

For calendar year 2018, or tax year beginning 01-01-2018, and ending 12-31-2018

Name of foundation THE REDWOODS GROUP FOUNDATION INC		A Employer identification number 77-0698917	
Number and street (or P.O. box number if mail is not delivered to street address) 2801 SLATER RD NO 220		Room/suite	
City or town, state or province, country, and ZIP or foreign postal code MORRISVILLE, NC 275608477		B Telephone number (see instructions) (919) 462-9730	
G Check all that apply <div><input type="checkbox"/> Initial return</div> <div><input type="checkbox"/> Initial return of a former public charity</div> <div><input type="checkbox"/> Final return</div> <div><input type="checkbox"/> Amended return</div> <div><input type="checkbox"/> Address change</div> <div><input type="checkbox"/> Name change</div>		D 1. Foreign organizations, check here 2 Foreign organizations meeting the 85% test, check here and attach computation	
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		E If private foundation status was terminated under section 507(b)(1)(A), check here	
I Fair market value of all assets at end of year (from Part II, col (c), line 16) ▶\$ 181,372	J Accounting method <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ (Part I, column (d) must be on cash basis )	F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here	

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions) )		(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 (attach schedule)	472,506			
	2 Check <input type="checkbox"/> if the foundation is <b>not</b> required to attach Sch B . . . . .				
	3 Interest on savings and temporary cash investments . . . . .				
	4 Dividends and interest from securities . . . . .				
	5a Gross rents . . . . .				
	b Net rental income or (loss) _____				
	6a Net gain or (loss) from sale of assets not on line 10				
	b Gross sales price for all assets on line 6a _____				
	7 Capital gain net income (from Part IV, line 2) . . . . .		0		
	8 Net short-term capital gain . . . . .			0	
	9 Income modifications . . . . .			1,000	
	10a Gross sales less returns and allowances _____				
Operating and Administrative Expenses	b Less Cost of goods sold . . . . .				
	c Gross profit or (loss) (attach schedule) . . . . .				
	11 Other income (attach schedule) . . . . .				
	12 Total. Add lines 1 through 11 . . . . .	472,506	0	1,000	
	13 Compensation of officers, directors, trustees, etc	24,598	0	0	24,598
	14 Other employee salaries and wages . . . . .	115,680	0	0	115,680
	15 Pension plans, employee benefits . . . . .	426	0	0	426
	16a Legal fees (attach schedule) . . . . .				
	b Accounting fees (attach schedule) . . . . .	3,450	0	0	3,450
	c Other professional fees (attach schedule) . . . . .	15,680	0	0	15,680
	17 Interest . . . . .				
	18 Taxes (attach schedule) (see instructions) . . . . .				
	19 Depreciation (attach schedule) and depletion . . . . .				
	20 Occupancy . . . . .				
	21 Travel, conferences, and meetings . . . . .	14,010	0	0	14,010
	22 Printing and publications . . . . .				
	23 Other expenses (attach schedule) . . . . .	12,207	335	0	11,872
	24 Total operating and administrative expenses. Add lines 13 through 23 . . . . .	186,051	335	0	185,716
	25 Contributions, gifts, grants paid . . . . .	295,320			295,320
	26 Total expenses and disbursements. Add lines 24 and 25	481,371	335	0	481,036
	27 Subtract line 26 from line 12				
	a Excess of revenue over expenses and disbursements	-8,865			
	b Net investment income (if negative, enter -0-)		0		
c Adjusted net income (if negative, enter -0-) . . . . .				1,000	

<b>Part II Balance Sheets</b>		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		
<b>Assets</b>	<b>1</b> Cash—non-interest-bearing . . . . .					
	<b>2</b> Savings and temporary cash investments . . . . .	78,992	63,245	63,245		
	<b>3</b> Accounts receivable ▶ <u>118,127</u>					
	Less allowance for doubtful accounts ▶ _____		118,127	118,127		
	<b>4</b> Pledges receivable ▶ _____					
	Less allowance for doubtful accounts ▶ _____					
	<b>5</b> Grants receivable . . . . .					
	<b>6</b> Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions) . . . . .					
	<b>7</b> Other notes and loans receivable (attach schedule) ▶ _____					
	Less allowance for doubtful accounts ▶ _____					
	<b>8</b> Inventories for sale or use . . . . .					
	<b>9</b> Prepaid expenses and deferred charges . . . . .					
	<b>10a</b> Investments—U S and state government obligations (attach schedule)					
	<b>b</b> Investments—corporate stock (attach schedule) . . . . .					
	<b>c</b> Investments—corporate bonds (attach schedule) . . . . .					
	<b>11</b> Investments—land, buildings, and equipment basis ▶ _____					
Less accumulated depreciation (attach schedule) ▶ _____						
<b>12</b> Investments—mortgage loans . . . . .						
<b>13</b> Investments—other (attach schedule) . . . . .						
<b>14</b> Land, buildings, and equipment basis ▶ _____						
Less accumulated depreciation (attach schedule) ▶ _____						
<b>15</b> Other assets (describe ▶ _____)						
<b>16</b> <b>Total assets</b> (to be completed by all filers—see the instructions Also, see page 1, item I)	78,992	181,372	181,372			
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses . . . . .					
	<b>18</b> Grants payable . . . . .	37,551	134,790			
	<b>19</b> Deferred revenue . . . . .					
	<b>20</b> Loans from officers, directors, trustees, and other disqualified persons					
	<b>21</b> Mortgages and other notes payable (attach schedule) . . . . .					
	<b>22</b> Other liabilities (describe ▶ _____)	0	13,006			
	<b>23</b> <b>Total liabilities</b> (add lines 17 through 22) . . . . .	37,551	147,796			
<b>Net Assets or Fund Balances</b>	<b>Foundations that follow SFAS 117, check here ▶ <input checked="" type="checkbox"/> and complete lines 24 through 26 and lines 30 and 31.</b>					
	<b>24</b> Unrestricted . . . . .	41,441	33,576			
	<b>25</b> Temporarily restricted . . . . .					
	<b>26</b> Permanently restricted . . . . .					
	<b>Foundations that do not follow SFAS 117, check here ▶ <input type="checkbox"/> and complete lines 27 through 31.</b>					
	<b>27</b> Capital stock, trust principal, or current funds . . . . .					
	<b>28</b> Paid-in or capital surplus, or land, bldg , and equipment fund					
	<b>29</b> Retained earnings, accumulated income, endowment, or other funds					
	<b>30</b> <b>Total net assets or fund balances</b> (see instructions) . . . . .	41,441	33,576			
<b>31</b> <b>Total liabilities and net assets/fund balances</b> (see instructions) .	78,992	181,372				

**Part III Analysis of Changes in Net Assets or Fund Balances**

<b>1</b> 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) . . . . .	<b>1</b>	41,441
<b>2</b> Enter amount from Part I, line 27a . . . . .	<b>2</b>	-8,865
<b>3</b> Other increases not included in line 2 (itemize) ▶ _____	<b>3</b>	1,000
<b>4</b> Add lines 1, 2, and 3 . . . . .	<b>4</b>	33,576
<b>5</b> Decreases not included in line 2 (itemize) ▶ _____	<b>5</b>	0
<b>6</b> Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 .	<b>6</b>	33,576

**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			

  

(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			
b			
c			
d			
e			

  

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	
a			
b			
c			
d			
e			

  

<b>2</b> Capital gain net income or (net capital loss) <div style="float: right; font-size: small;">           { If gain, also enter in Part I, line 7            If (loss), enter -0- in Part I, line 7         </div>	<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	<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))
2017	516,340	72,462	7 125666
2016	469,413	152,657	3 074952
2015	509,296	152,437	3 341026
2014	537,983	118,055	4 557054
2013	615,823	229,038	2 688737

  

<b>2</b> Total of line 1, column (d)	<b>2</b>	20 787435
<b>3</b> Average distribution ratio for the 5-year base period—divide the total on line 2 by 5 0, or by the number of years the foundation has been in existence if less than 5 years	<b>3</b>	4 157487
<b>4</b> Enter the net value of noncharitable-use assets for 2018 from Part X, line 5	<b>4</b>	56,688
<b>5</b> Multiply line 4 by line 3	<b>5</b>	235,680
<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>	235,680
<b>8</b> Enter qualifying distributions from Part XII, line 4	<b>8</b>	481,036

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>	2018 estimated tax payments and 2017 overpayment credited to 2018	<b>6a</b>	0
<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>	0
<b>d</b>	Backup withholding erroneously withheld . . . . .	<b>6d</b>	0
<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>	0
<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 2019 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). . . . . If the answer is "Yes" to <b>1a</b> or <b>1b</b> , attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities	<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? . . . . . If "Yes," attach a detailed description of the activities	<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? If "Yes," attach a conformed copy of the changes . . . . .	<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? . . . . . If "Yes," attach the statement required by General Instruction T	<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? If "Yes," complete Part II, col (c), and Part XV . . . . .	<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? If "No," attach explanation .	<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 2018 or the taxable year beginning in 2018? See the instructions for Part XIV. If "Yes," complete Part XIV . . . . .	<b>9</b>	Yes
<b>10</b> Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses . . . . .	<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>			

Located at **2801 SLATER RD STE 220 MORRISVILLE NC** ZIP+4 **275608477**

<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 2018, 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 the instructions for exceptions and filing requirements for FinCEN Form 114. 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. . . . . Organizations relying on a current notice regarding disaster assistance check here. <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 2018? . . . . .	<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 2018, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2018? . . . . . If "Yes," list the years <b>▶</b> 20____, 20____, 20____, 20____ <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
<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). . . . .	<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>▶</b> 20____, 20____, 20____, 20____			
<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 2018 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 2018). . . . .	<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 2018?	<b>4b</b>		<b>No</b>

**Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required** (continued)

		Yes	No
<b>5a</b>	During the year did the foundation pay or incur any amount to		
(1)	Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
(2)	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	
(3)	Provide a grant to an individual for travel, study, or other similar purposes?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
(4)	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	
(5)	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	
<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.		<b>5b</b>
	Organizations relying on a current notice regarding disaster assistance check here.	<input type="checkbox"/>	
<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? If "Yes," attach the statement required by Regulations section 53.4945–5(d)	<input type="checkbox"/> Yes <input type="checkbox"/> No	
<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	
<b>b</b>	Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If "Yes" to 6b, file Form 8870		<b>6b</b> No
<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	
<b>b</b>	If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?		<b>7b</b>
<b>8</b>	Is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment during the year?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

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

<b>1 List all officers, directors, trustees, foundation managers and their compensation. See instructions</b>				
(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 Additional Data Table				
<b>2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."</b>				
(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				
<b>Total number of other employees paid over \$50,000.</b>				<b>0</b>

**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 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.	145,137
<b>2</b> THE NATIONAL YOUTH SERVING ORGANIZATIONS FOR CHILD PROTECTION IS A NEW NETWORK CONVENED AND SUPPORTED BY THE REDWOODS GROUP FOUNDATION IN 2017. 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.	46,809
<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>	57,551
<b>c</b>	Fair market value of all other assets (see instructions).	<b>1c</b>	0
<b>d</b>	<b>Total</b> (add lines 1a, b, and c).	<b>1d</b>	57,551
<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>	57,551
<b>4</b>	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	<b>4</b>	863
<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>	56,688
<b>6</b>	<b>Minimum investment return.</b> Enter 5% of line 5.	<b>6</b>	2,834

**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 2018 from Part VI, line 5.	<b>2a</b>	
<b>b</b>	Income tax for 2018 (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>	481,036
<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>	481,036
<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>	481,036

**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 2017	(c) 2017	(d) 2018
<b>1</b> Distributable amount for 2018 from Part XI, line 7				
<b>2</b> Undistributed income, if any, as of the end of 2018				
<b>a</b> Enter amount for 2017 only. . . . .				
<b>b</b> Total for prior years 20____, 20____, 20____				
<b>3</b> Excess distributions carryover, if any, to 2018				
<b>a</b> From 2013. . . . .				
<b>b</b> From 2014. . . . .				
<b>c</b> From 2015. . . . .				
<b>d</b> From 2016. . . . .				
<b>e</b> From 2017. . . . .				
<b>f</b> Total of lines 3a through e. . . . .				
<b>4</b> Qualifying distributions for 2018 from Part XII, line 4 ▶ \$ _____				
<b>a</b> Applied to 2017, 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 2018 distributable amount. . . . .				
<b>e</b> Remaining amount distributed out of corpus				
<b>5</b> Excess distributions carryover applied to 2018 (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 2017 Subtract line 4a from line 2a Taxable amount—see instructions . . . . .				
<b>f</b> Undistributed income for 2018 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2019 . . . . .				
<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 2013 not applied on line 5 or line 7 (see instructions). . . . .				
<b>9 Excess distributions carryover to 2019.</b> Subtract lines 7 and 8 from line 6a . . . . .				
<b>10</b> Analysis of line 9				
<b>a</b> Excess from 2014. . . . .				
<b>b</b> Excess from 2015. . . . .				
<b>c</b> Excess from 2016. . . . .				
<b>d</b> Excess from 2017. . . . .				
<b>e</b> Excess from 2018. . . . .				

**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 2018, 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	Prior 3 years			(e) Total
	(a) 2018	(b) 2017	(c) 2016	(d) 2015	
<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 . . . . .	1,000	3,623	1,516	2,432	8,571
<b>b</b> 85% of line 2a . . . . .	850	3,080	1,289	2,067	7,285
<b>c</b> Qualifying distributions from Part XII, line 4 for each year listed . . . . .	481,036	516,340	469,413	509,296	1,976,085
<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 . . . . .	481,036	516,340	469,413	509,296	1,976,085
<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. . . . .	1,889	2,415	5,089	5,081	14,474
<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 foundation 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. to individuals or organizations under other conditions, complete items 2a, b, c, and d. See instructions.

**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 2018 GRANT REQUEST DEADLINES WAS DECEMBER 3, 2018

**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>	
<b>b</b> <i>Approved for future payment</i>				
<b>Total . . . . .</b>			<b>▶ 3b</b>	

## Enter gross amounts unless otherwise indicated

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

Line No. ▼	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) (See instructions.)

Form **990-PF** (2018)

## Part XVII

		Yes	No
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<b>1a(1)</b>	<b>No</b>
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<b>1a(2)</b>	<b>No</b>
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<b>1b(1)</b>	<b>No</b>
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<b>1b(2)</b>		<b>No</b>
--------------	--	-----------

<b>1b(3)</b>		<b>No</b>
--------------	--	-----------

<b>1b(4)</b>		<b>No</b>
--------------	--	-----------

<b>1b(5)</b>		<b>No</b>
--------------	--	-----------

<b>1b(6)</b>		<b>No</b>
--------------	--	-----------

<b>1c</b>		<b>No</b>
-----------	--	-----------

value  
ue

[illegible]

**2a** Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations

described in section 501(c) (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

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.

Sign Here
2019-11-14
May the IRS discuss this return

Signature of officer or trustee \_\_\_\_\_ Date \_\_\_\_\_ Title \_\_\_\_\_

(see instr )? ☒ Yes ☐ No

<b>Paid Preparer Use Only</b>	J CALVIN MARKS			
	Firm's name ▶ JOHNSON LAMBERT LLP			Firm's EIN ▶ 52-1446779

P01226973

Firm's EIN ► 52-1446779

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
KEVIN A TRAPANI	PRESIDENT/TREASURER 1 00	0	0	0
2801 SLATER ROAD SUITE 220 MORRISVILLE, NC 27560				
JENNIFER A TRAPANI	VICE PRESIDENT/SECRETARY 1 00	0	0	0
2801 SLATER ROAD SUITE 220 MORRISVILLE, NC 27560				
WILLIAM C MECKLENBURG JR	VICE PRESIDENT 1 00	0	0	0
2801 SLATER ROAD SUITE 220 MORRISVILLE, NC 27560				
MARC ADEE	BOARD MEMBER 1 00	0	0	0
2801 SLATER ROAD SUITE 220 MORRISVILLE, NC 27560				
DAN BAUM	BOARD MEMBER, EXECUTIVE DIRECTOR (TO 10 00	20,966	3,632	0
2801 SLATER ROAD SUITE 220 MORRISVILLE, NC 27560				
JOHN FEASEL	BOARD MEMBER (FROM 4/2018) 1 00	0	0	0
2801 SLATER ROAD SUITE 220 MORRISVILLE, NC 27560				
MIRANDA JACOBS	BOARD MEMBER (FROM 4/2018) 1 00	0	0	0
2801 SLATER ROAD SUITE 220 MORRISVILLE, NC 27560				
MACK KENDALL	BOARD MEMBER (TO 7/2018) 1 00	0	0	0
2801 SLATER ROAD SUITE 220 MORRISVILLE, NC 27560				
GARETH HEDGES	BOARD MEMBER 1 00	0	0	0
2801 SLATER ROAD SUITE 220 MORRISVILLE, NC 27560				
PATRICK MINOR	BOARD MEMBER (FROM 4/2018) 1 00	0	0	0
2801 SLATER ROAD SUITE 220 MORRISVILLE, NC 27560				

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>				
UNITED WAYPO BOX 110583 DURHAM, NC 27709		501(C)(3)	ANNUAL CAMPAIGN	90,000
BOYS & GIRLS CLUB OF DURHAM & ORANGE COUNTIES 808 EPETTIGREW ST DURHAM, NC 27701		501(C)(3)	SAFETY GRANT & INNOVATION CHALLENGE	26,000
BOYS & GIRLS CLUB OF PUEBLO COUNTY 635 WEST CORONA AVENUE PUEBLO, CO 81004		501(C)(3)	INNOVATION CHALLENGE	25,000
<b>Total . . . . . ▶ 3a</b>				295,320

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> Paid during the year				
FRIEDBERG JCC15 NEIL COURT OCEANSIDE, NY 11572		501(C)(3)	INNOVATION CHALLENGE	25,000
YMCA OF THE UNIVERSITY OF ILLINOIS 1001 S WRIGHT STREET CHAMPAIGN, IL 61820		501(C)(3)	INNOVATION CHALLENGE	25,000
HABITAT FOR HUMANITY OF WAKE COUNTY 2420 RALEIGH BLVD RALEIGH, NC 27604		501(C)(3)	GENERAL SUPPORT GRANT	10,000
<b>Total . . . . . ▶ 3a</b>				295,320



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 SILICON VALLEY 80 SARATOGA AVE SANTA CLARA, CA 95051		501(C)(3)	GENERAL SUPPORT GRANT	7,500
YMCA OF GREATER BOSTON 316 HUNTINGTON AVENUE BOSTON, MA 02115		501(C)(3)	GENERAL SUPPORT GRANT	5,000
YMCA OF GREATER ROCHESTER 444 EAST MAIN STREET ROCHESTER, NY 14604		501(C)(3)	SAFETY GRANT	5,000
<b>Total . . . . . ▶ 3a</b>				295,320

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 DALLAS 601 N AKARD STREET DALLAS, TX 75201		501(C)(3)	SAFETY GRANT	5,000
RIDGEWOOD YMCA112 OAK STREET RIDGEWOOD, NJ 07450		501(C)(3)	SAFETY GRANT	2,690
BOGALUSA YMCA411 AVENUE B BOGALUSA, LA 70427		501(C)(3)	SAFETY GRANT	2,000
<b>Total . . . . . ▶ 3a</b>				295,320

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>				
SHASTA COUNTY YMCA 1155 N COURT STREET REDDING, CA 96001		501(C)(3)	SAFETY GRANT	2,000
TREASURE VALLEY FAMILY YMCA 1177 W STATE STREET BOISE, ID 83702		501(C)(3)	SAFETY GRANT	2,000
BOYS & GIRLS CLUB OF TAUNTON 31 COURT STREET TAUNTON, MA 02780		501(C)(3)	SAFETY GRANT	1,600
<b>Total . . . . . ▶ 3a</b>				295,320

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>				
LEGACY YMCA1501 4TH AVE SW BESSEMER, AL 35022		501(C)(3)	SAFETY GRANT	1,500
THE SUSAN L CURTIS CHARITABLE FOUNDATION 1321 WASHINGTON AVE SUITE 104 PORTLAND, ME 04103		501(C)(3)	SAFETY GRANT	1,500
PENOBSCOT BAY YMCA 116 UNION STREET ROCKPORT, ME 04856		501(C)(3)	SAFETY GRANT	1,426
<b>Total . . . . . ▶ 3a</b>				295,320

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>				
ATHENS YMCA 915 HAWTHORNE AVENUE ATHENS, GA 30606		501(C)(3)	SAFETY GRANT	1,384
STEPPING STONES5650 GIVEN RD CINCINATTI, OH 45243		501(C)(3)	SAFETY GRANT	1,350
ADVOCATES AGAINST FAMILY VIOLENCE INC PO BOX 1496 CALDWELL, ID 83606		501(C)(3)	SAFETY GRANT	1,025
<b>Total . . . . . ▶ 3a</b>				295,320

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>				
BAKER COUNTY YMCA 3715 POCAHONTAS RD BAKER CITY, OR 97814		501(C)(3)	SAFETY GRANT	1,000
BOYS & GIRLS CLUB OF BROCKTON 233 WARREN AVE BROCKTON, MA 02301		501(C)(3)	SAFETY GRANT	1,000
BOYS & GIRLS CLUB OF DOUGLAS 327 E CENTER ST DOUGLAS, WY 82633		501(C)(3)	SAFETY GRANT	1,000
<b>Total . . . . . ▶ 3a</b>				295,320

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 GREATER TARRANT COUNTY 3218 E BELKNAP ST FORT WORTH, TX 76111		501(C)(3)	SAFETY GRANT	1,000
BOYS & GIRLS CLUB OF THE CHATTAHOOCHEE VALLEY 1700 BUENA VISTA ROAD COLUMBUS, GA 31906		501(C)(3)	SAFETY GRANT	1,000
BOYS & GIRLS CLUB OF VINELAND 560 CRYSTAL AVENUE VINELAND, NJ 08360		501(C)(3)	SAFETY GRANT	1,000
<b>Total . . . . . ▶ 3a</b>				295,320

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 ST LUCIE 3104 AVENUE J FORT PIERCE, FL 34947		501(C)(3)	SAFETY GRANT	1,000
BUFFALO CITY SWIM RACERS 651 DELAWARE AVENUE BUFFALO, NY 14202		501(C)(3)	SAFETY GRANT	1,000
CAMP KOREY 24880 BROTHERHOOD ROAD MOUNT VERNON, WA 98274		501(C)(3)	SAFETY GRANT	1,000
<b>Total . . . . .</b> ▶ <b>3a</b>				295,320



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>				
CENTRAL BUCKS FAMILY YMCA 2500 LOWER STATE ROAD DOYLESTOWN, PA 18901		501(C)(3)	SAFETY GRANT	1,000
CHANNEL ISLANDS YMCA 105 EAST CARRILLO STREET SANTA BARBARA, CA 93101		501(C)(3)	SAFETY GRANT	1,000
CHESHIRE HALF MARATHON 5K FOUNDATION PO BOX 54 CHESHIRE, CT 06410		501(C)(3)	GENERAL SUPPORT GRANT	1,000
<b>Total . . . . . ▶ 3a</b>				295,320

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>				
COOK COUNTY COMMUNITY EDUCATION 101 W 5TH STREET GRAND MARAIS, MN 55604		501(C)(3)	SAFETY GRANT	1,000
CORNELL COOPERATIVE EXTENSION DELAWARE COUNTY 34570 STATE HWY 10 HAMDEN, NY 13782		501(C)(3)	SAFETY GRANT	1,000
CROSSROADS YMCA INC 1450 SOUTH COURT STREET CROWN POINT, IN 46307		501(C)(3)	SAFETY GRANT	1,000
<b>Total . . . . . ▶ 3a</b>				295,320

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>				
DAVID POSNAK JCC 5850 S PINE ISLAND ROAD DAVIE, FL 33328		501(C)(3)	SAFETY GRANT	1,000
FAMILIES MOVING FORWARD 300 N QUEEN ST DURHAM, NC 27701		501(C)(3)	SAFETY GRANT	1,000
FAMILY SERVICE1531 13TH STREET COLUMBUS,IN 47201		501(C)(3)	SAFETY GRANT	1,000
<b>Total . . . . . ▶ 3a</b>				295,320

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 SUPPORT CIRCLE INC 2059 E CHELTEN AVE PHILADELPHIA, PA 19138		501(C)(3)	SAFETY GRANT	1,000
LAWTON YMCA5 SW 5TH ST LAWTON, OK 73501		501(C)(3)	SAFETY GRANT	1,000
LOUISIANA VIKINGS YOUTH ORGANIZATION 2226 NORTH SHERWOOD FOREST DR BATON ROUGE, LA 70815		501(C)(3)	SAFETY GRANT	1,000
<b>Total . . . . . ▶ 3a</b>				295,320

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>				
MERCY HAVEN INC 859 CONNETQUOT AVE STE 10 ISLIP TERRACE, NY 11752		501(C)(3)	SAFETY GRANT	1,000
MIDDLESEX COUNTY RECREATION KIDDIE KEEP WELL 35 ROOSEVELT DRIVE EDISON, NJ 08837		501(C)(3)	SAFETY GRANT	1,000
MONROE CAMP & RETREAT CENTER 24501 CAMP ROAD LAUREL HILL, NC 28351		501(C)(3)	SAFETY GRANT	1,000
<b>Total . . . . .</b> ► <b>3a</b>				295,320

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>				
NC STATE UNIVERSITY PO BOX 7203 RALEIGH, NC 27695		501(C)(3)	GENERAL SUPPORT GRANT	1,000
NEWTOWN COMMUNITY CENTER 3 PRIMROSE ST NEWTOWN, CT 06482		501(C)(3)	SAFETY GRANT	1,000
OCEAN COMMUNITY YMCA 95 HIGH STREET WESTERLY, RI 02891		501(C)(3)	SAFETY GRANT	1,000
<b>Total . . . . . ▶ 3a</b>				295,320

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>				
RARITAN VALLEY YMCA144 TICES LANE EAST BRUNSWICK, NJ 08816		501(C)(3)	SAFETY GRANT	1,000
SHALLOW WATER BLACKOUT PREVENTION 5125 PEACHTREE INDUSTRIAL BLVD NORCROSS, GA 30092		501(C)(3)	SAFETY GRANT	1,000
SOUTH SHORE YMCA 141 LONGWATER DRIVE NORWELL, MA 02061		501(C)(3)	SAFETY GRANT	1,000
<b>Total . . . . . ▶ 3a</b>				295,320

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>				
STAMFORD YMCA10 BELL STREET STAMFORD, CT 06901		501(C)(3)	SAFETY GRANT	1,000
STAND UP SPEAK OUT NCPO BOX 71532 DURHAM, NC 27722		501(C)(3)	SAFETY GRANT	1,000
THE FAMILY VIOLENCE PREVENTION DENTER INC 1012 OBERLIN ROAD RALEIGH, NC 27605		501(C)(3)	SAFETY GRANT	1,000
<b>Total</b> . . . . . ▶ <b>3a</b>				295,320



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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 NORTHERN LIGHTHOUSE INC 172 ACADEMY ST PRESQUE ISLE PRESQUE ISLE, ME 04769		501(C)(3)	SAFETY GRANT	1,000
VALLEY OF THE SUN YMCA 350 N 1ST AVENUE PHOENIX, AZ 85003		501(C)(3)	SAFETY GRANT	1,000
WEST SUBURBAN YMCA 276 CHURCH STREET NEWTON, MA 02458		501(C)(3)	SAFETY GRANT	1,000
<b>Total . . . . .</b> ► <b>3a</b>				295,320

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 CORRY906 N CENTER ST CORRY, PA 16407		501(C)(3)	SAFETY GRANT	1,000
YMCA OF EL PASO810 WYOMING EL PASO, TX 79902		501(C)(3)	SAFETY GRANT	1,000
YMCA OF GREATER HOUSTON 2600 NORTH LOOP WEST HOUSTON, DE 77092		501(C)(3)	SAFETY GRANT	1,000
<b>Total . . . . . ▶ 3a</b>				295,320

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 GREENSBORO 620 GREEN VALLEY RD STE 210 GREENSBORO, NC 27408		501(C)(3)	SAFETY GRANT	1,000
YMCA OF HONOLULU 1441 PALI HIGHWAY HONOLULU, HI 96813		501(C)(3)	SAFETY GRANT	1,000
YMCA OF NAUGATUCK 284 CHURCH STREET NAUGATUCK, CT 06770		501(C)(3)	SAFETY GRANT	1,000
<b>Total . . . . .</b> ► <b>3a</b>				295,320

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> Paid during the year				
YMCA OF THE TRIANGLE AREA 801 CORPORATE CENTER DRIVE SUITE 200 RALEIGH, NC 27607		501(C)(3)	SAFETY GRANT	1,000
YMCA OF WESTERN STARK COUNTY 131 TREMONT AVE SE MASSILLON, OH 44646		501(C)(3)	SAFETY GRANT	1,000
YMCA OF WESTFIELD NJ 220 CLARK STREET WESTFIELD, NJ 07090		501(C)(3)	SAFETY GRANT	1,000
<b>Total . . . . . ▶ 3a</b>				295,320

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>				
SOUTHINGTON CHESHIRE COMMUNITY YMCA 29 HIGH STREET SOUTHINGTON, CT 06489		501(C)(3)	SAFETY GRANT	995
YMCA OF GREATER OKLAHOMA CITY 500 NORTH BROADWAY OKLAHOMA CITY, OK 73102		501(C)(3)	SAFETY GRANT	900
BAYOULAND YMCA103 VALHI BLVD HOUMA, LA 70360		501(C)(3)	SAFETY GRANT	600
<b>Total . . . . . ▶ 3a</b>				295,320

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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 FREDERICK COUNTY 1000 NORTH MARKET STREET FREDERICK, MD 21701		501(C)(3)	SAFETY GRANT	600
DULUTH AREA FAMILY YMCA 302 W 1ST STREET DULUTH, MN 55802		501(C)(3)	SAFETY GRANT	500
GEORGIA MOUNTAINS YMCA 2455 HOWARD ROAD GAINESVILLE, GA 30501		501(C)(3)	SAFETY GRANT	500
<b>Total . . . . . ▶ 3a</b>				295,320

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>				
GREATER SCRANTON YMCA 706 N BLAKELY STREET DUNMORE, PA 18512		501(C)(3)	SAFETY GRANT	500
METUCHEN EDISON WOODBRIDGE YMCA 483 MIDDLESEX AVE METUCHEN, NJ 08840		501(C)(3)	SAFETY GRANT	500
OLD TOWN-ORONO YMCA 472 STILLWATER AVENUE OLD TOWN, ME 04468		501(C)(3)	SAFETY GRANT	500
<b>Total . . . . . ▶ 3a</b>				295,320

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>				
PREVENT CHILD ABUSE NC 3716 NATIONAL DR SUITE 118 RALEIGH, NC 27612		501(C)(3)	GENERAL SUPPORT GRANT	500
STROUD WATER RESEARCH CENTER 970 SPENCER RD AVONDALE, PA 19311		501(C)(3)	SAFETY GRANT	500
WILKES BARRE FAMILY YMCA 40 W NORTHAMPTON STREET WILKESBARRE, PA 18701		501(C)(3)	SAFETY GRANT	500
<b>Total . . . . .</b> ► <b>3a</b>				295,320



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 AVERY COUNTYPO BOX 707 LINVILLE, NC 28646		501(C)(3)	SAFETY GRANT	500
YMCA OF PUEBLO 3200 SPAULDING AVENUE PUEBLO, CO 81008		501(C)(3)	SAFETY GRANT	500
BOYS & GIRLS CLUB OF COLUMBUS 1108 CITY PARK AVE STE 301 COLUMBUS, OH 43206		501(C)(3)	SAFETY GRANT	250
<b>Total</b> . . . . . ► <b>3a</b>				295,320

**TY 2018 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	3,450	0	0	3,450

**TY 2018 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	335	335	0	0
MISCELLANEOUS EXPENSE	5,683	0	0	5,683
TELEPHONE	622	0	0	622
DUES & SUBSCRIPTIONS	400	0	0	400
OFFICE SUPPLIES	175	0	0	175
EVENT SPONSORSHIP	4,992	0	0	4,992

**TY 2018 Other Increases Schedule**

**Name:** THE REDWOODS GROUP FOUNDATION INC

**EIN:** 77-0698917

Description	Amount
RETURNED GRANTS	1,000

**TY 2018 Other Liabilities Schedule****Name:** THE REDWOODS GROUP FOUNDATION INC**EIN:** 77-0698917

Description	Beginning of Year - Book Value	End of Year - Book Value
DUE TO AFFILIATE	0	13,006

**TY 2018 Other Professional 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>
MANAGEMENT FEES	15,680	0	0	15,680

<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> ▶ Go to <u><a href="http://www.irs.gov/Form990">www.irs.gov/Form990</a></u> for the latest information	OMB No 1545-0047  <b>2018</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. Don't 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 isn't covered by the General Rule and/or the Special Rules doesn't 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 doesn't 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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<b>Part I</b> <b>Contributors</b> (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	\$ 472,506	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 )
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )



Employer identification number

77-0698917

Part II	Noncash Property
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Schedule B (Form 990, 990-EZ, or 990-PF) (2018)

<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
	<div></div> <div></div>	<div></div> <div></div>	<div></div> <div></div>
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	<div></div> <div></div>	<div></div> <div></div>	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	<div></div> <div></div>	<div></div> <div></div>	<div></div> <div></div>
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	<div></div> <div></div>	<div></div> <div></div>	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	<div></div> <div></div>	<div></div> <div></div>	<div></div> <div></div>
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	<div></div> <div></div>	<div></div> <div></div>	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	<div></div> <div></div>	<div></div> <div></div>	<div></div> <div></div>
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
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