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## Form 990-PF

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

OMB No 1545-0052

2009

Department of the Treasury Internal Revenue Service Note: The foundation may be able to use a copy of this return to satisfy state reporting requirements For calendar year 2009, or tax year beginning . 2009, and ending G Check all that apply Initial return Initial Return of a former public charity Final return Amended return Address change Name change Employer identification number Use the The Bryan and Amy Lewis Family IRS label. 20-2897316 Otherwise, Foundation, Inc. Telephone number (see the instructions) print 1100 Spring Street NW #550 404-876-5511 or type. Atlanta, GÁ 30309 See Specific If exemption application is pending, check here Instructions. **D** 1 Foreign organizations, check here X Section 501(c)(3) exempt private foundation 2 Foreign organizations meeting the 85% test, check Check type of organization: here and attach computation Section 4947(a)(1) nonexempt charitable trust | Other taxable private foundation If private foundation status was terminated Fair market value of all assets at end of year Accounting method X Cash under section 507(b)(1)(A), check here (from Part II, column (c), line 16) Other (specify) If the foundation is in a 60-month termination under section 507(b)(1)(B), check here (Part I, column (d) must be on cash basis.) 1,796. Part | Analysis of Revenue and (d) Disbursements (a) Revenue and (b) Net investment (c) Adjusted net Expenses (The total of amounts in expenses per books for charitable income income columns (b), (c), and (d) may not neces-sarily equal the amounts in column (a) purposes (cash basis only) (see the instructions) ) Contributions, gifts, grants, etc, received (att sch) 18,000 if the foundn is not req to att Sch B Interest on savings and temporary cash investments Dividends and interest from securities 5a Gross rents. b Net rental income or (loss) REVERU 6a Net gain/(loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a 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 0 c Gross profit/(loss) (att sch) 11 Other income (attach schedule) See Statement 1 33 33 12 Total. Add lines 1 through 11 ,033 0 <u>33</u> 13 Compensation of officers, directors, trustees, etc. 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees (attach schedule). Accounting fees (attach sch)-Other prof fees (attach sch) S OPERATING 17 Interest Tank Jatuch supadyeXsed Inff) 2010 Depreciation (attach schip) and depletion 18 19 ¥ Obcubancy Travel, contenences, and meetings 21 22 Printing and publications 23 Other expenses (attach schedule) See Statement 2 10 10. 24 Total operating and administrative expenses. Add lines 13 through 23 10 25 Contributions, gifts, grants paid Part XV 16,712 16.712 Total expenses and disbursements. 16,722 Add lines 24 and 25 10 16,712 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements 1,311 0 b Net investment income (if negative, enter -0-) C Adjusted net income (if negative, enter -0-)

4

5

Add lines 1, 2, and 3

Decreases not included in line 2 (itemize)

Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30

<u>4</u>

6

1,796.

1,796.

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Part VI instructions

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

Form	990-PF (2009) The Bryan and Amy Lewis Family 20-2897316				Pa	age 4	
Part	Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 – see the instruction						
1 a	Exempt operating foundations described in section 4940(d)(2), check here and enter 'N/A' on line 1.	ŀ					
	Date of ruling or determination letter: (attach copy of letter if necessary - see instr.)						
	Domestic foundations that meet the section 4940(e) requirements in Part V,		1			0.	
	check here  and enter 1% of Part I, line 27b		' `	رد د ۱	يا. مين وو	:	
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, column (b)							
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable		_		<u> </u>		
	foundations only. Others enter -0-)	<b>-</b>	2			0.	
_	Add lines 1 and 2	<u>.</u> . ⊢	3			0.	
	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter	·0-)  -	4			0.	
	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-	⊢	5	(14 Jun 21) C		0.	
	Credits/Payments 2009 overpayment credited to 2009 6a	i	رعب دران			V.e.	
	2009 estimated tax pmts and 2008 overpayment credited to 2009  Exempt foreign organizations — tax withheld at source  6b					1 m	
	Tax paid with application for extension of time to file (Form 8868)  6c					14 1	
	Backup withholding erroneously withheld  6d		193				
	Total credits and payments Add lines 6a through 6d		7		<del></del> -	0.	
	Enter any <b>penalty</b> for underpayment of estimated tax. Check here  if Form 2220 is attached	<u> </u>	8			<del></del>	
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	▶	9			0.	
	Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	▶ ~	10				
11	Enter the amount of line 10 to be: Credited to 2010 estimated tax.	_	11				
Part	VIFA Statements Regarding Activities		*				
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or di	d it			Yes	No	
	participate or intervene in any political campaign?	u ii		1 a		Х	
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes				ŀ		
_	(see the instructions for definition)?			1b		X	
If the answer is 'Yes' to 1a or 1b, attach a detailed description of the activities and copies of any materials published						5-1	
or distributed by the foundation in connection with the activities						ئــــــــــــــــــــــــــــــــــــــ	
c Did the foundation file Form 1120-POL for this year?						<u>X</u>	
a	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year  (1) On the foundation   (2) On foundation   (3)   (4)   (5)   (6)   (7)   (8)   (9)   (9)   (1)   (1)   (1)   (2)   (3)   (4)   (5)   (6)   (7)   (8)   (9)   (		0.			1 de 1	
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax im	posed o			4.4	(), (v	
	foundation managers • \$ 0.						
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?			2		<u> </u>	
	If 'Yes,' attach a detailed description of the activities			43	- C		
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 change	ges		3		<u>X</u>	
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			4a	37	<u>X</u>	
	If 'Yes,' has it filed a tax return on <b>Form 990-T</b> for this year?			4b	N	V A	
Ð	Was there a liquidation, termination, dissolution, or substantial contraction during the year?  If 'Yes,' attach the statement required by General Instruction T			-	ور الراق	X	
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either						
·	By language in the governing instrument, or			1745			
				1	10 m	<b>K</b>	
	<ul> <li>By state legislation that effectively amends the governing instrument so that no mandatory directions with the state law remain in the governing instrument?</li> </ul>	that coi	nflict	6	Х		
7	7 Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, column (c), and Part XV						
	Enter the states to which the foundation reports or with which it is registered (see the instructions)	<b>&gt;</b>		- 6	A 77	. ','	
	N/A			*		r v	
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? If 'No,' attach explanation</i>			8ь	Х		
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942 (for calendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If 'Yes,' or	j)(3) or a	4942(j)(5)	9		X	
10	Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing						
	and addresses.	aren 11e		10		X	
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Par	rt VII-A Statements Regarding Activities Continued					
11	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)			11		<u> </u>
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008?			12		х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption Website address  N/A	n applica	tion?	13	X	
14	The books are in care of ► Bryan Lewis Telephone	e no ►	404-8	76-5	511	
	Located at > 1100 Spring Street Suite 550 Atlanta Ga ZIP + 4 >					
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here			N/A		
	and enter the amount of tax-exempt interest received or accrued during the year	<b>&gt;</b>	15			N/A
Pai	rt VI+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.			-	Yes	No
1	a During the year did the foundation (either directly or indirectly)		[ <del></del> ]			i e
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	Yes	X No	21		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	Yes	X No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	Yes	X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	Yes	X No		3	
	(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)?	Yes	X No			
	(6) Agree to pay money or property to a government official? (Exception. 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 )	Yes	XNo			
	<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 the instruction	ons)?	_	1 b	N	/A
	Organizations relying on a current notice regarding disaster assistance check here	•	` []			and .
	c 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 2009?	,		1c		X
2	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))					
	a At the end of tax year 2009, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2009?	Yes	X No			
	If 'Yes,' list the years > 20 , 20 , 20	☐ 163	MINO	200		
					3	E 12 1
	b Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942 (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942)	2(a)(2) (a)(2) to				**.
	all years listed, answer 'No' and attach statement — see the instructions )	(-)(-)		2b	N	/A
	c If the provisions of section 4942(a)(2) are being applied to $any$ of the years listed in 2a, list the years	here		7 2		
	► 20 , 20 , 20 , 20			2.3	4	
3	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	Yes	X No			
	b if 'Yes,' did it have excess business holdings in 2009 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 approve	ı ed		1		
	or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approving 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 2009).			3b	N	/A
4	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?			4a		x

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 2009?

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Part VII-B   Statements Regarding Activiti		1 4720 May Be Requ	uired (continued)	
5a During the year did the foundation pay or incu				
(1) Carry on propaganda, or otherwise attemp	•		Yes X	No
(2) Influence the outcome of any specific pub on, directly or indirectly, any voter registra	ation drive?		— ⊢ −	No
(3) Provide a grant to an individual for travel,	study, or other similar	purposes?	∐ Yes X	No
(4) Provide a grant to an organization other the in section 509(a)(1), (2), or (3), or section	nan a charitable, etc, o 4940(d)(2)? (see instri	rganization described uctions)	Yes X	No
(5) Provide for any purpose other than religion educational purposes, or for the prevention	us, charitable, scientific n of cruelty to children	c, literary, or or animals?	Yes X	No
<b>b</b> If any answer is 'Yes' to 5a(1)-(5), did <b>any</b> of described in Regulations section 53 4945 or in (see instructions)?	the transactions fail to a current notice regard	qualify under the except ding disaster assistance	tions	5b N/A
Organizations relying on a current notice rega	rding disaster assistani	ce check here	▶ []	
c If the answer is 'Yes' to question 5a(4), does to tax because it maintained expenditure responsible. If 'Yes,' attach the statement required by Region 1.	sibility for the grant?	•	N/A Yes	No
6a Did the foundation, during the year, receive ar on a personal benefit contract?	ny funds, directly or ind	lirectly, to pay premiums	Yes X	No
<b>b</b> Did the foundation, during the year, pay prem If 'Yes' to 6b, file Form 8870	iums, directly or indired	etly, on a personal bene		6b X
7a At any time during the tax year, was the found	dation a party to a prof	iibited tax shelter transa	ction? Yes X	No
<b>b</b> If yes, did the foundation receive any proceed	s or have any net incor	me attributable to the tra	ansaction?	76 N/A
Part VIII Information About Officers, D	irectors, Trustees,	Foundation Manag	gers, Highly Paid E	mployees,
and Contractors	m managana and their			
1 List all officers, directors, trustees, foundation				T
(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
Bryan R. Lewis	Foundation M	0.	0.	0
1100 Spring Street NW Atlanta, GA 30309	1.00			
Amy G. Lewis	Foundation M	0.	0.	0
1100 Spring Street SW	1.00	0.	U.	0
Atlanta, GA 30309				
		·		
2 Compensation of five highest-paid employee	s (other than those in	luded on line 1— see in	estructions) If none e	nter 'NONE '
(a) Name and address of each employee	(b) Title and average	(c) Compensation	(d) Contributions to	(e) Expense account,
paid more than \$50,000	hours per week devoted to position	(c) compensation	employee benefit plans and deferred compensation	other allowances
None				
Total number of other employees and ever 650 000			L	ļ <u></u>
Total number of other employees paid over \$50,000	U TEEA03061	07/06/00		Form <b>990-PF</b> (2009

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Information About Officers, Directors, Trustees, Foun and Contractors (continued)	dation Managers, Highly Paid I	Employees,
3 Five highest-paid independent contractors for professional services — (see enter 'NONE.'	e instructions). If none,	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
None		
Fotal number of others receiving over \$50,000 for professional services.		0
		0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistic organizations and other beneficiaries served, conferences convened, research papers produced, etc.	al information such as the number of	Expenses
1 N/A	<del> </del>	
1 11/1		-
		-
2	- <del> </del>	_
		-
3		-
		-
4		
		-
Part IX-B Summary of Program-Related Investments (see instru	uctions)	
Describe the two largest program-related investments made by the foundation di	uring the tax year on lines 1 and 2.	Amount
1 <u>N/A</u>		-
2		-
All other program-related investments. See instructions		_
		i

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Total. Add lines 1 through 3

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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 1 a 7,900 1 b **b** Average of monthly cash balances 1 c c Fair market value of all other assets (see instructions) 7,900 d Total (add lines 1a, b, and c) 1 d e Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation) 0. 1e 0. 2 Acquisition indebtedness applicable to line 1 assets 7,900. 3 3 Subtract line 2 from line 1d Cash deemed held for charitable activities Enter 1-1/2% of line 3 119. (for greater amount, see instructions) 5 7,781. Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4 389. 6 Minimum investment return. Enter 5% of line 5 Part Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and do not complete this part.) and certain foreign organizations check here 1 389. Minimum investment return from Part X, line 6 2a Tax on investment income for 2009 from Part VI. line 5 2a 1,3 2b b Income tax for 2009 (This does not include the tax from Part VI) c Add lines 2a and 2b 2 c 3 389. 3 Distributable amount before adjustments Subtract line 2c from line 1 4 4 Recoveries of amounts treated as qualifying distributions 389. 5 Add lines 3 and 4 6 Deduction from distributable amount (see instructions) 6 7 389 Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1 Part XII | Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc, purposes a Expenses, contributions, gifts, etc - total from Part I, column (d), line 26 16,712. 1 a **b** Program-related investments - total from Part IX-B 1 b 2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc, purposes 2 Amounts set aside for specific charitable projects that satisfy the a Suitability test (prior IRS approval required) 3a 3ь **b** Cash distribution test (attach the required schedule) Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4 4 16,712 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 16,712. 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

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## Part XIII Undistributed Income (see instructions)

	<b>(a)</b> Corpus	(b) Years prior to 2008	<b>(c)</b> 2008	<b>(d)</b> 2009
1 Distributable amount for 2009 from Part XI, line 7			the security of the second	389.
2 Undistributed income, if any, as of the end of 2009				309.
a Enter amount for 2008 only		AND THE PARTY OF T	0.	
<b>b</b> Total for prior years 20, 20, 20		0.		
3 Excess distributions carryover, if any, to 2009:				
a From 2004				
b From 2005 11,784. c From 2006 14,597				
c From 2006 14, 597. d From 2007 17, 729.				
e From 2008 17,550.				
f Total of lines 3a through e	61,660.			
4 Qualifying distributions for 2009 from Part				
XII, line 4 ► \$16,712.				
a Applied to 2008, but not more than line 2a		Alexandra de la fille	0.	
<b>b</b> Applied to undistributed income of prior years (Election required — see instructions)		0.		
<ul> <li>Treated as distributions out of corpus (Election required — see instructions).</li> </ul>	0.			
<b>d</b> Applied to 2009 distributable amount				389.
e Remaining amount distributed out of corpus	16,323.			
5 Excess distributions carryover applied to 2009 (If an amount appears in column (d), the	0.			0.
same amount must be shown in column (a) )			Tring to the state of the	
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	77,983.			
<b>b</b> Prior years' undistributed income Subtract line 4b from line 2b		0.		
c Enter the amount of prior years' undistribut-				AND THE REST OF
ed income for which a notice of deficiency has been issued, or on which the section				
4942(a) tax has been previously assessed		0.		
<ul> <li>d Subtract line 6c from line 6b Taxable amount – see instructions</li> </ul>		0.		
e Undistributed income for 2008 Subtract line 4a from				
line 2a. Taxable amount — see instructions.			0.	CALLES STANDARD CALCOLO
f Undistributed income for 2009 Subtract lines		25 B Sec. 32.		
4d and 5 from line 1. This amount must be distributed in 2010.				0
7 Amounts treated as distributions out of				0.
corpus to satisfy requirements imposed				
by section 170(b)(1)(F) or 4942(g)(3) (see instructions)	0.			
8 Excess distributions carryover from 2004 not	-			
applied on line 5 or line 7 (see instructions)	0.			
9 Excess distributions carryover to 2010. Subtract lines 7 and 8 from line 6a	77,983.			
10 Analysis of line 9				
a Excess from 2005 11,784.				
b Excess from 2006 14,597.				
c Excess from 2007 17,729.				
<b>d</b> Excess from 2008 17,550. <b>e</b> Excess from 2009 16,323.				
LACESS HOITI 2003 10, 323.	1	The Execution of the Control	Like A. C. Odran Jan Proplace	THE THE PARTY OF THE PARTY OF

Form 990-PF (2009) The Bryan and Amy				20-2897316	
Part XIV   Private Operating Foundation					N/A
1a If the foundation has received a ruling or one is effective for 2009, enter the date of the	ruling		-		
<b>b</b> Check box to indicate whether the foundat		erating foundation o		4942(j)(3) or	4942(j)(5)
2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed	Tax year (a) 2009	<b>(b)</b> 2008	(c) 2007	(d) 2006	(e) Total
b 85% of line 2a			<u> </u>		
c Qualifying distributions from Part XII, line 4 for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
<ul> <li>Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c</li> </ul>					
3 Complete 3a, b, or c for the alternative test relied upon					
a 'Assets' alternative test — enter					
<ul><li>(1) Value of all assets</li><li>(2) Value of assets qualifying under section 4942(j)(3)(B)(i).</li></ul>					
b 'Endowment' alternative test — enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c 'Support' alternative test – enter					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided 'in section 4942(j)(3)(B)(III)					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income		<u> </u>		<u> </u>	
Part XV Supplementary Information	(Complete this	part only if the	e organization h	ad \$5,000 or mor	e in
assets at any time during th  1 Information Regarding Foundation Mana		istructions.)		<del></del>	
a List any managers of the foundation who close of any tax year (but only if they hav None	have contributed m	nore than 2% of the than \$5,000) (See	e total contributions e section 507(d)(2))	received by the found	dation before the
<b>b</b> List any managers of the foundation who a partnership or other entity) of which the None	own 10% or more of foundation has a	of the stock of a co 10% or greater inte	rporation (or an equ rest	ally large portion of	the ownership of
2 Information Regarding Contribution, Gra Check here  if the foundation only requests for funds. If the foundation make complete items 2a, b, c, and d	makes contributions es gifts, grants, etc	s to preselected ch , (see instructions)	arıtable organizatior to individuals or orç	janizations under oth	•
a The name, address, and telephone number	er of the person to	whom applications	should be addresse	ed	
See Statement 3					
<b>b</b> The form in which applications should be	submitted and info	rmation and mater	ials they should incl	ude	-
See Statement for Line 2a		<del></del>	·-		
c Any submission deadlines					
See Statement for Line 2a					
d Any restrictions or limitations on awards,	such as by geogra	phical areas, charit	able fields, kinds of	institutions, or other	factors
See Statement for Line 2a					
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Recipient sindividual show any relationship of any foundation sanger or substantial contribution.  Name and address (home or business) a Paid during the year  See Statement 4  If recipient is an individual, show any relationship of any foundation manager or substantial contribution.  Purpose of grant or contribution.  Amount	3 Grants and Contributions Paid During the Y	ear or Approved for Fut	ure Paymen	t	
a Paid during the year See Statement 4  Total ▶ 3a 16,7	Recipient	If recipient is an individual, show any relationship to any foundation manager or	Foundation status of	Purpose of grant or contribution	Amount
See Statement 4    Total		substantial contributor	recipient	ob Mind and	
	a Paid during the year	substantial contributor	recipient		
b Approved for future payment		1	1	<u> </u>	a 16,712.
Total ► 3b					h

Part XVI-A Analysis of Income-Producing Activitie
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nter gross amounts unless otherwise indicated	Unrelated I	ousiness income	Excluded by	section 512, 513, or 514	
	(a) Business code	<b>(b)</b> Amount	(c) Exclu- sion	<b>(d)</b> Amount	(e) Related or exempt function income
1 Program service revenue.			code		(see the instructions
a					
b					
c					
d					
e					
f					
g Fees and contracts from government agencies				·	
2 Membership dues and assessments.					
3 Interest on savings and temporary cash investments					<u></u>
4 Dividends and interest from securities					
5 Net rental income or (loss) from real estate					
a Debt-financed property					
b Not debt-financed property		•			
6 Net rental income or (loss) from personal property					
7 Other investment income.					
8 Gain or (loss) from sales of assets other than inventory		•			
9 Net income or (loss) from special events					
Oross profit or (loss) from sales of inventory		•			
11 Other revenue			-		
a Bank charge reversals				33.	
b					
С	1 1 -				
d					
e					
Subtotal Add columns (b), (d), and (e)				33.	
13 Total. Add line 12, columns (b), (d), and (e)	<u> </u>		***************************************	13	3
See worksheet in the instructions for line 13 to verify	calculations )			-	

Line No. ▼	accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) (See the instructions)
N/A	
<del></del>	

## Form 990-PF (2009) The Bryan and Amy Lewis Family 20-2897316 Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

		···		-						1	
	descri	e organization directly bed in section 501(c) ng to political organiza	of the Code (of	ngage in any of the foll ther than section 501(c	lowing with )(3) organi	n any otl zations)	her organization or in section 5	า 327,		Yes	No
	a Trans	fers from the reporting	foundation to	a noncharitable exemp	t organiza	tion of			- 2 3		L
	<b>(1)</b> Ca	ash			-				1a(1)		X
	<b>(2)</b> O	ther assets							1a (2)		X
	<b>b</b> Other	transactions:									
	<b>(1)</b> Sa	ales of assets to a nor	ncharitable exe	mpt organization					1b(1)		X
	<b>(2)</b> Pi	urchases of assets fro	m a noncharita	ble exempt organization	n				1b(2)		X
	<b>(3)</b> R	ental of facilities, equi	pment, or othe	r assets					1 b (3)		X
	(4) R	eimbursement arrange	ements						1b (4)		X
	<b>(5)</b> Lo	oans or loan guarantee	es						1b (5)		X
	<b>(6)</b> Po	erformance of services	s or membersh	ip or fundraising solicit	ations				1b (6)		X
	c Sharır	ng of facilities, equipm	ent, mailing lis	sts, other assets, or pai	d employe	es			1c		X
	the ac	oods, other assets, or	services given	complete the following by the reporting founda how in column (d) the v	ation If the	e founda	ation received k	ess than fair m	arket value in	ue of	
(ä	) Line no	(b) Amount involved		of noncharitable exempt organ			Description of trans			ngement	ts
_	/A	, ,	1				<del></del>	· ,			
_											
		_								-	
_											
									_		
_											
	2a Is the descr	foundation directly or ibed in section 501(c)	indirectly affili of the Code (o	ated with, or related to ther than section 501(c	, one or m :)(3)) or in	ore tax- section	exempt organiz 527?	zations	Yes	s X	No
	<b>b</b> If 'Yes	s,' complete the follow	ing schedule								
		(a) Name of organizat	ion	<b>(b)</b> Type of org	ganization		(c	<b>)</b> Description o	f relationship		
N	/A										
_			<del></del>	<u> </u>							
	Under pena complete [	alties of perjury, I declare that Declaration of preparer (other	I have examined the than taxpayer or fide	is return, including accompany luciary) is based on all informa	ring schedules ition of which	and stater preparer h	ments, and to the be as any knowledge	st of my knowledge	and belief, it is tru	e, correc	et, and
President						ont					
•	Signature of office or trustee Date Title				EIIC						
					Preparer's Identific	ייוים חוויים	 1ber				
1	Paid	Preparer's signature	() Poll 1	110				Check if self-	Preparer's Identify (See Signature in		rs)
1	Pre-	2	with the	<u> </u>			/25/10	employed P	257-76-42	237	
-	parer's Use	Firm's name (or Bach		Mansour & Comp				EIN ► 58-	1274339		
	Only	employed), 3885		d Parkway, NW 096-5002	Suite :	590		_	670 FF1 1	01.4	
_		ZIP code Dulu	ICII, GA 30	2002				Phone no	678-551-1		<del>/00000:</del>
<b>5</b> ,	AA								Form <b>9</b> 9	W-PF	(2009)

## 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

OMB No 1545-0047

2009

The Bryan and A	Amy Lewis Family	Employer Identification number
Foundation, Inc	2.	20-2897316
Organization type (check one):		
Filers of:	Section:	
Form 990 or 990-EZ	501(c)( ) (enter number) organization	un.
	4947(a)(1) nonexempt charitable trust <b>not</b>	treated as a private foundation
	527 political organization	
	— Lawrence anglement	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust trea	ated as a private foundation
	501(c)(3) taxable private foundation	nod do a privato rodridation
Check if your organization is covered by the <b>Note</b> : Only a section 501(c)(7), (8), or (10)	e General Rule or a Special Rule organization can check boxes for both the General	Rule and a Special Rule. See instructions
	ergamentori dari diletti boxed let betti tilo delletar	That are a openial train occ matractions
General Rule -		
<u></u>	0-EZ, or 990-PF that received, during the year, \$5,0	000 or more (in money or property) from any one
contributor (Complete Parts I and II)	, 0. 0.00	rec or more (in mensy or property) from any one
Special Rules —		
	na Form 000 or 000 E7, that mot the 22 1/20/ area	and took of the rescaled one condenses the
509(a)(1)/170(b)(1)(A)(vi) and received from	ng Form 990 or 990-EZ, that met the 33-1/3% supp any one contributor, during the year, a contribution of th	ort test of the regulations under sections be 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	d II
For a section 501(c)(7), (8), or (10) org	anization filing Form 990 or 990-EZ, that received f	rom any one contributor, during the year,
aggregate contributions of more than \$ prevention of cruelty to children or anin	1.000 for use <i>exclusively</i> for religious, charitable, so	cientific, literary, or educational purposes, or the
	,	
For a section 501(c)(7), (8), or (10) org	anization filing Form 990 or 990-EZ, that received figious, charitable, etc, purposes, but these contributed.	rom any one contributor, during the year,
this box is checked, enter here the total	il contributions that were received during the year fo	or an <i>exclusively</i> religious, charitable, etc.
purpose Do not complete any of the pa	arts unless the <b>General Rule</b> applies to this organiz	ation because it received nonexclusively
religious, charitable, etc, contributions of	of \$5,000 or more during the year.	<b>&gt;</b> \$
Caution: An organization that is not covere	ed by the General Rule and/or the Special Rules doe	es not file Schedule B (Form 990, 990-F7, or
990-PF) but it must answer 'No' on Part IV	Ine 2 of their Form 990, or check the box on line.	H of its Form 990-FZ, or on line 2 of its Form
990-Pr, to certify that it does not meet the	filing requirements of Schedule B (Form 990, 990-	EZ, or 990-PF)
BAA For Privacy Act and Paperwork Red for Form 990, 990EZ, or 990-PF.	uction Act Notice, see the Instructions	Schedule B (Form 990, 990-EZ, or 990-PF) (2009)
IOT POTTE 330. 33UEZ. OT 33U-PP.		

	<b>B</b> (Form 990, 990-EZ, or 990-PF) (2009)	<u></u>	Page 1	of 1	of Part I
Name of org				identification num	nber
	yan and Amy Lewis Family		120-28	97316	
Part I	Contributors (see instructions.)				
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions		(d) Type of contribution	
1	Selig Enterprises, Inc.			Person Payroli	X
	1100 Spring Street NW	\$ <u>18</u>	,000.	Noncash	
	Atlanta, GA 30309			(Complete First a noncash	Part II if there contribution)
(a) Number	(b) Name, address, and ZiP + 4	(c) Aggregate contributions		(d) Type of contribution	
		\$		Person Payroll Noncash (Complete Formula is a noncash	Part II if there contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggrega contributi	te ons		d) ontribution
	-,	\$		Person Payroll Noncash (Complete Fis a noncash	Part II if there contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggrega contributi	te ons		d) ontribution
		\$	. <b></b> _	Person Payroll Noncash (Complete I is a noncash	Part II if there a contribution )
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggrega contributi	te ons		d) ontribution
		\$	. – – –	is a noncast	Part II if there a contribution )
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggrega contributi	te ons		d) ontribution
		\$	· <b></b> -		Part II if there

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

BAA

Schedule B (Form 990, 990-EZ, or 990-PF) (2009)

2009	Federal Statements The Bryan and Amy Lewis Family Foundation, Inc.			Page 1 20-2897316
Statement 1 Form 990-PF, Part I, Line 11 Other Income				04 24PM
Bank charge reversals	Total	(a) Revenue per Books \$	33.	(c) Adjusted Net Income \$ 33.
Statement 2 Form 990-PF, Part I, Line 23 Other Expenses				
Bank Charges	(a) Expense: per Book  \$ 1  Total \$ 1		ment Adjuste ome Net Incom \$ 1	
Statement 3 Form 990-PF, Part XV, Line 2a-d Application Submission Informa	ation			
Name of Grant Program: Name: Care Of: Street Address: City, State, Zip Code: Telephone: Form and Content: Submission Deadlines: Restrictions on Awards:	Bryan R. Lewis  1100 Spring Street Atlanta, GA 30309 404-876-5511 Applications shoul amount and purpose None None	d be submi	tted in writing	g and state the
Statement 4 Form 990-PF, Part XV, Line 3a Recipient Paid During the Year				
Name and Address	Donee <u>Relationship</u>	Found- ation Status	Purpose of Grant	Amount
Temple Sinai 5645 Dupree Drive Atlanta, GA 30327	N/A	N/A	GENERAL	\$ 3,015.

٠,

2009	Federal Sta		v		Page 2	
	The Bryan and Amy Lewis Family Foundation, Inc.				20-2897316	
5/25/10					04 24PM	
Statement 4 (continued) Form 990-PF, Part XV, Line 3a Recipient Paid During the Year						
Name and Address	Donee Relationship	Found- ation Status	Purpose Gran		Amount	
Jewish Family & Childrens	N/A	N/A	GENERAL	\$	350.	
Svcs 4549 Chamblee Dunwoody Dr Atlanta, GA 30338	17,11	14, 11	CHARLE	Ť	355.	
The Epstein School 335 Colewood Way NW Atlanta, GA 30328	N/A	N/A	GENERAL		4,872.	
The Orme School 1000 Orme Road Mayer, AZ 86333	N/A	N/A	GENERAL		1,500.	
Jewish Federation of Greater Atlanta 1440 Spring Street NW Atlanta, GA 30309	N/A	N/A	GENERAL		6,000.	
Atlanta Speech School 3160 Northside Parkway NW Atlanta, GA 30327	N/A	N/A	GENERAL		875.	
American Red Cross 1955 Monroe Drive Atlanta, GA 30324	N/A	N/A	GENERAL		100.	
				Total <u>\$</u>	16,712.	

# 7008 3230 0003 2990 8286 Application for Extension of Time To File an Exempt Organization Return OMB No 1545

(Rev April 2009)

OMB No 1545-1709

Department of the Treasury

File a separate application for each return.

HETHER RETERE						
<ul> <li>If you are file</li> </ul>	ng for an Automatic 3-Month E	xtension, complete only Part I and check this box			► X	
<ul> <li>If you are fili</li> </ul>	ng for an Additional (Not Auto	matic) 3-Month Extension, complete only Part II (on p	page 2 of thi	s form)	_	
Do not complete	e Part II unless you have alread	ly been granted an automatic 3-month extension on a	previously f	iled Form 8868.		
Part Auf	tomatic 3-Month Extensi	on of Time. Only submit original (no copies	needed).			
A corporation re	quired to file Form 990-T and r	equesting an automatic 6-month extension check th	nis box and (	complete Part I on	v <b>►</b> □	
		partnerships, REMICS, and trusts must use Form 700				
income tax retur		,				
returns noted be the additional (n Form 990-T. Inst	elow (6 months for a corporation to automatic) 3-month extensions.	ectronically file Form 8868 if you want a 3-month autor in required to file Form 990-T). However, you cannot file on or (2) you file Forms 990-BL, 6069, or 8870, group completed and signed page 2 (Part II) of Form 8868. If of Charities & Nonprofits.	le Form 886 returns, or a	8 electronically if ( i composite or cons	1) you want solidated	
Na	me of Exempt Organization			Employer identification	number	
Type or Th	ne Bryan and Amy Lev	ris Family				
print Fo				20-2897316		
File by the Nut	mber, street, and room or suite number.	f a P O box, see instructions				
filing your 11	100 Spring Street NV					
instructions City	y, town or post office, state, and ZIP code	For a foreign address, see instructions				
A1	tlanta, GA 30309					
Check type of re	eturn to be filed (file a separate	application for each return):				
Form 990		Form 990-T (corporation)	Form 472	20		
Form 990-BI	L	Form 990-T (section 401(a) or 408(a) trust)	Form 5227			
Form 990-E	z T	Form 990-T (trust other than above)	Form 606	rm 6069		
X Form 990-PI	F T	Form 1041-A	Form 887	70		
<ul> <li>If the organi</li> <li>If this is for check this be the extension</li> </ul>	a Group Return, enter the orga ox ► ☐ If it is for part of the in will cover.	FAX No. ► or place of business in the United States, check this business four digit Group Exemption Number (GEN) he group, check this box ► and attach a list with	If the names a		•	
•		s for a corporation required to file Form 990-T) extens				
	sion is for the organization's re	the exempt organization return for the organization na	imed above			
	=	turn 10r				
	lendar year 20 09 or	00				
tax	x year beginning	, 20, and ending, 20				
2 If this tax	year is for less than 12 months	, check reason	rn 🔲 (	Change in accounti	ng period	
	lication is for Form 990-BL, 990 able credits. See instructions.	0-PF, 990-T, 4720, or 6069, enter the tentative tax, les	ss any	3a \$	0.	
<b>b</b> If this app made. Inc	lication is for Form 990-PF or 9 lude any prior year overpayme	990-T, enter any refundable credits and estimated tax allowed as a credit.	payments	3b \$	0.	
c <b>Balance D</b> deposit wi See instru		Ba Include your payment with this form, or, if required by using EFTPS (Electronic Federal Tax Payment Sys	i, tem)	3c \$	0.	
Caution. If you payment instruc		c fund withdrawal with this Form 8868, see Form 8453	3-EO and Fo	rm <b>8879-E</b> O for		
BAA For Priva	cy Act and Paperwork Reduction	on Act Notice, see instructions.		Form <b>8868</b>	(Rev 4-2009)	