

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

Department of the Treasury
Internal Revenue Service

- ▶ Do not enter social security numbers on this form as it may be made public.
- ▶ Go to www.irs.gov/Form990PF for instructions and the latest information.

Open to Public Inspection

For calendar year 2019 or tax year beginning , and ending

Name of foundation TWANDA FOUNDATION			A Employer identification number 20-3508036	
Number and street (or P.O. box number if mail is not delivered to street address) PO BOX 986		Room/suite	B Telephone number (see instructions)	
City or town, state or province, country, and ZIP or foreign postal code ALAMO CA 94507				
Foreign country name		Foreign province/state/county	Foreign postal code	
G Check all that apply:			C If exemption application is pending, check here <input type="checkbox"/>	
<input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Address change <input type="checkbox"/> Name change			D 1. Foreign organizations, check here <input type="checkbox"/>	
H Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation			D 2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>	
<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 <input type="checkbox"/>	
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) ▶ \$ 858,568		J Accounting method: <input checked="" type="checkbox"/> Cash <input 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 <input type="checkbox"/>	

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)	400,000			
	2 Check <input type="checkbox"/> if the foundation is not required to attach Sch. B				
	3 Interest on savings and temporary cash investments	984	984		
	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)				
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances				
b Less: Cost of goods sold					
c Gross profit or (loss) (attach schedule)					
11 Other income (attach schedule)					
12 Total. Add lines 1 through 11	400,984	984	0		
Operating and Administrative Expenses	13 Compensation of officers, directors, trustees, etc.	72,000	3,600		68,400
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits	13,889			13,889
	16a Legal fees (attach schedule)				
	b Accounting fees (attach schedule)	2,800	700		2,100
	c Other professional fees (attach schedule)	6,300	630		5,670
	17 Interest				
	18 Taxes (attach schedule) (see instructions)				
	19 Depreciation (attach schedule) and depletion	293			
	20 Occupancy				
	21 Travel, conferences, and meetings				
	22 Printing and publications				
	23 Other expenses (attach schedule)	1,187	300		887
	24 Total operating and administrative expenses. Add lines 13 through 23	96,469	5,230	0	90,946
	25 Contributions, gifts, grants paid	205,370			205,370
26 Total expenses and disbursements. Add lines 24 and 25	301,839	5,230	0	296,316	
27 Subtract line 26 from line 12:					
a Excess of revenue over expenses and disbursements	99,145				
b Net investment income (if negative, enter -0-)		0			
c Adjusted net income (if negative, enter -0-)			0		

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	159,892	858,128	858,128
	3	Accounts receivable ▶			
		Less: allowance for doubtful accounts ▶			
	4	Pledges receivable ▶			
		Less: allowance for doubtful accounts ▶			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule) ▶			
		Less: allowance for doubtful accounts ▶			
	8	Inventories for sale or use			
	9	Prepaid expenses and deferred charges			
	10a	Investments—U.S. and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule)			
	c	Investments—corporate bonds (attach schedule)			
	11	Investments—land, buildings, and equipment: basis ▶			
	Less: accumulated depreciation (attach schedule) ▶				
12	Investments—mortgage loans				
13	Investments—other (attach schedule)				
14	Land, buildings, and equipment: basis ▶	2,973			
	Less: accumulated depreciation (attach schedule) ▶	2,533			
15	Other assets (describe ▶)				
16	Total assets (to be completed by all filers—see the instructions. Also, see page 1, item I)	160,625	858,568	858,568	
Liabilities	17	Accounts payable and accrued expenses			
	18	Grants payable			
	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 ▶)			
	23	Total liabilities (add lines 17 through 22)	0	0	
Net Assets or Fund Balances	Foundations that follow FASB ASC 958, check here ▶ <input type="checkbox"/>				
	24	Net assets without donor restrictions			
	25	Net assets with donor restrictions			
	Foundations that do not follow FASB ASC 958, check here ▶ <input checked="" type="checkbox"/>				
	26	Capital stock, trust principal, or current funds			
	27	Paid-in or capital surplus, or land, bldg., and equipment fund			
	28	Retained earnings, accumulated income, endowment, or other funds	160,625	858,568	
29	Total net assets or fund balances (see instructions)	160,625	858,568		
30	Total liabilities and net assets/fund balances (see instructions)	160,625	858,568		

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 29 (must agree with end-of-year figure reported on prior year's return)	1	160,625
2	Enter amount from Part I, line 27a	2	99,145
3	Other increases not included in line 2 (itemize) ▶ See Attached Statement	3	609,817
4	Add lines 1, 2, and 3	4	869,587
5	Decreases not included in line 2 (itemize) ▶ See Attached Statement	5	11,019
6	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 29	6	858,568

Part IV Capital Gains and Losses for Tax on Investment Income

a) List and describe the kind(s) of property sold (for example, 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				
b				
c				
d				
e				
(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				(i) 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				
2	Capital gain net income or (net capital loss)	{ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }	2	0
3	Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). See instructions. If (loss), enter -0- in Part I, line 8	}	3	0

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 doesn't qualify under section 4940(e). Do not complete this part.

1 Enter the appropriate amount in each column for each year; see the 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))
2018	190,508	89,012	2.140251
2017	196,250	57,395	3.419287
2016	254,500	47,910	5.312043
2015	300,600	91,386	3.289344
2014	288,800	45,592	6.334445
2	Total of line 1, column (d)		20.495370
3	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		4.099074
4	Enter the net value of noncharitable-use assets for 2019 from Part X, line 5		818,332
5	Multiply line 4 by line 3		3,354,403
6	Enter 1% of net investment income (1% of Part I, line 27b)		0
7	Add lines 5 and 6		3,354,403
8	Enter qualifying distributions from Part XII, line 4		296,316

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)

1a	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	Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input type="checkbox"/> and enter 1% of Part I, line 27b	1	
c	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of Part I, line 12, col. (b).		
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)	2	0
3	Add lines 1 and 2	3	0
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)	4	
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5	0
6	Credits/Payments:		
a	2019 estimated tax payments and 2018 overpayment credited to 2019	6a	
b	Exempt foreign organizations—tax withheld at source	6b	
c	Tax paid with application for extension of time to file (Form 8868)	6c	
d	Backup withholding erroneously withheld	6d	
7	Total credits and payments. Add lines 6a through 6d	7	0
8	Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached	8	
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9	0
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	0
11	Enter the amount of line 10 to be: Credited to 2020 estimated tax <input type="checkbox"/> Refunded <input type="checkbox"/>	11	0

Part VII-A Statements Regarding Activities

	Yes	No
1a 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?		X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition. 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.		X
c Did the foundation file Form 1120-POL for this year?		X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. <input type="checkbox"/> \$ _____ (2) On foundation managers. <input type="checkbox"/> \$ _____		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. <input type="checkbox"/> \$ _____		
2 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.		X
3 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.		X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		X
b If "Yes," has it filed a tax return on Form 990-T for this year?	N/A	
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by <i>General Instruction T</i> .		X
6 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?	X	
7 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	X	
8a Enter the states to which the foundation reports or with which it is registered. See instructions. <input type="checkbox"/> CA		
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 <i>General Instruction G</i> ? If "No," attach explanation	X	
9 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 2019 or the tax year beginning in 2019? See the instructions for Part XIV. If "Yes," complete Part XIV.		X
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses.		X

Part VII-A Statements Regarding Activities (continued)

Table with 3 columns: Question, Yes, No. Rows 11-16 containing questions about controlled entities, distributions, public inspection requirements, and foreign country interests.

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

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

Table with 3 columns: Question, Yes, No. Rows 1a-4b containing questions about Form 4720 requirements, including disqualifying acts, undistributed income, and business enterprise interests.

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

5a 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 If any answer is "Yes" to 5a(1)–(5), did any 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.			5b		
Organizations relying on a current notice regarding disaster assistance, check here		<input type="checkbox"/>			
c 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 type="checkbox"/> No			
If "Yes," attach the statement required by Regulations section 53.4945–5(d).					
6a 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 Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If "Yes" to 6b, file Form 8870.			6b		X
7a 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 If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction?			7b	N/A	
8 Is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) 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

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

(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 Attached Statement	.00	0		
	.00	0		
	.00	0		
	.00	0		

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

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

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

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 ▶

Part IX-A Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.

	Expenses
1 NONE	
2	
3	
4	

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
1 NONE	
2	
3 All other program-related investments. See instructions.	
Total. Add lines 1 through 3 ▶	0

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

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities	1a	
b	Average of monthly cash balances	1b	830,354
c	Fair market value of all other assets (see instructions)	1c	440
d	Total (add lines 1a, b, and c)	1d	830,794
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	1e	
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	830,794
4	Cash deemed held for charitable activities. Enter 1½ % of line 3 (for greater amount, see instructions)	4	12,462
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	818,332
6	Minimum investment return. Enter 5% of line 5	6	40,917

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

1	Minimum investment return from Part X, line 6	1	40,917
2a	Tax on investment income for 2019 from Part VI, line 5	2a	
b	Income tax for 2019. (This does not include the tax from Part VI.)	2b	
c	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	40,917
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	40,917
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	40,917

Part XII Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	1a	296,316
b	Program-related investments—total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4	4	296,316
5	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	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	296,316

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 2018	(c) 2018	(d) 2019
1 Distributable amount for 2019 from Part XI, line 7				40,917
2 Undistributed income, if any, as of the end of 2019:				
a Enter amount for 2018 only			0	
b Total for prior years: 20 ____, 20 ____, 20 ____				
3 Excess distributions carryover, if any, to 2019:				
a From 2014 7,311,668				
b From 2015 10,608,929				
c From 2016 18,972,776				
d From 2017 22,367,297				
e From 2018 23,344,022				
f Total of lines 3a through e	82,604,692			
4 Qualifying distributions for 2019 from Part XII, line 4: ▶ \$ 296,316				
a Applied to 2018, but not more than line 2a				
b Applied to undistributed income of prior years (Election required—see instructions)				
c Treated as distributions out of corpus (Election required—see instructions)				
d Applied to 2019 distributable amount				40,917
e Remaining amount distributed out of corpus	255,399			
5 Excess distributions carryover applied to 2019 . (If an amount appears in column (d), the same amount must be shown in column (a).)				
6 Enter the net total of each column as indicated below:				
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	82,860,091			
b Prior years' undistributed income. Subtract line 4b from line 2b		0		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed				
d Subtract line 6c from line 6b. Taxable amount—see instructions				
e Undistributed income for 2018. Subtract line 4a from line 2a. Taxable amount—see instructions			0	
f Undistributed income for 2019. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2020				0
7 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)				
8 Excess distributions carryover from 2014 not applied on line 5 or line 7 (see instructions)	7,311,668			
9 Excess distributions carryover to 2020. Subtract lines 7 and 8 from line 6a	75,548,423			
10 Analysis of line 9:				
a Excess from 2015 10,608,929				
b Excess from 2016 18,972,776				
c Excess from 2017 22,367,297				
d Excess from 2018 23,344,022				
e Excess from 2019 255,399				

Part XV Supplementary Information (continued)

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a Paid during the year				
Aim High - Summer pgm for Tahoe/Truckee PO Box 410715 San Francisco, CA 94141-0715		PC	Summer learning pgm for Tahoe/Truckee	1,052
Alzheimer's Assoc PO Box 96011 Washington DC, DC 20090-6011		PC	Finding a cure for Alzheimer's	1,500
Bread and Roses - East Bay Outreach Pgm 233 Tamalpais Dr, #100 Corte Madera, CA 94925		PC	Helps feed needy families in East Bay Area, pediatric hospitals, special needs schools	2,000
CAL Foundation - Crew 1 Alumni House Berkeley, CA 94720		PC	Support CAL Foundation Crew	1,000
CC Times Share the Spirit - Crisis Center.org PO Box 5498 Walnut Creek, CA 94596		PC	Feed & Clothe Needy Families in Contra Costa County	5,000
CCC ARC George Miller Center 1340 Arnold Dr Ste 127 Martinez, CA 94553		PC	Enhance the lives of children with special needs	1,000
CCC Crisis Center PO Box 3364 Walnut Creek, CA 94598		PC	Provides consuling for individuals in family or health crisis	5,000
CERI - Center for Empowering Rufugees and Imigrants 544 International Blvd, Suite 9 Oakland, CA 94606		PC	Mental Health Services for refugees and imigrants	2,000
Choice in Aging 490 Gold Club Rd Pleasant Hill, CA 94523		PC	Adult Day Care	1,000
Choice in Aging 490 Gold Club Rd Pleasant Hill, CA 94523		PC	Adult Day Care	3,550
Choice in Aging Network for Good 490 Gold Club Rd Pleasant Hill, CA 94523		PC	Adult Day Care	3,090
Total . . . See Attached Statement				205,370
b Approved for future payment				
Total . . .				0

Continuation of Part XV, Line 3a (990-PF) - Grants and Contributions Paid During the Year

Recipient(s) paid during the year

Name

Common Good Comm Foundation

Street

364 Johnsville Rd

City

Blairsdon

State

CA

Zip Code

96103

Foreign Country**Relationship****Foundation Status**

PF

Purpose of grant/contribution

Community Fdn in Blairsdon

Amount

10,000

Name

Commonwealth Club of Calif

Street

110 Embarcadero Street

City

San Francisco

State

CA

Zip Code

94105

Foreign Country**Relationship****Foundation Status**

PC

Purpose of grant/contribution

Public Forum presentations

Amount

1,000

Name

Covelo (Round Valley) Public Library

Street

PO Box 620

City

Covelo

State

CA

Zip Code

95428

Foreign Country**Relationship****Foundation Status**

PC

Purpose of grant/contribution

Community Library Bldg Fund

Amount

1,000

Name

Diablo Regional Arts Assoc - Women's Artistic Alliance

Street

1601 Civic Dr

City

Walnut Creek

State

CA

Zip Code

94596

Foreign Country**Relationship****Foundation Status**

PF

Purpose of grant/contribution

Regional Arts Support

Amount

10,000

Name

Down Syndrome Connection of the Bay Area

Street

101 J Town & Country Dr

City

Danville

State

CA

Zip Code

94526

Foreign Country**Relationship****Foundation Status**

PC

Purpose of grant/contribution

Down syndrome school support

Amount

1,000

Name

Exhale - After Abortion Support

Street

1714 Franklin St, #100 - 141

City

Oakland

State

CA

Zip Code

94612

Foreign Country**Relationship****Foundation Status**

PC

Purpose of grant/contribution

After abortion talkline & support

Amount

5,000

Continuation of Part XV, Line 3a (990-PF) - Grants and Contributions Paid During the Year

Recipient(s) paid during the year

Name

Futures Explored Inc

Street

3547 Wilkinson Lane

City

Lafayette

State

CA

Zip Code

94549

Foreign Country**Relationship****Foundation Status**

PC

Purpose of grant/contribution

Job Skills & Training for Adults w Developmental Disabilities

Amount

1,500

Name

George Mark Children's House

Street

2121 George Mark Lane

City

San Francisco

State

CA

Zip Code

94578

Foreign Country**Relationship****Foundation Status**

PC

Purpose of grant/contribution

Pediatric Palliative Care

Amount

1,030

Name

Girls Inc Alameda

Street

510 16th St

City

Oakland

State

CA

Zip Code

94612

Foreign Country**Relationship****Foundation Status**

PC

Purpose of grant/contribution

Inspiring and training girls in Oakland

Amount

1,000

Name

Girls Inc of West Contra Costa

Street

260 Broadway

City

Richmond

State

CA

Zip Code

94804

Foreign Country**Relationship****Foundation Status**

Pc

Purpose of grant/contribution

Inspiring and training girls in West Contra Costa County

Amount

1,000

Name

Global Exchange

Street

2017 Mission St, 2nd floor

City

San Francisco

State

CA

Zip Code

94110-1285

Foreign Country**Relationship****Foundation Status**

PC

Purpose of grant/contribution

Supports social and environmental justice worldwide

Amount

2,000

Name

Hawaii Public Radio - NPR

Street

738 Kaheka St, Ste 101

City

Honolulu

State

HI

Zip Code

96814

Foreign Country**Relationship****Foundation Status**

PC

Purpose of grant/contribution

Public Radio

Amount

1,000

Continuation of Part XV, Line 3a (990-PF) - Grants and Contributions Paid During the Year**Recipient(s) paid during the year****Name**

Heifer Intl - Women Impowerment

Street

1 World Ave

City

Little Rock

State

AR

Zip Code

72202

Foreign Country**Relationship****Foundation Status**

PC

Purpose of grant/contribution

Provides domestic and work animals for 3rd World needy families

Amount

2,200

Name

Hospice of Hawaii Navian

Street

860 Iwilei Rd

City

Honolulu

State

HI

Zip Code

96817

Foreign Country**Relationship****Foundation Status**

PC

Purpose of grant/contribution

Helps families of dying relatives in Hawaii

Amount

1,500

Name

Hospice of the East Bay

Street

3470 Buskirk Ave

City

Pleasant Hill

State

CA

Zip Code

94523

Foreign Country**Relationship****Foundation Status**

PF

Purpose of grant/contribution

Helps families of dying relatives in CC County

Amount

2,500

Name

Hospice of the East Bay

Street

3470 Buskirk Ave

City

Pleasant Hill

State

CA

Zip Code

94523

Foreign Country**Relationship****Foundation Status**

PF

Purpose of grant/contribution

Helps families of dying relatives in CC County

Amount

10,000

Name

Jack London Historic Park

Street

2400 London Ranch Rd

City

Glen Ellen

State

CA

Zip Code

95442

Foreign Country**Relationship****Foundation Status**

PC

Purpose of grant/contribution

Jack London Historic Park preservation

Amount

5,000

Name

Kings Beach Community Resource Center

Street

PO Box 2810

City

Truckee

State

CA

Zip Code

96143

Foreign Country**Relationship****Foundation Status**

PF

Purpose of grant/contribution

Community Support in Kings Beach, CA

Amount

1,545

Continuation of Part XV, Line 3a (990-PF) - Grants and Contributions Paid During the Year

Recipient(s) paid during the year

Name

KIVA Micro Loans

Street

875 Howard, St, Suite 340

City

San Francisco

State

CA

Zip Code

94103

Foreign Country**Relationship****Foundation Status**

PC

Purpose of grant/contribution

Women's Micro Loans - Intl

Amount

5,000

Name

KQED Public Radio

Street

2601 Mariposa

City

San Francisco

State

CA

Zip Code

94110

Foreign Country**Relationship****Foundation Status**

PC

Purpose of grant/contribution

Public Radio

Amount

1,500

Name

Las Trampas Inc

Street

PO Box 515

City

Lafayette

State

CA

Zip Code

94549

Foreign Country**Relationship****Foundation Status**

PC

Purpose of grant/contribution

Supports Adults with Disabilities

Amount

10,000

Name

Las Trampas Inc

Street

PO Box 515

City

Lafayette

State

CA

Zip Code

94549

Foreign Country**Relationship****Foundation Status**

PC

Purpose of grant/contribution

Supports Adults with Disabilities

Amount

10,000

Name

Las Trampas Inc

Street

PO Box 515

City

Lafayette

State

CA

Zip Code

94549

Foreign Country**Relationship****Foundation Status**

PC

Purpose of grant/contribution

Supports Adults with Disabilities

Amount

4,000

Name

Lindsay Wildlife Experience

Street

1931 First Ave

City

Walnut Creek

State

CA

Zip Code

94597

Foreign Country**Relationship****Foundation Status**

PC

Purpose of grant/contribution

Wildlife Rehabilitation/Kids Summer Camp

Amount

1,000

Continuation of Part XV, Line 3a (990-PF) - Grants and Contributions Paid During the Year

Recipient(s) paid during the year

Name

Lower East Side Tenement Museum

Street

91 Orchard St

City

New York

State

NY

Zip Code

10002-4387

Foreign Country**Relationship****Foundation Status**

PF

Purpose of grant/contribution

Historic Tenement Museum

Amount

512

Name

Meals on Wheels

Street

1300 Civic Dr

City

Walnut Creek

State

CA

Zip Code

94596

Foreign Country**Relationship****Foundation Status**

PC

Purpose of grant/contribution

Provides meals for shut-in elderlies

Amount

1,025

Name

Oakland Fund - Educational Fund

Street

PO Box 71005

City

Oakland

State

CA

Zip Code

94612

Foreign Country**Relationship****Foundation Status**

PC

Purpose of grant/contribution

Scholarship Fund for Oakland Children

Amount

1,032

Name

Planned Parenthood - Northern CA

Street

2185 Pacheco St

City

Concord

State

CA

Zip Code

94520

Foreign Country**Relationship****Foundation Status**

PC

Purpose of grant/contribution

Provides Family Planning Education & Services

Amount

9,000

Name

Project Avary, Inc

Street

PO Box 150088

City

San Rafael

State

CA

Zip Code

94915

Foreign Country**Relationship****Foundation Status**

PC

Purpose of grant/contribution

Provide support and development for children of incarcerated parents

Amount

3,000

Name

Salesian College Prep HS

Street

2851 Salesian Ave

City

Richmond

State

CA

Zip Code

94804

Foreign Country**Relationship****Foundation Status**

PC

Purpose of grant/contribution

Non Profit College Prep HS

Amount

10,000

Continuation of Part XV, Line 3a (990-PF) - Grants and Contributions Paid During the Year

Recipient(s) paid during the year

Name

Senior Helpline Services - Mobility Matters

Street

1035 A Carol Lane

City

Lafayette

State

CA

Zip Code

94549-4715

Foreign Country**Relationship****Foundation Status**

PC

Purpose of grant/contribution

Assists seniors with rides,calls, referrals

Amount

1,000

Name

Seva Foundation

Street

1786 Fifth St

City

Berkeley

State

CA

Zip Code

94710-1716

Foreign Country**Relationship****Foundation Status**

PF

Purpose of grant/contribution

Supports 3rd World families with eye care

Amount

2,000

Name

SF Chronicle Season of Sharing Fund

Street

PO Box 44740

City

San Francisco

State

CA

Zip Code

94144

Foreign Country**Relationship****Foundation Status**

PF

Purpose of grant/contribution

Feed & Clothe Needy Families in Bay Area

Amount

5,000

Name

Shakespeare Lake Tahoe

Street

948 Incline Way

City

Incline Village

State

NV

Zip Code

89451

Foreign Country**Relationship****Foundation Status**

PC

Purpose of grant/contribution

Lake Tahoe Theater Group

Amount

2,500

Name

SonRise Equestrian Foundation

Street

PO Box 3097

City

Danville

State

CA

Zip Code

94526

Foreign Country**Relationship****Foundation Status**

PF

Purpose of grant/contribution

Support Disabled Children with Horseback Rides

Amount

2,000

Name

Special Olympics of Northern Calif

Street

3480 Buskirk Ave #340

City

Pleasant Hill

State

CA

Zip Code

94523-4343

Foreign Country**Relationship****Foundation Status**

PC

Purpose of grant/contribution

Supports Disabled Youth Sport Competition

Amount

1,025

Continuation of Part XV, Line 3a (990-PF) - Grants and Contributions Paid During the Year

Recipient(s) paid during the year

Name

Transcendence Theatre - Jack London Park

Street

19201 Sonoma Hwy, #214

City Sonoma	State CA	Zip Code 95476	Foreign Country
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Relationship	Foundation Status PC
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Purpose of grant/contribution Theater Group supporting Jack London State Park	Amount 10,000
---	-------------------------

Name

Truckee Tahoe Comm Foundation - Senior Services

Street

PO Box 366

City Truckee	State CA	Zip Code 96160	Foreign Country
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Relationship	Foundation Status PF
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Purpose of grant/contribution Arts, Educ, and Environment issues in Truckee	Amount 1,534
---	------------------------

Name

Urgent Action Fund

Street

660 13th Street, Suite 200

City Oakland	State CA	Zip Code 94612	Foreign Country
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Relationship	Foundation Status PC
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Purpose of grant/contribution Women's Human Rights Urgently	Amount 25,750
---	-------------------------

Name

Wellspring Educational Services

Street

1543 Sunnyvale Ave

City Walnut Creek	State CA	Zip Code 94597	Foreign Country
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Relationship	Foundation Status PC
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Purpose of grant/contribution Teach life skills for Austic children	Amount 5,000
---	------------------------

Name

White Pony Express

Street

3380 Vincent Rd #107

City Pleasant Hill	State CA	Zip Code 94523	Foreign Country
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Relationship	Foundation Status PC
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Purpose of grant/contribution Food and clothing for needy in Contra Costa County	Amount 1,025
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Name

Women's Cancer Resource Center

Street

5741 Telegraph Ave

City Oakland	State CA	Zip Code 94609	Foreign Country
------------------------	--------------------	--------------------------	------------------------

Relationship	Foundation Status PC
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Purpose of grant/contribution Treat women with cancer	Amount 5,000
---	------------------------

Continuation of Part XV, Line 3a (990-PF) - Grants and Contributions Paid During the Year

Recipient(s) paid during the year

Name

Women's Foundation of Calif

Street

300 Frank H Ogawa Plaza, #420

City

Oakland

State

CA

Zip Code

94612

Foreign Country

Relationship

Foundation Status

PF

Purpose of grant/contribution

Defends womens rights, fights trafficking, economic security

Amount

3,000

Name

Street

City

State

Zip Code

Foreign Country

Relationship

Foundation Status

Purpose of grant/contribution

Amount

Name

Street

City

State

Zip Code

Foreign Country

Relationship

Foundation Status

Purpose of grant/contribution

Amount

Name

Street

City

State

Zip Code

Foreign Country

Relationship

Foundation Status

Purpose of grant/contribution

Amount

Name

Street

City

State

Zip Code

Foreign Country

Relationship

Foundation Status

Purpose of grant/contribution

Amount

Name

Street

City

State

Zip Code

Foreign Country

Relationship

Foundation Status

Purpose of grant/contribution

Amount

Depreciation and Amortization

(Including Information on Listed Property)

Department of the Treasury
Internal Revenue Service (99)

▶ **Attach to your tax return.**

▶ **Go to www.irs.gov/Form4562 for instructions and the latest information.**

Attachment
Sequence No. **179**

Name(s) shown on return TWANDA FOUNDATION	Business or activity to which this form relates 990PF	Identifying number 20-3508036
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Part I Election To Expense Certain Property Under Section 179

Note: If you have any listed property, complete Part V before you complete Part I.

1 Maximum amount (see instructions)	1	
2 Total cost of section 179 property placed in service (see instructions)	2	
3 Threshold cost of section 179 property before reduction in limitation (see instructions)	3	
4 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	0
5 Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	0
6		
(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7 Listed property. Enter the amount from line 29	7	
8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	0
9 Tentative deduction. Enter the smaller of line 5 or line 8	9	0
10 Carryover of disallowed deduction from line 13 of your 2018 Form 4562.	10	
11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5. See instructions	11	
12 Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11	12	0
13 Carryover of disallowed deduction to 2020. Add lines 9 and 10, less line 12	13	0

Note: Don't use Part II or Part III below for listed property. Instead, use Part V.

Part II Special Depreciation Allowance and Other Depreciation (Don't include listed property. See instructions.)

14 Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year. See instructions	14	
15 Property subject to section 168(f)(1) election	15	
16 Other depreciation (including ACRS)	16	

Part III MACRS Depreciation (Don't include listed property. See instructions.)

Section A

17 MACRS deductions for assets placed in service in tax years beginning before 2019	17	
18 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here <input type="checkbox"/>		

Section B - Assets Placed in Service During 2019 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only—see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19 a 3-year property						
b 5-year property						
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs.		S/L	
h Residential rental property			27.5 yrs.	MM	S/L	
i Nonresidential real property			39 yrs.	MM	S/L	
				MM	S/L	

Section C - Assets Placed in Service During 2019 Tax Year Using the Alternative Depreciation System

20 a Class life					S/L
b 12-year			12 yrs.		S/L
c 30-year			30 yrs.	MM	S/L
d 40-year			40 yrs.	MM	S/L

Part IV Summary (See instructions.)

21 Listed property. Enter amount from line 28	21	293
22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations—see instructions	22	293
23 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

For Paperwork Reduction Act Notice, see separate instructions.

Part V Listed Property (Include automobiles, certain other vehicles, certain aircraft, and property used for entertainment, recreation, or amusement.)

Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

Section A—Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles.)

24a Do you have evidence to support the business/investment use claimed? 24b If "Yes," is the evidence written? 25 Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use. See instructions. 26 Property used more than 50% in a qualified business use: Laptop Computer 6/27/2017 100.00% 1,527 1,527 5 200DB - HY 293 27 Property used 50% or less in a qualified business use: 28 Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1 28 293 29 Add amounts in column (i), line 26. Enter here and on line 7, page 1 29 0

Section B—Information on Use of Vehicles

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.

30 Total business/investment miles driven during the year (don't include commuting miles). 31 Total commuting miles driven during the year. 32 Total other personal (noncommuting) miles driven. 33 Total miles driven during the year. Add lines 30 through 32. 34 Was the vehicle available for personal use during off-duty hours? 35 Was the vehicle used primarily by a more than 5% owner or related person? 36 Is another vehicle available for personal use?

Section C—Questions for Employers Who Provide Vehicles for Use by Their Employees

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who aren't more than 5% owners or related persons. See instructions.

37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees? 38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners. 39 Do you treat all use of vehicles by employees as personal use? 40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received? 41 Do you meet the requirements concerning qualified automobile demonstration use? See instructions. Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," don't complete Section B for the covered vehicles.

Part VI Amortization

(a) Description of costs (b) Date amortization begins (c) Amortizable amount (d) Code section (e) Amortization period or percentage (f) Amortization for this year 42 Amortization of costs that begins during your 2019 tax year (see instructions): 43 Amortization of costs that began before your 2019 tax year 43 44 Total. Add amounts in column (f). See the instructions for where to report 44 0

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

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.
▶ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2019

Name of the organization TWANDA FOUNDATION	Employer identification number 20-3508036
---	--

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

501(c)() (enter number) organization

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

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

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

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or 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 1/3 % 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 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization TWANDA FOUNDATION	Employer identification number 20-3508036
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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	Lisa K Laird ----- 1655 Las Trampas Rd ----- Alamo CA 94507 Foreign State or Province: ----- Foreign Country: -----	\$ 200,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	Sidne J Long ----- 1493 Paseo Nogales ----- Alamo CA 94507 Foreign State or Province: ----- Foreign Country: -----	\$ 100,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	James Laird Trust ----- 4243 Josh Court ----- Carmichael CA 95608 Foreign State or Province: ----- Foreign Country: -----	\$ 100,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
-----	----- ----- ----- Foreign State or Province: ----- Foreign Country: -----	\$ -----	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
-----	----- ----- ----- Foreign State or Province: ----- Foreign Country: -----	\$ -----	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
-----	----- ----- ----- Foreign State or Province: ----- Foreign Country: -----	\$ -----	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization TWANDA FOUNDATION	Employer identification number 20-3508036
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Part II **Noncash Property** (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
-----	----- ----- -----	\$ -----	-----
-----	----- ----- -----	\$ -----	-----
-----	----- ----- -----	\$ -----	-----
-----	----- ----- -----	\$ -----	-----
-----	----- ----- -----	\$ -----	-----
-----	----- ----- -----	\$ -----	-----
-----	----- ----- -----	\$ -----	-----
-----	----- ----- -----	\$ -----	-----

Name of organization TWANDA FOUNDATION	Employer identification number 20-3508036
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Part III **Exclusively 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 *exclusively* religious, charitable, etc., contributions of **\$1,000 or less** for the year. (Enter this information once. See instructions.) ▶ \$ 0
 Use duplicate copies of Part III if additional space is needed.

(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
----- ----- ----- For. Prov. Country	----- ----- -----

(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
----- ----- ----- For. Prov. Country	----- ----- -----

(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
----- ----- ----- For. Prov. Country	----- ----- -----

(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
----- ----- ----- For. Prov. Country	----- ----- -----

Part I, Line 16b (990-PF) - Accounting Fees

		2,800	700	0	2,100
Description		Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes (Cash Basis Only)
1	JoAnn K Kading, CPA	2,800	700		2,100

Part I, Line 16c (990-PF) - Other Professional Fees

		6,300	630	0	5,670
Description		Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes (Cash Basis Only)
1	Consultant Susan Kodani	6,300	630		5,670
2					0
3		0			0
4		0			0

Part I, Line 19 (990-PF) - Depreciation and Depletion

									293	0	0
Description		Date Acquired	Method of Computation	Asset Life	Cost or Other Basis	Beginning Accumulated Depreciation	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income		
1	#1 Laptop computer	3/1/2012	ADS SL Mid Qtr Conven	5	1,446	1,446					
2	#2 Laptop computer	6/26/2017	GDS DDB HY Conv	5	1,527	794	293				

Part I, Line 23 (990-PF) - Other Expenses

		1,187	300	0	887
Description		Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
1	Bank Fee	300	300		
2	Post Office Box	140	0		140
3	FTB Filing Fee	20	0		20
4	Charitable Trust Annual Registration Fee	75	0		75
5	Office Max supplies	652	0		652

Part II, Line 14 (990-PF) - Land, Buildings, and Equipment

		2,973	2,240	2,533	733	440	440
Asset Description		Cost or Other Basis	Accumulated Depreciation Beg. of Year	Accumulated Depreciation End of Year	Book Value Beg. of Year	Book Value End of Year	FMV End of Year
1	#1 Laptop Computer	1,446	1,446	1,446	0	0	0
2	#2 Laptop Computer	1,527	794	1,087	733	440	440

Part III (990-PF) - Changes in Net Assets or Fund Balances

Line 3 - Other increases not included in Part III, Line 2

1	01/01/2019 Thomas J Long Foundation Retained Earnings merged into Twanda Foundation	1	605,951
2	Cash received for settlement/refund of Thomas J Long Foundation 2018 expenses	2	3,866
3	Total	3	609,817

Line 5 - Decreases not included in Part III, Line 2

1	Adjustment to Thomas J Long Foundation RE for 2018 legal/accounting expenses paid by Twanda	1	8,992
2	Twanda Foundation 2018 insurance expense recorded in 2019	2	2,027
3	Total	3	11,019

Part VIII, Line 1 (990-PF) - Compensation of Officers, Directors, Trustees and Foundation Managers

											72,000	8,234	0
	Name	Check "X" if Business	Street	City	State	Zip Code	Foreign Country	Title	Avg Hrs Per Week	Compensation	Benefits	Expense Account	
1	SIDNE J LONG		1493 PASEO NOGALES	ALAMO	CA	94507		DIR/PRES	2.00				
2	LISA K LAIRD		1655 LAS TRAMPAS ROAD	ALAMO	CA	94507		DIR/VP	1.00	0			
3	WILLIAM HENRY (HANK) DELEVA		1493 PASEO NOGALES	ALAMO	CA	94507		DIR/SEC/CF O	15.00	72,000	8,234		
4	TINA MARIE FRANKLIN		1026 CHERRY AVE	SAN JOSE	CA	95125		TRUSTEE	0.50	0			
5	FRANK ANDREW FRANKLIN		1026 CHERRY AVE	SAN JOSE	CA	95125		TRUSTEE	0.50	0			

Summary of Unadjusted Basis of Qualified Property (4562)

12/31/2019

Summary of Qualified Property by Activity

Activity		Unadjusted Cost or Basis
1	990PF	2,973

Detail of Qualified Property

	Activity	Asset Description	Date In Service	Recovery Period	Years in Service	Total Cost or Basis	Business/Time Use Percent	Unadjusted Cost or Basis
2	990PF	Laptop Computer	3/1/2012	5	8	1,446	100.00%	1,446
3	990PF	Laptop Computer	6/27/2017	5	3	1,527	100.00%	1,527