

## See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



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

OMB No 1545-0052

Department of the Treasury Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public.
 ▶ Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf.

Open to Public Inspection

Form 990-PF

Fo	calend	dar year 2015 or tax year beginning , a	and ending				
N	ame of for	undation		<u>'</u>	A Empl	oyer Identification number	
9	Srev	as Foundation			62	-6279182	
		d street (or P O box number if mail is not delivered to street address)	Ro	oom/suite		hone number (see instruction:	5)
]	2.0.	Box 869		_	30'	7-73 <u>4-0944</u>	
	ity or town	n, state or province, country, and ZIP or foreign postal code			C If exe	nption application is pending,	check here
	<u>Vils</u>	on WY 83014				inputori approation to portating	
G	Check a	all that apply: Initial return Initial return	rn of a former public ch	narity	D 1. Fo	reign organizations, check he	ere •
		Final return Amended	return		2. Fo	reign organizations meeting t	he
		Address change Name cha	inge		85	% test, check here and attach	computation
Н	Check	type of organization: X Section 501(c)(3) exempt private	foundation		E If priva	ate foundation status was tem	ninated under
	Section	n 4947(a)(1) nonexempt charitable trust Other taxable	le private foundation	_	sectio	n 507(b)(1)(A), check here	<b>&gt;</b>
	air mai	rket value of all assets at J Accounting method:	X Cash Acc	rual	F If the	foundation is in a 60-month te	rmination
(	end of y	ear (from Part II, col. (c), Other (specify)			under	section 507(b)(1)(B), check h	ere L
1	ine 16)	▶ \$ 6,315 (Part I, column (d) must	be on cash basis.)				
F	art I	Analysis of Revenue and Expenses (The total of	(a) Revenue and	(b) Net inv	vestment	(c) Adjusted net	(d) Disbursements for charitable
73		amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))	expenses per books	inco		income	purposes
SINC V I AUN CERINAU Revenue	1	Contributions, gifts, grants, etc., received (attach schedule)	8,000				(cash basis only)
<u>Z</u>	2	Check if the foundation is <b>not</b> required to attach Sch B	3,000	<del> </del>		4-111	1.1ivistis-it-tivi-t
'n	2		3		3		
j	3 4	Interest on savings and temporary cash investments  Dividends and interest from securities	<u> </u>			.=.	
z	5.	Gross rents				*	
₹	5a   b	Net rental income or (loss)					ANNE III III III III III III III III III
~\ <u>=</u>	6a	Net gain or (loss) from sale of assets not on line 10			,		
~ ē	b	Gross sales price for all assets on line 6a					
သွန်	7	Capital gain net income (from Part IV, line 2)			0		
5	8	Net short-term capital gain	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			0	11.1.11.11.11.11.11.11.11.11.11.11.11.1
	9	Income modifications					
	10a	Gross sales less returns and allowances					
	b	Less: Cost of goods sold					
	С	Gross profit or (loss) (attach schedule)					
	11	Other income (attach schedule)					
_	12	Total. Add lines 1 through 11	8,003		3	0	
(C)	13	Compensation of officers, directors, trustees, etc.	0				
xpenses	14	Other employee salaries and wages		ļ			
er	15	Pension plans, employee benefits					
X	16a	Legal fees (attach schedule)			-		
ė	b	Accounting fees (attach schedule) Stmt 1	500		500		
Ę	С	Other professional fees (attach schedule)					
it	17	Interest					
n:s	18	Taxes (attach schedule) (see instructions) Stmt 2	28		28		
Έ	19	Depreciation (attach schedule) and depletion					
Ad	20	Upcupancy (0)	<u> </u>	<del> </del>			
Ď	21	Occupancy On Travel, conferences and meetings.  Printing and publications					
ā	22		185		185		
ina	23	Other expenses (att.sch.)  Total operating and administrative expenses.	103	-	103		
rat	24	Add-lines 13 through 23	713		713	o	o
Operating and Administrative E	. 25	Contributions, gifts, grants paid	57,170		1 = 2	0	57,170
0	26	Total expenses and disbursements. Add lines 24 and 25	57,883		713	0	57,170
	27	Subtract line 26 from line 12.	5.,000		•		
	a	Excess of revenue over expenses and disbursements	-49,880				
	b	Net investment income (if negative, enter -0-)			0		
	ءَ ا	Adjusted not income (if negative, enter -0-)				0	

	Part	Balance Sheets Attached schedules and amounts in the description colu	mn	Beginning of year	End o	f year
_	+ <b>441</b> % ;	should be for end-of-year amounts only (See instruction	ns )	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash – non-interest-bearing		-1,734	3,193	3,193
	2	Savings and temporary cash investments		34,185	3,122	3,122
	3	Accounts receivable ▶				
		Less: allowance for doubtful accounts ▶		<u></u>		
	4	Pledges receivable ▶				
		Less¹ 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 (att. schedule)				
		Less: allowance for doubtful accounts ▶	0		1	
Ś	8	Inventories for sale or use				
Assets	9	Prepaid expenses and deferred charges				
As	10a	Investments – U S. and state government obligations (attach schedule)			-	<del></del>
	b	Investments – corporate stock (attach schedule)				<del>-</del>
	С	Investments – corporate bonds (attach schedule)				<del></del>
	11	Investments – land, buildings, and equipment basis				
		Less accumulated depreciation (attach sch.)		1		
	12	Investments – mortgage loans			"	
	13	Investments – other (attach schedule)				<del></del>
	14	Land, buildings, and equipment basis				<del></del>
	17	Less accumulated depreciation (attach sch.)		i i		
	15	Other assets (describe	,	<del></del>		
	16	Total assets (to be completed by all filers – see the	)	f		
	10	instructions. Also, see page 1, item I)		32,451	6,315	6,315
٦	17	Accounts payable and accrued expenses	<del></del>	32,431		0,313
	18	Grants payable				
S	19	Deferred revenue				
<b>Liabilities</b>	20	Loans from officers, directors, trustees, and other disqualified persons		-	<del>_</del>	
abi	21	Mortgages and other notes payable (attach schedule)		<del></del>		
	22	Other liabilities (describe	,			
Ì	23	Total liabilities (add lines 17 through 22)	)	0		
┪		Foundations that follow SFAS 117, check here		<u> </u>		
S		and complete lines 24 through 26 and lines 30 and 31.		]	J	
힐	24	Unrestricted				
Net Assets or Fund Balances	25	Temporarily restricted	•			
8	26	Permanently restricted				
밈	20	•	<b>►</b> 😾			
리		Foundations that do not follow SFAS 117, check here and complete lines 27 through 31.	► X			
히	27	-			İ	,
뙯	27	Capital stock, trust principal, or current funds				
SSE	28	Paid-in or capital surplus, or land, bldg., and equipment fund				
Ž	29	Retained earnings, accumulated income, endowment, or other funds		32,451	6,315	
힐	30	Total net assets or fund balances (see instructions)		32,451	6,315	
	31	Total liabilities and net assets/fund balances (see		22.454		
4	Part II	instructions)		32,451	6,315	<u></u>
	****	The state of the s			<del></del>	
٠		net assets or fund balances at beginning of year – Part II, column (a), lir f-year figure reported on prior year's return)	ie 30 (mu:	st agree with		AA 4=-
2		i-year figure reported on prior year's return) amount from Part I, line 27a			1 1	32,451
		increases not included in line 2 (itemize) ► See Statement	4		2	-49,880
		nes 1, 2, and 3	**		3	23,744
		ases not included in line 2 (itemize)			4	6,315
				·\	5	
<u> </u>	rotal	net assets or fund balances at end of year (line 4 minus line 5) – Part II,	column (t	o), line 30	6	6,315

**************************************	Foundacton			02-02/7102			rage
-	and Losses for Tax on Invest		<u>e</u>	(b) How acquired			<del></del>
	escribe the kind(s) of property sold (e.g., real estate, warehouse, or common stock, 200 shs. MLC Co.)			P – Purchase D – Donation		acquired day, yr)	(d) Date sold (mo , day, yr )
1a N/A				D = Donation			
b							-
С							
d							
е							
(e) Gross sales pnce	(f) Depreciation allowed (or allowable)		g) Cost or o	other basis ise of sale			n or (loss) f) minus (g)
а							
b							
С				_			
<u>d</u>							
<u> </u>			40/04/0	•			
Complete only for assets show	ring gain in column (h) and owned by the						(h) gain minus
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69		(k) Excess over col				t less than -0-) <b>or</b> rom col (h))
_a							
b	<del>-</del>						
<u>c</u>	-						
<u>d</u>							
<u>e</u>	If gain, also ente	r in Part I line 7					
2 Capital gain net income or (net	t capital loss)  If (loss), enter -0				2		
3 Net short-term capital gain or (	loss) as defined in sections 1222(5) an		_		-		
, ,	8, column (c) (see instructions). If (los	` '	ヿ				
Part I, line 8	, , ,				3		
Part V Qualification I	Under Section 4940(e) for Rec	luced Tax or	n Net li	nvestment Inco	me		
(For optional use by domestic priva	ate foundations subject to the section 4	940(a) tax on ne	t investn	nent income.)			
If section 4940(d)(2) applies, leave	this part blank.						
Was the foundation liable for the e	cation 4042 tay on the diatributable are		ا مالمال	:40			Yes X No
	ection 4942 tax on the distributable ame ualify under section 4940(e) Do not cor		in the ba	ase period?			res A_ No
<del></del>	<del></del>		o makin	a any entries			
(a)	n each column for each year; see the in	Istructions befor	e makin				(d)
Base period years Calendar year (or tax year beginning	(b) Adjusted qualifying distribut	ions	Net value	(c) of noncharitable-use asset	s		tribution ratio
2014	1 117	7,964		66,		(cor (b)	0.877804
2013		3,483		134,			0.547682
2012		57,110		213,			0.267334
2011		80,801		258,			0.312396
2010		0,477		305,4			0.230719
2 Total of line 1, column (d)					2		2.235935
3 Average distribution ratio for th	e 5-year base period – divide the total	on line 2 by 5, or	by the				
number of years the foundation	n has been in existence if less than 5 ye	ears			3		0.447187
4 Enter the net value of nonchari	table-use assets for 2015 from Part X,	line 5			4		30,383
E Multiply line 4 by line 2							
5 Multiply line 4 by line 3					_5		13,587
6 Enter 1% of net investment inc	ome (1% of Part I, line 27b)			• •	_6		
7 Add lines 5 and 6					7		13,587
8 Enter qualifying distributions from	om Part XII, line 4				_8		57,170
	an line 7 check the boy in Part VI line	1b. and comple	ta that n	art using a 1% tax s	oto Soo t	bo	

Part VI instructions.

Form 990-PF (2015) Sreyas Foundation

P	art VII-A Statements Regarding Activities (continued)			<del>,</del>		
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the				Yes	No
	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)			11_		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified					
	person had advisory privileges? If "Yes," attach statement (see instructions)		!	12		<u> </u>
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?			13_	X	
	Website address ► N/A		•			
14	The books are in care of ▶ Hanley Sayers Telephone	no. 🕨	307-7	34-	094	4
	P. O. Box 869					
	Located at ▶ Wilson WY ZIF	9+4 ▶	83014	Ŀ		
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	▶ 1	15_			
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority				Yes	No
	over a bank, securities, or other financial account in a foreign country?			16_		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of					
	the foreign country ▶					
P	art 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.		·		Yes	No
1a	During the year did the foundation (either directly or indirectly):					
		Yes	X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a		_			
		Yes	X No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	Yes	X No			
		Yes	X No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for					
		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					
		Yes	X No			
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations					
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?		N/A	1b		
	Organizations relying on a current notice regarding disaster assistance check here		▶ 🗀			
С	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 2015?		N/A	1c		
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)):					
а	At the end of tax year 2015, did the foundation have any undistributed income (lines 6d and					
	6e, Part XIII) for tax year(s) beginning before 2015?	Yes	X No			
	If "Yes," list the years ▶ 20 , 20 , 20 , 20		_			
b	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2)					
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to					
	all years listed, answer "No" and attach statement – see instructions.)		N/A	2b		
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here	·			,,,,,	
	<b>▶</b> 20 , 20 , 20 , 20					
3a	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 2015 as a result of (1) any purchase by the foundation or					
	disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the					
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of					
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the				1	
	foundation had excess business holdings in 2015.)		N/A	3b	l	
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		[	4a		Х
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 2015?			4b	]	<u> </u>
			F	orm 99	0-PF	

REY	AS 10/26/20†6 4 41 PM						
For	n 990-PF (2015) <b>Sreyas</b>	Foundation		279182			Page
	art VII-B Statements	Regarding Activities for Which F	orm 4720 May Be R	equired (conf	inued)		
5a		ation pay or incur any amount to:					
		otherwise attempt to influence legislation (se	ection 4945(e))?	Π,	Yes X No		
		any specific public election (see section 495				1	
	directly or indirectly, any		,0,, 0, 10 00,1,		Yes X No	. 1	
	•	<del>_</del>	2002	_	Yes X No		
	•	vidual for travel, study, or other similar purpo		لــا	I US AT MO		
		anization other than a charitable, etc., organi	zation described in	г,	, <del>.</del> .		
	section 4945(d)(4)(A)? (s	•		LJ '	Yes X No		
	(5) Provide for any purpose	other than religious, charitable, scientific, lite	rary, or educational		_		
	purposes, or for the preven	ention of cruelty to children or animals?		□ '	Ƴes █ No		
b	If any answer is "Yes" to 5a(1	)-(5), did any of the transactions fail to quali	fy under the exceptions d	escribed in		•	
	Regulations section 53 4945	or in a current notice regarding disaster assi	stance (see instructions)?	•	N/A	5b	
	Organizations relying on a cu	rrent notice regarding disaster assistance ch	eck here		▶ [_] }	. 1	
C	If the answer is "Yes" to ques	tion 5a(4), does the foundation claim exemp	tion from the tax			. 1	
	because it maintained expen-	diture responsibility for the grant?		N/A 🗍	res No	:	
		required by Regulations section 53 4945–5	(d)		_		
6a	,	year, receive any funds, directly or indirectly	• •			: 1	
	on a personal benefit contract		,, p, p	Π,	res X No	.	
b	·	e year, pay premiums, directly or indirectly, o	n a nersonal henefit contr			6ь Т	x
-	If "Yes" to 6b, file Form 8870	• • • • • • • • • • • • • • • • • • • •	ir a porconal bonom com	,			
72	•	ar, was the foundation a party to a prohibited	tay chalter transaction?	Γ,	Yes X No		
		eceive any proceeds or have any net income		ليحا	N/A	7b	İ
		About Officers, Directors, Trustee					
¥Ç.	and Contract		s, i outivation main	agers, riigiliy	i ala Employ	,00,	
1		stees, foundation managers and their cor	nnonsation (see instruc	tions\	<del></del>		
•	List all Officers, directors, tru	stees, louindation managers and their cor	ilpensation (see instruc		(d) Contributions to		
		(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	employee benefit plans and deferred compensation		nse account illowances
J	. H. Sayers, Jr	Wilson	Trustee	"			
	.O. Box 869	WY 83014	0.50	6		1	
	Indy Sayers	Wilson	Trustee				
	.O. Box 869	. WY 83014	0.25	۰ ,	۰ ا	l	
	llen D. Lentz	Wilson	Trustee				
	.0. Box 869		0.10		,		
<u>F</u>	.O. BOX 869	WY 83014	0.10				
	,						
2	Compensation of five higher "NONE."	est-paid employees (other than those incl	uded on line 1 – see ins	tructions). If non	e, enter		
	(a) Name and address of e	ach 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		nse account illowances
.NO	ONE .						. <u>-</u>

► 0 Form **990-PF** (2015)

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

Form 990-PF (20	15) Sreyas Foundation	62-6279182	Page
Part VIII	Information About Officers, Directors, Trustees, Fo and Contractors (continued)		Employees,
3 Five highe	st-paid independent contractors for professional services (see l	nstructions). If none, enter "NONE."	
	(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE			ļ
Total number of	others receiving over \$50,000 for professional services		Þ
Part IX-A	Summary of Direct Charitable Activities	-	
	four largest direct chantable activities during the tax year. Include relevant statistical informather beneficiaries served, conferences convened, research papers produced, etc.	ation such as the number of	Expenses
1 N/A			
2			
3		· · · · · · · · · · · · · · · · · · ·	
4			
Part IX-B	Summary of Program-Related Investments (see in	structions)	
	gest program-related investments made by the foundation during the tax year on lines 1 and	2	Amount
1 N/A			
2 .			
All other program-re	lated investments. See instructions		
Total. Add lines 1	1 through 3	<u> </u>	<u> </u>

Form **990-PF** (2015)

62-6279182 Form 990-PF (2015) Sreyas Foundation Page 8 Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, Part X see instructions.) 1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes: 27,500 1a Average monthly fair market value of securities 1b Average of monthly cash balances 1c Fair market value of all other assets (see instructions) 30,846 1d Total (add lines 1a, b, and c) Reduction claimed for blockage or other factors reported on lines 1a and 0 1c (attach detailed explanation) 2 2 Acquisition indebtedness applicable to line 1 assets 30,846 3 3 Subtract line 2 from line 1d Cash deemed held for charitable activities Enter 11/2% of line 3 (for greater amount, see instructions) 30,383 5 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V. line 4 Minimum investment return. Enter 5% of line 5 1,519 Part XI Distributable Amount (see instructions) (Section 4942(i)(3) and (i)(5) private operating foundations and certain foreign organizations check here \( \bigcup \) and do not complete this part.) 1,519 Minimum investment return from Part X, line 6 Tax on investment income for 2015 from Part VI, line 5 Ь Income tax for 2015. (This does not include the tax from Part VI.) C Add lines 2a and 2b 2c 3 Distributable amount before adjustments. Subtract line 2c from line 1 3 1,519 4 Recoveries of amounts treated as qualifying distributions 4 1,519 5 5 Add lines 3 and 4 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, 1,519 line 1 Part XII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: 57,170 Expenses, contributions, gifts, etc - total from Part I, column (d), line 26 1a 1b b Program-related investments - total from Part IX-B 2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc... 2 3 Amounts set aside for specific charitable projects that satisfy the Suitability test (prior IRS approval required) Cash distribution test (attach the required schedule) 3b 57,170 4 Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 4 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) Adjusted qualifying distributions. Subtract line 5 from line 4

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.

Form 990-PF (2015)

Pa	rt XIII Undistributed Income	(see instructions)				
			(a)	(b)	(c)	(d) 2015
	Distributable amount for 2015 from Part X	ı, L	Corpus	Years prior to 2014	2014	<u> </u>
	line 7 `	1				1,519
:	Undistributed income, if any, as of the end	d of 2015:				
а	Enter amount for 2014 only					
b	Total for prior years: 20 , 20	_ ,20				
}	Excess distributions carryover, if any, to 2					
а	From 2010	70,508				
b	From 2011	67,871				
С	From 2012	46,507				
d	From 2013	66,798				
е	From 2014	54,718				
f	Total of lines 3a through e	<u> </u>	306,402		,	
ŀ	Qualifying distributions for 2015 from Part	: XII,				
	line 4: ▶ \$57,170					
а	Applied to 2014, but not more than line 2a	ı [	1			
b	Applied to undistributed income of prior ye	ears				
	(Election required – see instructions)				<u> </u>	
C	Treated as distributions out of corpus (Ele	ection				
	required – see instructions)					1,519
d	Applied to 2015 distributable amount				<u> </u>	1,519
8	Remaining amount distributed out of corp	us	55,651	15044-41-111-1161-1111-1111-111-111-11	<u> </u>	
5	Excess distributions carryover applied to 2	2015				
	(If an amount appears in column (d), the	same				
	amount must be shown in column (a).)					
5	Enter the net total of each column as					
	indicated below:		262 252			
	Corpus. Add lines 3f, 4c, and 4e. Subtrac	P. C.	362,053			
þ	Prior years' undistributed income Subtract	ot				
	line 4b from line 2b					
C	Enter the amount of prior years' undistribu	· · · · · · · · · · · · · · · · · · ·				
	income for which a notice of deficiency ha	i i				
	been issued, or on which the section 494	2(a)				
	tax has been previously assessed					
d	Subtract line 6c from line 6b. Taxable					
	amount – see instructions			••••		·
е	Undistributed income for 2014. Subtract I	ine				
	4a from line 2a. Taxable amount – see					
	instructions					-
f	Undistributed income for 2015. Subtract I				•	
	4d and 5 from line 1. This amount must b	e				0
_	distributed in 2016				<u> </u>	
7	Amounts treated as distributions out of co					
	to satisfy requirements imposed by section		l			
	170(b)(1)(F) or 4942(g)(3) (Election may	De				
_	required—see instructions)					
8	Excess distributions carryover from 2010		70,508			
	applied on line 5 or line 7 (see instruction		70,308			
9	Excess distributions carryover to 2016	<b>).</b>	291,545			
_	Subtract lines 7 and 8 from line 6a		231,343		<u> </u>	
0	Analysis of line 9:	67 071				
a	Excess from 2011	67,871 46,507				
b	Excess from 2012	66,798				
C	Excess from 2013					
d	Excess from 2014	54,718 55,651				
е	Excess from 2015	55,651	<u> </u>	<u> </u>	<u>.t</u>	

P	art XIV Private Operating For	undations (see in	nstructions and Pa	<u>rt VII-A, guestion 9</u>	)			
1a	If the foundation has received a ruling or	determination letter	that it is a private opera	ating				
	foundation, and the ruling is effective for	2015, enter the date	of the ruling	<b>•</b>				
b	Check box to indicate whether the foundation is a private operating foundation described in section 4942(j)(3) or 4942(j)(5)							
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		(e) Total		
	income from Part I or the minimum	(a) 2015	(b) 2014	(c) 2013	(d) 2012	(e) Iolai		
	investment return from Part X for		T					
	each year listed	1		•				
b	85% of line 2a	<del></del> -	<u> </u>					
c	Qualifying distributions from Part XII,		<del></del>					
·	line 4 for each year listed	1						
d	Amounts included in line 2c not used directly			<del></del>				
u	for active conduct of exempt activities	1		<u> </u>	ľ			
_	·	<del></del>	<del></del>	<del>                                     </del>	-			
8	Qualifying distributions made directly	ı	1					
	for active conduct of exempt activities.	1						
	Subtract line 2d from line 2c		<del></del>					
3	Complete 3a, b, or c for the	ı		1				
	alternative test relied upon:	1						
а	"Assets" alternative test – enter	1	<u> </u>	j .				
	(1) Value of all assets		<u> </u>	ļ				
	(2) Value of assets qualifying under	1						
	section 4942(j)(3)(B)(i)			<del> </del>				
b	"Endowment" alternative test – enter 2/3	ı						
	of minimum investment return shown in	1						
	Part X, line 6 for each year listed			<u> </u>	<u> </u>			
C	"Support" alternative test – enter:							
	(1) Total support other than gross	ı		1				
	investment income (interest,							
	dividends, rents, payments on							
	securities loans (section							
	512(a)(5)), or royalties)		<del>                                      </del>	<del> </del>	<del></del>			
	(2) Support from general public							
	and 5 or more exempt organizations as provided in	1			i			
	section 4942(j)(3)(B)(iii)	1						
	(3) Largest amount of support from	<del></del>		<del>                                     </del>				
	an exempt organization	1						
	(4) Gross investment income		<del>                                     </del>					
p,	art XV Supplementary Inform	nation (Complet	o this part only if	the foundation h	ad \$5 000 or more	in assets at		
. ,	any time during the ye	•	•	the roundation in	αα ψο,σσο στ πιστο	iii qoocto at		
1	Information Regarding Foundation Ma				<del> </del>			
· a	List any managers of the foundation who		ore than 2% of the total	contributions received	by the foundation			
u	before the close of any tax year (but only							
	N/A	ii uiey iiave continud	ited more than 40,000)	. (000 3000011 301 (0)(2)	·· <i>)</i>			
	List any managers of the foundation who	OWD 10% or more of	the stock of a cornera	tion (or an equally large	portion of the			
U	ownership of a partnership or other entity		· · · · · · · · · · · · · · · · · · ·		portion of the			
	N/A	) or writer the lounds	allon has a 10 % or gree	ater interest.				
2	Information Regarding Contribution, G	rant Gift Loan Sc	holarchin etc. Progr	'ame'				
-	<del></del>			ble organizations and d	and and and a			
	unsolicited requests for funds. If the foun		rants, etc. (see instruc	tions) to individuals or c	organizations under			
	other conditions, complete items 2a, b, c					<del> </del>		
а	The name, address, and telephone numb		or the person to whom	applications should be	addressed.			
	Hanley Sayers 301-73							
	P.O. Box 869 Wilson							
b	The form in which applications should be	submitted and inform	nation and materials th	ey should include:				
	See Statement 5				<del></del>			
C	Any submission deadlines:							
	N/A							
d	Any restrictions or limitations on awards,	such as by geograph	nical areas, charitable f	ields, kinds of institution	ns, or other			
	factors:							
	N/A							

Supplementary Information (continued) Part XV 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Purpose of grant or show any relationship to status of Amount contribution any foundation manager recipient Name and address (home or business) or substantial contributor Paid dunng the year Shikar Safari Club 7834 South Lake Shore 501(c)3 None Wildlife education Tempe AZ 85284 23,223 Community Foundation 3833 Cleghorn Ave #400 501(c)3 None Nashville TN 37215 Community improvement 1,500 Montgomery Bell Academy West End Ave None 501(c)3 Nashville TN 37205 Education 13,277 National Museum of 2820 Rungius Rd 501(c)3 None Jackson Hole WY 83002 Wildlife appreciation 14,000 Hoover Institution 434 Galvez Mall 501(c)3 None Stanford CA 94305 Operating fund 1,000 Misc organizations 501(c)3 None Jackson WY 83001 misc 4,170 57,170 Total ▶ 3a b Approved for future payment N/A ▶ 3b Total

Form 990-PF (2015) Sreyas Foundation 62-6279182 **Analysis of Income-Producing Activities** Part XVI-A Excluded by section 512, 513, or 514 Enter gross amounts unless otherwise indicated. Unrelated business income (e) Related or exempt (d) (b) (a) Exclusion code function income Amount Business code Amount (See instructions ) 1 Program service revenue: g Fees and contracts from government agencies 2 Membership dues and assessments  $\overline{14}$ 3 Interest on savings and temporary cash investments 4 Dividends and interest from securities 5 Net rental income or (loss) from real estate: Debt-financed property 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 10 Gross profit or (loss) from sales of inventory 11 Other revenue: a b 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes Line No. Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the ▼ accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes). (See instructions ) N/A

Form 990	)-PF (20	15) Sreyas I	oundat:	ion		62-6	279182		Pa	ge_ <b>1</b> :
Part )	KVII	Information Re Exempt Organi	garding Tr	ansfers To an	d Transaction	ons and Relation	onships With Noncharit	able		
1 Dic		nization directly or ii		ge in any of the fo	llowing with any	other organization	described		Yes	No
in s	section 5	01(c) of the Code (of								
-	anization									
		om the reporting four	ndation to a no	oncharitable exem	ipt organization o	of:		4 - (4)		-
• •	Cash							1a(1)	<del> </del>	X
	Other a							1a(2)		
	ner trans		-41-					46/4	•	x
		f assets to a noncha						1b(1)		X
		ses of assets from a			ion			1b(2) 1b(3)		X
٠.		of facilities, equipment rsement arrangement		seis				1b(4)		X
• •		r loan guarantees	113					1b(5)	_	X
		ance of services or	membershin o	or fundraising solic	itatione			1b(6)		X
-		acilities, equipment,		_			•	1c		X
	-		-			ımn (b) should alw:	ays show the fair market			
val	ue of the	goods, other assets	, or services g	oven by the report	ing foundation. It	f the foundation red	eived less than fair market			
val		transaction or shari		nt, show in columing of noncharitable exempted in the column in the colu			assets, or services received.  ption of transfers, transactions, and sharin	ng arrangeme	ents	
N/A										
							_ <del></del>			
						ļ				
							<u> </u>			
				<del></del>		<del> </del>				
		<u> </u>	<b>-</b>			<del> </del>				
						<del> </del>	<u> </u>			
						<del> </del>				
						<del> </del>	<del></del>			
						<u> </u>				
	ho found	ction disposity as undir	activ affiliated	with or related to	one or more to		ione			
		ation directly or indir i section 501(c) of th	-			·	ions	ПУ	es X	No
		nplete the following s	•	11011 0001011 00 1(	0)(0)) 01 111 000	,,, oz.,	•	لـا	JU <u></u>	]
		a) Name of organization		(b) Type of	organization	T	(c) Description of relationship			
N/2	A									
						T				
_				]						
		nalties of perjury, I declare nd complete Declaration of					and to the best of my knowledge and be	elief, it is true	3,	
ļ	oorreot, a	a dompicto Doctaration	_	than taxpayer) is baset	or all intornation of	which preparer has any	May the IRS	discuss this re		
Sign			1				with the prep (see instructi	arer shown be	elow Yes	No
Here			11/11			. / . /	, —	51.57.	105	
ľ			MUL-		//	/1/16	Trustee			
	<b>y</b> Signa	iture of officer or trustee	_/		Date	<u> </u>	Title			
	Print/Ty	pe preparer's name	<i>f</i>		Preparer's signatu	ire	Dat	ie .	Check	X f
Paid	[_	· (				~	11) 11) 11) 1 mm		self-em	
Preparer		Williams	77.77.7	ame dDa	Larry Wil	liams XC		/26/16 01220	1027	,
Use Only	Firm's n		y Willi Powell					<u> </u>	041	
	i rimn's a	ddress ► 205	TOMETT				Firm's EIN ▶			

615-312-8247

Brentwood, TN

37027

10/26/2016 4:41 PM

SREYAS Sreyas Foundation 62-6279182

FYE: 12/31/2015

## **Federal Statements**

Statement 4 - Form 990-PF, Part III, Line 3 - Other Increases

Description	Amount
Prioryear adjustment	\$ 23,744
Total	\$ 23,744
Statement 5 - Form 990-PF, Part XV, Line 2	b - Application Format and Required Contents
Description	
Written applications with address, contaphone mumber.	act person and
Form 990-PF, Part XV, Lin	e 2c - Submission Deadlines
Description	
Description N/A	
N/A	Award Restrictions or Limitations
N/A	Award Restrictions or Limitations

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

Department of the Treasury Internal Revenue Service

Name of the organization **Schedule of Contributors** 

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.

▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

Employer identification number

Schedule B (Form 990, 990-EZ, or 990-PF) (2015)

2015

Sreyas Found	dation	62-6279182
Organization type (check	one)	
Filers of:	Section:	
Form 990 or 990-EZ	501(c)( ) (enter number) organization	
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private for	oundation
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private found	dation
	501(c)(3) taxable private foundation	
	is covered by the <b>General Rule</b> or a <b>Special Rule</b> . c)(7), (8), or (10) organization can check boxes for both the General Rule a	and a Special Rule. See
General Rule		
	on filing Form 990, 990-EZ, or 990-PF that received, during the year, contrily or property) from any one contributor. Complete Parts I and II. See instructions.	
Special Rules		
regulations under 13, 16a, or 16b, a	on described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 99 and that received from any one contributor, during the year, total contribution of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1	90 or 990-EZ), Part II, line ons of the greater of <b>(1)</b>
contributor, during	on described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that the year, total contributions of more than \$1,000 exclusively for religious, conal purposes, or for the prevention of cruelty to children or animals. Com	chantable, scientific,
contributor, during contributions total during the year for General Rule app	on described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that the year, contributions exclusively for religious, charitable, etc., purposes, ed more than \$1,000. If this box is checked, enter here the total contribution an exclusively religious, charitable, etc., purpose Do not complete any of olies to this organization because it received nonexclusively religious, charitable, etc., purpose Do not complete any of olies to this organization because it received nonexclusively religious, charitable, etc., purpose Do not complete any of olies to this organization because it received nonexclusively religious, charitable, etc., purpose Do not complete any of olies to this organization because it received nonexclusively religious, charitable, etc., purpose Do not complete any of olies to this organization because it received nonexclusively religious, charitable, etc., purpose Do not complete any of olies to this organization because it received nonexclusively religious, charitable, etc., purpose Do not complete any of olies to this organization because it received nonexclusively religious, charitable, etc., purpose Do not complete any of olies to this organization because it received nonexclusively religious, charitable, etc., purpose Do not complete any of olies to this organization because it received nonexclusively religious, charitable, etc., purpose Do not complete any of olies to this organization because it received nonexclusively religious, charitable, etc., purpose Do not complete any of olies to this organization because it received nonexclusively religious, charitable, etc., purpose Do not complete any of olies to this organization because it received nonexclusively etc.	, but no such ons that were received f the parts unless the
Caution. An organization 990-EZ, or 990-PF), but it	that is not covered by the General Rule and/or the Special Rules does not must answer "No" on Part IV, line 2, of its Form 990, or check the box on 2, to certify that it does not meet the filing requirements of Schedule B (For	file Schedule B (Form 990, line H of its Form 990-EZ or on its

For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

Page 1 of 1

Schedule B (Form 990, 990-EZ, or 990-PF) (2015)

Name of organization

Employer Identification number

Sreyas		62-6279182
Part I.	Contributors (see instructions). Use duplicate copies of Part I if additional space	is needed.

Part I	, Contributors (see instructions). Use duplicate copies of F	Part I if additional space is ne	eded.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	J. H. Sayers, Jr. P.O. Box 869 Wilson WY 83014	\$ 8,000	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
,		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b)Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
·		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)