:** THE REDWOODS GROUP FOUNDATION INC**EIN:** 77-0698917

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
CONSULTING FEES	5,000	0	24	4,976
MANAGEMENT FEES	13,986	0	68	13,918

**TY 2016 Taxes Schedule****Name:** THE REDWOODS GROUP FOUNDATION INC**EIN:** 77-0698917

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
	6,674	0	33	6,641

<b>Schedule B</b> (Form 990, 990-EZ, or 990-PF) <small>Department of the Treasury Internal Revenue Service</small>	<b>Schedule of Contributors</b>  ▶ <b>Attach to Form 990, 990-EZ, or 990-PF</b> ▶ <b>Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at <u>www.irs.gov/form990</u></b>	OMB No 1545-0047  <b>2016</b>
	<b>Name of the organization</b> THE REDWOODS GROUP FOUNDATION INC	<b>Employer identification number</b> 77-0698917

**Organization type** (check one)

<b>Filers of:</b>	<b>Section:</b>
Form 990 or 990-EZ	<input type="checkbox"/> 501(c)( ) (enter number) organization
	<input type="checkbox"/> 4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation
	<input type="checkbox"/> 527 political organization
Form 990-PF	<input checked="" type="checkbox"/> 501(c)(3) exempt private foundation
	<input type="checkbox"/> 4947(a)(1) nonexempt charitable trust treated as a private foundation
	<input type="checkbox"/> 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 an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or other property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

**Special Rules**

☐ For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33<sup>1</sup>/<sub>3</sub>% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.

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

☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled 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 totaling \$5,000 or more during the year. . . . . ▶ \$ \_\_\_\_\_

**Caution.** An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

<b>Name of organization</b> THE REDWOODS GROUP FOUNDATION INC	<b>Employer identification number</b> 77-0698917
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Part I	Contributors (see instructions) Use duplicate copies of Part I if additional space is needed		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	US FIRE 305 MADISON AVENUE MORRISTOWN, NJ 07960	\$ 557,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
-		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
-		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
-		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
-		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
-		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
-		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
-		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )



Employer identification number

77-0698917

<b>Part II</b>	<b>Noncash Property</b>
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(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
		\$	
(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
		\$	
(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
		\$	
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	

<b>Name of organization</b> THE REDWOODS GROUP FOUNDATION INC	<b>Employer identification number</b> 77-0698917
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<b>Part III</b>	<b>Exclusively</b> religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of <b>exclusively</b> religious, charitable, etc., contributions of <b>\$1,000 or less</b> for the year. (Enter this information once. See instructions.) ► \$ _____ Use duplicate copies of Part III if additional space is needed
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(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	_____	_____	_____
	_____	_____	_____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	_____	_____	_____
	_____	_____	_____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	_____	_____	_____
	_____	_____	_____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	_____	_____	_____
	_____	_____	_____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	_____	_____	_____
	_____	_____	_____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	_____	_____	_____
	_____	_____	_____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	_____	_____	_____
	_____	_____	_____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	