

Form **990-PF**  
 Department of the Treasury  
 Internal Revenue Service

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

▶ **Do not enter social security numbers on this form as it may be made public.**  
 ▶ **Go to [www.irs.gov/Form990PF](http://www.irs.gov/Form990PF) for instructions and the latest information.**

OMB No 1545-0052  
**2018**  
**Open to Public Inspection**

**For calendar year 2018, or tax year beginning 04-01-2018, and ending 03-31-2019**

Name of foundation DE MIRANDA FOUNDATION INC		A Employer identification number 95-4855401	
Number and street (or P O box number if mail is not delivered to street address) PO BOX 2127		Room/suite	
B Telephone number (see instructions) (310) 377-1199		C If exemption application is pending, check here <input type="checkbox"/>	
City or town, state or province, country, and ZIP or foreign postal code PALOS VERDES PEN, CA 90274		D 1. Foreign organizations, check here <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>	
G Check all that apply <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		E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>	
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		F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>	
I Fair market value of all assets at end of year (from Part II, col (c), line 16) ▶ \$ <u>4,802,085</u>		J Accounting method <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ <i>(Part I, column (d) must be on cash basis)</i>	

<b>Part I Analysis of Revenue and Expenses</b> <i>(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions) )</i>		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
<b>Revenue</b>	<b>1</b> Contributions, gifts, grants, etc., received (attach schedule)	351,000			
	<b>2</b> Check <input type="checkbox"/> if the foundation is <b>not</b> required to attach Sch B				
	<b>3</b> Interest on savings and temporary cash investments				
	<b>4</b> Dividends and interest from securities	224,669	224,669	224,669	
	<b>5a</b> Gross rents				
	<b>b</b> Net rental income or (loss)				
	<b>6a</b> Net gain or (loss) from sale of assets not on line 10	-5,852			
	<b>b</b> Gross sales price for all assets on line 6a <u>2,735,722</u>				
	<b>7</b> Capital gain net income (from Part IV, line 2)				
	<b>8</b> Net short-term capital gain			737	
	<b>9</b> Income modifications				
	<b>10a</b> Gross sales less returns and allowances				
<b>b</b> Less Cost of goods sold					
<b>c</b> Gross profit or (loss) (attach schedule)					
<b>11</b> Other income (attach schedule)					
<b>12 Total.</b> Add lines 1 through 11	569,817	224,669	225,406		
<b>Operating and Administrative Expenses</b>	<b>13</b> Compensation of officers, directors, trustees, etc				
	<b>14</b> Other employee salaries and wages				
	<b>15</b> Pension plans, employee benefits				
	<b>16a</b> Legal fees (attach schedule)				
	<b>b</b> Accounting fees (attach schedule)	1,785			1,785
	<b>c</b> Other professional fees (attach schedule)	10,322	10,322		
	<b>17</b> Interest	262	262		
	<b>18</b> Taxes (attach schedule) (see instructions)	10,262	10,262		
	<b>19</b> Depreciation (attach schedule) and depletion				
	<b>20</b> Occupancy	2,400			2,400
	<b>21</b> Travel, conferences, and meetings				
	<b>22</b> Printing and publications				
	<b>23</b> Other expenses (attach schedule)	8,015			8,015
	<b>24 Total operating and administrative expenses.</b> Add lines 13 through 23	33,046	20,846		12,200
	<b>25</b> Contributions, gifts, grants paid	428,000			428,000
<b>26 Total expenses and disbursements.</b> Add lines 24 and 25	461,046	20,846		440,200	
<b>27</b> Subtract line 26 from line 12					
<b>a Excess of revenue over expenses and disbursements</b>	108,771				
<b>b Net investment income</b> (if negative, enter -0-)		203,823			
<b>c Adjusted net income</b> (if negative, enter -0-)			225,406		

<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 . . . . .	21,090	71,460	71,460
	<b>2</b> Savings and temporary cash investments . . . . .			
	<b>3</b> Accounts receivable ▶ <u>135,000</u>			
	Less allowance for doubtful accounts ▶ _____	135,000	135,000	135,000
	<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) . . . . .	3,993,157	4,076,188	4,595,625	
<b>14</b> Land, buildings, and equipment basis ▶ _____				
Less accumulated depreciation (attach schedule) ▶ _____				
<b>15</b> Other assets (describe ▶ _____)				
<b>16 Total assets</b> (to be completed by all filers—see the instructions Also, see page 1, item I)	4,149,247	4,282,648	4,802,085	
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses . . . . .			
	<b>18</b> Grants payable . . . . .			
	<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 ▶ _____)			
	<b>23 Total liabilities</b> (add lines 17 through 22) . . . . .		0	
<b>Net Assets or Fund Balances</b>	<b>Foundations that follow SFAS 117, check here</b> ▶ <input type="checkbox"/> <b>and complete lines 24 through 26 and lines 30 and 31.</b>			
	<b>24</b> Unrestricted . . . . .			
	<b>25</b> Temporarily restricted . . . . .			
	<b>26</b> Permanently restricted . . . . .			
	<b>Foundations that do not follow SFAS 117, check here</b> ▶ <input checked="" type="checkbox"/> <b>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	4,149,247	4,282,648		
<b>30 Total net assets or fund balances</b> (see instructions) . . . . .	4,149,247	4,282,648		
<b>31 Total liabilities and net assets/fund balances</b> (see instructions) .	4,149,247	4,282,648		

<b>Part III Analysis of Changes in Net Assets or Fund Balances</b>		
<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>	4,149,247
<b>2</b> Enter amount from Part I, line 27a . . . . .	<b>2</b>	108,771
<b>3</b> Other increases not included in line 2 (itemize) ▶ _____	<b>3</b>	24,630
<b>4</b> Add lines 1, 2, and 3 . . . . .	<b>4</b>	4,282,648
<b>5</b> Decreases not included in line 2 (itemize) ▶ _____	<b>5</b>	
<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>	4,282,648

Part VII-A Statements Regarding Activities (continued)

Table with 3 columns: Question, Yes, No. Rows 11-13 regarding controlled entities, donor advised funds, and public inspection requirements.

14 The books are in care of JAY R DE MIRANDA Telephone no (310) 377-1199

Located at PO BOX 2127 PALOS VERDES PEN CA ZIP+4 90274

15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here and enter the amount of tax-exempt interest received or accrued during the year 15

Table with 3 columns: Question, Yes, No. Row 16 regarding interest in foreign countries.

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.

Main table with 3 columns: Question, Yes, No. Rows 1a-4b regarding Form 4720 exceptions and requirements.



**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. . . . . ▶

**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			<b>(e) Total</b>
	<b>(a) 2018</b>	<b>(b) 2017</b>	<b>(c) 2016</b>	<b>(d) 2015</b>	
<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 . . . . .					
<b>b</b> 85% of line 2a . . . . .					
<b>c</b> Qualifying distributions from Part XII, line 4 for each year listed . . . . .					
<b>d</b> Amounts included in line 2c not used directly for active conduct of exempt activities . . . . .					
<b>e</b> Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c . . . . .					
<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 . . . . .					
<b>(2)</b> Value of assets qualifying under section 4942(j)(3)(B)(i)					
<b>b</b> "Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed. . . . .					
<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) . . . . .					
<b>(2)</b> Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii). . . . .					
<b>(3)</b> Largest amount of support from an exempt organization					
<b>(4)</b> Gross investment income					

**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) )  
 JAY R DE MIRANDA

**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 email address of the person to whom applications should be addressed

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

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**c** Any submission deadlines

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

**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>

**Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d**

(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)
1 5,772 715 AQR FDS LONG-SHORT EQUITY FD	P	2018-04-03	2018-12-17
1 2,326 838 AB HIGH INCOME FD INC	P	2018-04-03	2018-12-17
1,589 84 ARBITRAGE FD CL I	P	2018-04-03	2018-08-13
4,670 183 AMERICAN FUNDS THE BOND FUND OF AMERICA	P	2018-04-03	2018-12-17
1,116 126 DWS RREEF REAL ESTATE SECURITIES FUND IN	P	2018-04-03	2018-08-13
7,538 808 DOUBLELINE FDS TR TOTAL RETURN BD FD CL	P	2018-04-03	2018-12-17
209 104 FEDERATED TOTAL RETURN SERS INC ULTRASHO	P	2018-04-03	2018-12-17
97 FIRST TR FUND IV ETF SENIOR LOAN FUND	P	2018-04-03	2018-12-17
339 969 GATEWAY FUND GATEWAY FUND CL Y	P	2018-04-03	2018-12-17
320 GOLDMAN SACHS TR SMALL CP EQUITY INSIGHT	P	2018-04-03	2018-08-13

**Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h**

(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)
66,790		79,532	-12,742
19,406		19,962	-556
20,716		20,811	-95
58,331		58,822	-491
22,118		21,152	966
78,253		78,824	-571
1,892		1,901	-9
4,507		4,666	-159
10,828		10,991	-163
9,382		8,410	972

**Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l**

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	
			-12,742
			-556
			-95
			-491
			966
			-571
			-9
			-159
			-163
			972

**Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d**

(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)
66 985 GOLDMAN SACHS TRUST ABSOLUTE RETURN TRAC	P	2018-04-03	2018-08-13
1 1,241 46 AMERICAN FUNDS GROWTH FUND OF AMERICA CL	P	2018-04-03	2018-12-17
3,610 625 GUGGENHEIM FDS TR TOTAL RETURN BD FD	P	2018-04-03	2018-08-13
5,236 59 OAKMARK INTERNATIONAL FUND ADVISOR CLASS	P	2018-04-03	2018-12-17
936 ISHARES CORE U S ETF AGGREGATE BOND	P	2017-05-12	2018-04-03
884 ISHARES IBOX & ETF INVESTMENT GRADE COR	P	2017-05-12	2018-04-03
1,046 ISHARES RUSSELL ETF MIDCAP	P	2017-05-12	2018-04-03
402 ISHARES ETF RESSELL 2000	P	2017-05-12	2018-04-03
2,142 ISHARES MSCI ACWI ETF	P	2017-05-12	2018-04-03
1,210 ISHARES IBOX \$ ETF HIGH YIELD CORP BOND	P	2017-05-12	2018-04-03

**Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h**

(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)
654		638	16
60,298		62,433	-2,135
96,945		97,196	-251
107,193		143,805	-36,612
99,936		101,963	-2,027
103,217		105,192	-1,975
212,076		197,133	14,943
60,210		55,352	4,858
151,122		139,154	11,968
102,938		106,465	-3,527

**Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l**

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	
			16
			-2,135
			-251
			-36,612
			-2,027
			-1,975
			14,943
			4,858
			11,968
			-3,527

**Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d**

(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)
1 989 ISHARES ETF U S PREFERRED STOCK	P	2017-05-12	2018-04-03
1 2,362 992 JOHN HANCOCK FUNDS II ABSOLUTE RETURN CU	P	2018-04-03	2018-12-17
5,734 201 MFS CORPORATE BOND FD CL I	P	2018-04-03	2018-08-13
3,171 473 NATIXIS FDS TR II ASG MANAGED FUTURES	P	2018-04-03	2018-08-13
389 POWERSHARES EM MAR ETF	P	2017-05-12	2018-04-03
672 POWERSHARES EXCHANGE ETF TRADED FUND TRU	P	2017-05-12	2018-04-03
16 SPDR S&P 500 TRUST ETF	P	2018-04-03	2018-08-13
3,173 SELECT SECTOR SPDR ETF TR REAL ESTATE SE	P	2017-05-12	2018-04-03
2,254 27 VAN ECK FUNDS EMERGING MARKETS FUND	P	2018-04-03	2018-08-13
788 VANECK VECTORS ETF TRCHG JP MORGAN EMERG	P	2018-04-03	2018-08-13

**Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h**

(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)
73,937		77,290	-3,353
21,740		22,052	-312
76,715		78,197	-1,482
29,284		31,585	-2,301
10,974		11,463	-489
20,156		19,827	329
4,513		4,138	375
97,736		99,538	-1,802
36,587		42,696	-6,109
12,855		15,227	-2,372

**Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l**

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	
			-3,353
			-312
			-1,482
			-2,301
			-489
			329
			375
			-1,802
			-6,109
			-2,372

**Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d**

List and describe the kind(s) of property sold (e.g., real estate, (a) 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)
596 5 VANECK VECTORS ETF TR JP MORGAN EMERGING	P	2018-10-26	2018-12-17
1 1,010 747 VANGUARD WINDSOR FD WINDSOR FD ADMIRAL S	P	2018-04-03	2018-08-13
2,693 VANGUARD INTL EQUITY ETF INDEX FDS FTSE	P	2017-05-12	2018-04-03
2,278 VANGUARD INDEX FDS ETF S&P 500 ETF SHS N	P	2017-05-12	2018-04-03
962 7 FIDELITY INVESTMENTS MONEY MARKET FD INS	P	2018-04-03	2018-12-17
1,103 FIRST TR FUND IV ETF SENIOR LOAN FUND	P	2017-05-12	2018-08-13
2,047 INVESCO TR II ETF EMERGING MKTS SOVEREIG	P	2017-05-12	2018-08-13
732 INVESCO TR II ETF TAXABLE MUN BD	P	2017-05-12	2018-12-17
681 ISHARES CORE U S ETF AGGREGATE BOND	P	2017-05-12	2018-08-13
592 ISHARES ETF RUSSELL 2000	P	2017-05-12	2018-08-13

**Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h**

(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)
19,464		22,941	-3,477
71,362		78,713	-7,351
125,179		110,109	15,070
541,147		499,546	41,601
963		963	
51,887		53,548	-1,661
54,307		60,350	-6,043
21,491		21,598	-107
72,372		74,175	-1,803
84,736		81,580	3,156

**Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l**

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	
			-3,477
			-7,351
			15,070
			41,601
			-1,661
			-6,043
			-107
			-1,803
			3,156

**Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d**

List and describe the kind(s) of property sold (e g , real estate, <b>(a)</b> 2-story brick warehouse, or common stock, 200 shs MLC Co )	<b>(b)</b> How acquired P—Purchase D—Donation	<b>(c)</b> Date acquired (mo , day, yr )	<b>(d)</b> Date sold (mo , day, yr )
838 47 SWAN FUNDS SWAN DEFINED RISK FD	P	2017-05-12	2018-12-17
1 54 SPDR GOLD TRUST ETF	P	2017-05-12	2018-08-13
95 VANGUARD TOTAL INTL ETF BOND	P	2017-05-12	2018-12-17

**Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h**

<b>(e)</b> Gross sales price	<b>(f)</b> Depreciation allowed (or allowable)	<b>(g)</b> Cost or other basis plus expense of sale	<b>(h)</b> Gain or (loss) (e) plus (f) minus (g)
10,171		10,179	-8
6,102		6,295	-193
5,232		5,162	70

**Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l**

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			<b>(l)</b> Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
<b>(i)</b> F M V as of 12/31/69	<b>(j)</b> Adjusted basis as of 12/31/69	<b>(k)</b> Excess of col (i) over col (j), if any	
			-8
			-193
			70

**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>				
EL NIDO FAMILY CENTERS 440 SHATTO PL 417 LOS ANGELES, CA 90020	NONE	PC	unrestricted	36,560
UGANDA AIDS ORPHAN CHILDRENS FOUNDA PO BOX 64485 11534 GATEWAY BLVD LOS ANGELES, CA 90064	NONE	PC	unrestricted	98,400
UNATTI FOUNDATION 824 17TH STREET 1 SANTA MONICA, CA 90403	NONE	PC	unrestricted	29,960
<b>Total . . . . .</b> ▶ <b>3a</b>				428,000

**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>				
PROMISE CHILDPO BOX 368 SAGLE, ID 83860	NONE	PC	unrestricted	29,960
SOUTH BAY CHILDREN'S HEALTH CENTER 410 S CAMINO REAL REDONDO BEACH, CA 90277	NONE	PC	unrestricted	34,240
CROWN JEWEL CLUB531 MAIN ST EL SEGUNDO, CA 90245	NONE	PC	unrestricted	17,120
<b>Total . . . . .</b> ▶ <b>3a</b>				428,000

**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>				
TOBERMAN NEIGHBORHOOD CENTER 131 N GRAND AVE SAN PEDRO, CA 90731	NONE	PC	unrestricted	25,000
HARMONY PROJECT 817 VINE STREET SUITE 212 LOS ANGELES, CA 90038	NONE	PC	unrestricted	29,960
MILES JESUPO BOX 267989 CHICAGO, IL 60626	NONE	PC	unrestricted	9,000
<b>Total . . . . .</b>				428,000

**▶ 3a**

**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>				
NEIGHBORHOOD YOUTH ACHIEVERS 1501 E 103RD STREET LOS ANGELES, CA 90002	NONE	PC	unrestricted	25,680
NARETOI FORMERLY BCI 2920 THATCHER AVENUE MARINA DEL REY, CA 90201	NONE	PC	unrestricted	17,120
PEDIATRIC THERAPY NETWORK 1815 W 213TH ST STE 100 TORRANCE, CA 90804	NONE	PC	UNRESTRICTED	15,000
<b>Total . . . . .</b> ▶ <b>3a</b>				428,000

**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>				
EL NIDO SCHOLARSHIP FUND 440 SHATTO PL 417 LOS ANGELES, CA 90020	NONE	PC	UNRESTRICTED	50,000
STBERNADETTE CHILDREN'S MISSION TO 26600 LIGHTFOOT PLACE RANCHO PALOS VERDES, CA 90275	NONE	PC	UNRESTRICTED	10,000
<b>Total . . . . .</b> ▶ <b>3a</b>				428,000

**TY 2018 Accounting Fees Schedule****Name:** DE MIRANDA FOUNDATION INC**EIN:** 95-4855401**Software ID:** 18007218**Software Version:** 2018v3.1

<b>Category</b>	<b>Amount</b>	<b>Net Investment Income</b>	<b>Adjusted Net Income</b>	<b>Disbursements for Charitable Purposes</b>
ACCOUNTING FEES	1,785	0	0	1,785

**TY 2018 Other Expenses Schedule****Name:** DE MIRANDA FOUNDATION INC**EIN:** 95-4855401**Software ID:** 18007218**Software Version:** 2018v3.1**Other Expenses Schedule**

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ADMINISTRATIVE EXPENSES	8,015			8,015

**TY 2018 Other Professional Fees Schedule****Name:** DE MIRANDA FOUNDATION INC**EIN:** 95-4855401**Software ID:** 18007218**Software Version:** 2018v3.1

<b>Category</b>	<b>Amount</b>	<b>Net Investment Income</b>	<b>Adjusted Net Income</b>	<b>Disbursements for Charitable Purposes</b>
WELLS FARGO MANAGEMENT FEE	10,322	10,322	0	0

**TY 2018 Taxes Schedule****Name:** DE MIRANDA FOUNDATION INC**EIN:** 95-4855401**Software ID:** 18007218**Software Version:** 2018v3.1

<b>Category</b>	<b>Amount</b>	<b>Net Investment Income</b>	<b>Adjusted Net Income</b>	<b>Disbursements for Charitable Purposes</b>
EXCISE TAXES	7,815	7,815		
FOREIGN TAXES	2,447	2,447		

**Schedule B**  
(Form 990, 990-EZ,  
or 990-PF)  
Department of the Treasury  
Internal Revenue Service

**Schedule of Contributors**  
▶ Attach to Form 990, 990-EZ, or 990-PF  
▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information

OMB No 1545-0047  
**2018**

**Name of the organization**  
DE MIRANDA FOUNDATION INC

**Employer identification number**  
95-4855401

**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 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> 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 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> DE MIRANDA FOUNDATION INC	<b>Employer identification number</b> 95-4855401
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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	JAY DE MIRANDA PO BOX 2127  PALOS VERDES PEN, CA 90274	\$ 350,300	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> <small>(Complete Part II for noncash contributions )</small>
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> <small>(Complete Part II for noncash contributions )</small>
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> <small>(Complete Part II for noncash contributions )</small>
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> <small>(Complete Part II for noncash contributions )</small>
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> <small>(Complete Part II for noncash contributions )</small>
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> <small>(Complete Part II for noncash contributions )</small>
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> <small>(Complete Part II for noncash contributions )</small>
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> <small>(Complete Part II for noncash contributions )</small>



<b>Name of organization</b> DE MIRANDA FOUNDATION INC	<b>Employer identification number</b> 95-4855401
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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.) ▶ \$ \_\_\_\_\_  
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
	<hr/> <hr/>	<hr/> <hr/>	<hr/> <hr/>

<hr/> <hr/>	(e) Transfer of gift
Transferee's name, address, and ZIP 4	Relationship of transferor to transferee
<hr/> <hr/>	<hr/> <hr/>

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	<hr/> <hr/>	<hr/> <hr/>	<hr/> <hr/>

<hr/> <hr/>	(e) Transfer of gift
Transferee's name, address, and ZIP 4	Relationship of transferor to transferee
<hr/> <hr/>	<hr/> <hr/>

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	<hr/> <hr/>	<hr/> <hr/>	<hr/> <hr/>

<hr/> <hr/>	(e) Transfer of gift
Transferee's name, address, and ZIP 4	Relationship of transferor to transferee
<hr/> <hr/>	<hr/> <hr/>

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	<hr/> <hr/>	<hr/> <hr/>	<hr/> <hr/>

<hr/> <hr/>	(e) Transfer of gift
Transferee's name, address, and ZIP 4	Relationship of transferor to transferee
<hr/> <hr/>	<hr/> <hr/>