efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93491178005048

2017

OMB No 1545-0052

# 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.
 ▶ Information about Form 990-PF and its instructions is at <a href="www.irs.gov/form990pf">www.irs.gov/form990pf</a>.

Open to Public Inspection

For	cale	ndar year 2017, or tax year beginning 01-01-20	)17 , aı	nd end	ding 12-31-	2017			
		undation		A Employer id	entification numbe	r			
LE	WIS FO	DUNDATION			14-6049219				
		d street (or P O box number if mail is not delivered to street address) AND BAY BLVD 635	Room/suite		<b>B</b> Telephone number (see instructions)				
					(941) 388-7016	,			
		n, state or province, country, and ZIP or foreign postal code KEY, FL 34228		<b>C</b> If exemption	application is pendin	g, check here			
<b>G</b> Cl	neck al	II that apply Initial return Initial return of a		<b>D 1.</b> Foreign or	ganizations, check he	ere 🔲			
		☐ Final return ☐ Amended return			ganızatıons meeting				
		$\square$ Address change $\square$ Name change			k here and attach co	· -			
H C	neck ty	ype of organization $\mathbf{\nabla}$ Section 501(c)(3) exempt private	foundation			ındatıon status was t n 507(b)(1)(A), chec			
	Section	n 4947(a)(1) nonexempt charitable trust	e private foundation						
of	year <i>(f</i>	ket value of all assets at end from Part II, col (c),  ▶\$ 1,408,882  J Accounting method  □ Other (specify) (Part I, column (d) must	<b>☑</b> Cash ☐ Accru	ıal		ition is in a 60-month n 507(b)(1)(B), chec			
Pa	rt I	Analysis of Revenue and Expenses (The total	(a) Revenue and				(d) Disbursements		
		of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions)	expenses per books	( <b>b</b> ) N	et investment income	(c) Adjusted net income	for charitable purposes (cash basis only)		
	1	Contributions, gifts, grants, etc , received (attach schedule)							
	2	Check ► ✓ if the foundation is <b>not</b> required to attach							
	-	Sch B							
	3	Interest on savings and temporary cash investments							
Revenue	4	Dividends and interest from securities	33,921	L .	33,921	33,921			
	5a	Gross rents		-					
	 6а	Net rental income or (loss)  Net gain or (loss) from sale of assets not on line 10	47,474	1					
			,	<u> </u>					
	р 7	Gross sales price for all assets on line 6a 253,839  Capital gain net income (from Part IV, line 2)			47,474				
œ	8	Net short-term capital gain			,				
	9	Income modifications		<del> </del>					
	10a	Gross sales less returns and allowances							
	ь	Less Cost of goods sold							
	С	Gross profit or (loss) (attach schedule)							
	11	Other income (attach schedule)							
	12	Total. Add lines 1 through 11	81,395	5	81,395	33,921			
	13	Compensation of officers, directors, trustees, etc	48,000	)	24,000		24,000		
	14	Other employee salaries and wages							
es	15	Pension plans, employee benefits							
ens	16a	Legal fees (attach schedule)	44.1						
Expenses	Ь	Accounting fees (attach schedule)	9,168		4,584		4,584		
/e [	С	Other professional fees (attach schedule)	10,198	3	5,099		5,099		
and Administrative	17	Interest	<b>95-1</b>		24.0		242		
St	18	Taxes (attach schedule) (see instructions)	436		218		218		
E	19	Depreciation (attach schedule) and depletion	1,095	<u>'</u>	1,095				
Ad	20 21	Occupancy	420	-	210		210		
pu	22	Printing and publications	420	1	210		210		
	23	Other expenses (attach schedule)	3,669		1,835		1,834		
Ē	24	Total operating and administrative expenses.	,	-	,		<u>'</u>		
Operating		Add lines 13 through 23	72,986	5	37,041		35,945		
Ö	25	Contributions, gifts, grants paid	33,590		·		33,590		
	26	Total expenses and disbursements. Add lines 24 and 25	106,576		37,041		69,535		
-	27	Subtract line 26 from line 12	100,376	1	37,041		25,333		
	a	Excess of revenue over expenses and	-25,181						
	 	disbursements Net investment income (if negative, enter -0-)			44,354				
	b c	Adjusted net income (if negative, enter -0-)			+4,334	33,921			
For		work Reduction Act Notice, see instructions.		L Ca	at No 11289>	·	<u> </u> m <b>990-PF</b> (2017)		

2,045

1,229,296

1,229,296

1,229,296

1,229,296

504,461

628,107

1,913

1,204,115

1,204,115

1,204,115

1,204,115

1 2

3

4

5

6

1,229,296

1,204,115

1,204,115

Form **990-PF** (2017)

-25,181

697,306

641,942

1,408,882

	2	Savings and temporary cash investments	60,203	
	3	Accounts receivable ▶		
		Less allowance for doubtful accounts ▶		
	4	Pledges receivable ▶		_
		Less allowance for doubtful accounts ▶		
	5	Grants receivable		_
	6	Receivables due from officers, directors, trustees, and other		_
		disqualified persons (attach schedule) (see instructions)		
	7	Other notes and loans receivable (attach schedule) ▶		
		Less allowance for doubtful accounts ▶		
ķ	8	Inventories for sale or use		
sets	9	Prepaid expenses and deferred charges		
As	10a	Investments—U S and state government obligations (attach schedule)		
	ь	Investments—corporate stock (attach schedule)	486,024	<u>ر</u>
	c	Investments—corporate bonds (attach schedule)		
	11	Investments—land, buildings, and equipment basis ▶		
		Less accumulated depreciation (attach schedule) ▶		
	12	Investments—mortgage loans		_
	13	Investments—other (attach schedule)	646,219	•

Form 990-PF (2017)

14

15

16

17

18

19

20 21

22

23

24

25

26

27

28

29 Net 30

31

Part III

2

3

Liabilities

Assets or Fund Balances

Land, buildings, and equipment basis

instructions Also, see page 1, item I)

Grants payable. . . . . .

Other liabilities (describe -

Other assets (describe ▶ \_

Deferred revenue .

Unrestricted

Temporarily restricted

Permanently restricted .

and complete lines 27 through 31.

of-year figure reported on prior year's return)

Other increases not included in line 2 (itemize)

Enter amount from Part I, line 27a

Add lines 1, 2, and 3 . . . . . .

Decreases not included in line 2 (itemize) ▶

Less accumulated depreciation (attach schedule) ▶ 5,221

Loans from officers, directors, trustees, and other disqualified persons

Mortgages and other notes payable (attach schedule). . . . . .

Total assets (to be completed by all filers—see the

Foundations that follow SFAS 117, check here ▶

and complete lines 24 through 26 and lines 30 and 31.

Foundations that do not follow SFAS 117, check here

Capital stock, trust principal, or current funds . . . .

Paid-in or capital surplus, or land, bldg, and equipment fund Retained earnings, accumulated income, endowment, or other funds

Total net assets or fund balances (see instructions) . . . . .

Total liabilities and net assets/fund balances (see instructions) .

Analysis of Changes in Net Assets or Fund Balances

Total net assets or fund balances at beginning of year-Part II, column (a), line 30 (must agree with end-

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

Accounts payable and accrued expenses . . .

Page **3** 

- Capital Gallio				1		
	<b>(a)</b> the kınd(s) of property sold (e g , re ehouse, or common stock, 200 shs		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )	
1aSee Additional Data Tabl	e		D Domacion			
b						
С С						
d						
e						
(e) Gross sales price	<b>(f)</b> Depreciation allowed (or allowable)	Cost or	(g) other basis ense of sale	(h) Gain or (loss) (e) plus (f) minus (g)		
a See Additional Data Tabl	e .			, , ,		
b						
С						
d						
e						
Complete only for assets	s showing gain in column (h) and ow	ned by the foundation	on 12/31/69		(I)	
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	Excess	( <b>k)</b> of col (ı) (յ), ıf any	Gains (Col ( col (k), but not	h) gain minus less than -0-) <b>or</b> om col (h))	
a See Additional Data Tabl	· ' '		(3)) =	,		
b						
С С						
d						
e						
<ul><li>2 Capital gain net income</li><li>3 Net short-term capital q</li></ul>	e or (net capital loss)	If gain, also enter in F If (loss), enter -0- in l 1222(5) and (6)		2	47,474	
If gain, also enter in Pa in Part I, line 8	rt I, line 8, column (c) (see instructi	ons) If (loss), enter -0	· }	3		
Part V Qualification l	Jnder Section 4940(e) for Re	duced Tax on Net	Investment In	come		
	rivate foundations subject to the sec					
	·			,		
If section 4940(d)(2) applies, le	eave this part blank					
If "Yes," the foundation does no	e section 4942 tax on the distributal ot qualify under section 4940(e) Do	not complete this part			es 🗹 No	
	nount in each column for each year,	see instructions before	making any entrie			
(a) Base period years Calendar year (or tax year beginning in)	<b>(b)</b> Adjusted qualifying distributions	(c) Net value of noncharitab		( <b>d)</b> Distribution rat (col (b) divided by c	col (c))	
2016	67,034		1,296,963		0 05169	
2015	67,575		1,368,207		0 04939	
2014	62,613		1,430,470		0 04377	
2013	78,009		1,402,835		0 05561	
2012	72,867		1,361,758	I	0 05351	
2 Total of line 1, column (	•		2		0 253963	
	o for the 5-year base period—divide to a for the 5-year base period—divide to form the form of the for		, or by the		0 050793	
	ncharitable-use assets for 2017 from		4		1,348,642	
<b>5</b> Multiply line 4 by line 3			5		68,502	
<b>6</b> Enter 1% of net investme	ent income (1% of Part I, line 27b)		6		444	
<b>7</b> Add lines 5 and 6			7		68,946	
8 Enter qualifying distribut	ions from Part XII, line 4 🗼	8		69,535		
	eater than line 7, check the box in Pa		plete that part usi	ng a 1% tax rate Se		

If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?.

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

i List all officers, affectors, traster	23, 1	variation managers at	id their compensation	(See mad decions).	
(a) Name and address	,	Title, and average hours per week <b>b)</b> devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred	Expense account, (e) other allowances
CUCANUL COVNE			·	compensation	
SUSAN L COYNE 3070 GRAND BAY BLVD UNIT 635	Trust 15 0		48,000		
LONGBOAT KEY, FL 34228					
DANIEL R COYNE	2 00		0		
12 NORTHEY FARM ROAD SCITUATE, MA 02066	2 00				
CHRISTOPHER L COYNE	Trust	ee	0		
385 RYDER ROAD	2 00				
MANHASSET, NY 11030	<u> </u>				
2 Compensation of five highest-pa	ıd er	nployees (other than t	hose included on line 1		ne, enter "NONE."
(a) Name and address of each employee paid more than \$50,000		Title, and average hours per week  (b) devoted to position	(c) Compensation	Contributions to employee benefit plans and deferred (d) compensation	Expense account, (e) other allowances
NONE					
Total number of other employees paid ov	er \$5	0,000			
3 Five highest-paid independent co	ontra	ctors for professional	services (see instructi	ons). If none, enter "NON	E".
(a) Name and address of each person	n pai	d more than \$50,000	<b>(b)</b> Typ	e of service	(c) Compensation
NONE					
<b>Fotal</b> number of others receiving over \$50		<u>'</u>			
Part IX-A Summary of Direct (					
List the foundation's four largest direct charitable organizations and other beneficiaries served, con	activ	ities during the tax year. Incli	ude relevant statistical inform	nation such as the number of	Expenses
1	reren	ces convened, research paper	s produced, etc		
2					
-					
3					
<u> </u>					
4					
-					
Part IX-B Summary of Program	n-D	elated Investments	(see instructions)		
Describe the two largest program-related inve			<u> </u>	and 2	Amount
	stille	ints iniade by the foundation d	uring the tax year on lines I	aliu Z	Amount
1					
2					
All other program-related investments	Sec	Instructions			
3	<i>5</i> ee	mistructions			
<u> </u>					
Fotal. Add lines 1 through 3 .					
· · · · · · · · · · · · · · · · · · ·				· · ·	Form <b>990-PF</b> (2017

2

3a 3h

4

5

69.535

69,091

Form 990-PF (2017)

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment

Adjusted qualifying distributions. Subtract line 5 from line 4. . . . . . . . . .

Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4

income Enter 1% of Part I. line 27b (see instructions).

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for

Amounts set aside for specific charitable projects that satisfy the

the section 4940(e) reduction of tax in those years

3

4

5

66,988

66,988

Form 990-PF (2017)

(d)

2017

_	_	_	_	_		_		_	_	_	_	_	_	_	_	
		0	ŀ		ī	E	X	7	ī	1		Γ		ī	J	ľ

-PF	(20	1/	)	
7.7.7	Į			_

Form 990-PF (20	017)	
Part XIII	Undistributed Income	(see instructions)

1 Distributable amount for 2017 from Part XI, line 7 2 Undistributed income, if any, as of the end of 2017 (a)

Corpus

15.234

2.547

17,781

2.688

15,093

2.688 8,305

1.807 2,434

8.305

1.807

2.434

2.547

(b)

Years prior to 2016

(c)

2016

- a Enter amount for 2016 only. . . . . . Excess distributions carryover, if any, to 2017
- **b** Total for prior years a From 2012. . . . .
- **b** From 2013. . . . c From 2014. . . d From 2015. . . .

- e From 2016. . . . .
- f Total of lines 3a through e. . . . . . . . 4 Qualifying distributions for 2017 from Part XII, line 4 🕨 \$ a Applied to 2016, but not more than line 2a **b** Applied to undistributed income of prior years

(Election required—see instructions). . . . . c Treated as distributions out of corpus (Election required—see instructions). . . . . . . . .

**d** Applied to 2017 distributable amount. . . . e Remaining amount distributed out of corpus

same amount must be shown in column (a) )

**5** Excess distributions carryover applied to 2017 (If an amount appears in column (d), the

a Corpus Add lines 3f, 4c, and 4e Subtract line 5

applied on line 5 or line 7 (see instructions) . . .

Subtract lines 7 and 8 from line 6a . . . . . .

9 Excess distributions carryover to 2018.

10 Analysis of line 9

a Excess from 2013. . . **b** Excess from 2014. .

d Excess from 2016. . .

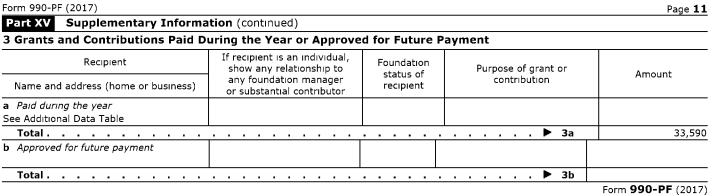
e Excess from 2017. . .

c Excess from 2015. . . .

6 Enter the net total of each column as

b Prior years' undistributed income Subtract line 4b from line 2b . . . . . . . . . . . . c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed. . . . . . d Subtract line 6c from line 6b Taxable amount e Undistributed income for 2016 Subtract line 4a from line 2a Taxable amount—see instructions . . . . . . . . . f Undistributed income for 2017 Subtract lines 4d and 5 from line 1. This amount must be distributed in 2018 . . . . . 7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions) . . . . . . . . . 8 Excess distributions carryover from 2012 not

indicated below:



Enter gross	amounts unless otherwise indicated	Unrelated b	usiness income	Excluded by section	512, 513, or 514	(e) Related or exempt
<b>1</b> Program	n service revenue	(a) Business code	<b>(b)</b> Amount	(c) Exclusion code	(d) Amount	function income (See instructions )
a						
b						
	and contracts from government agencies					
_	ership dues and assessments.					
3 Intere	st on savings and temporary cash			14		
	nds and interest from securities			14	33,921	
5 Net rer	ital income or (loss) from real estate					
	financed property					
	ebt-financed property					
	ental income or (loss) from personal property					
	nvestment income					
	or (loss) from sales of assets other than cory			18	47,474	
	ome or (loss) from special events			-	,	
	profit or (loss) from sales of inventory					
	revenue <b>a</b>					
40 0	-				81,395	
13 Total.	Add line 12, columns (b), (d), and (e)			13	B	81,395
(See w	orksheet in line 13 instructions to verify calcu	ations )				•
Part XV	-B Relationship of Activities to th			· · · · · · · · · · · · · · · · · · ·		
Line No. ▼	Explain below how each activity for which the accomplishment of the foundation's ex instructions )					

or	m 990-P	F (2017)				Pa	ge <b>13</b>
Ŀ	art XV	Information Re Exempt Organi		ions and Relationships With Nonchari	table		
1			directly engage in any of the following with a n 501(c)(3) organizations) or in section 527	any other organization described in section 501, relating to political organizations?		Yes	No
а	Transfe	rs from the reporting foun	dation to a noncharitable exempt organization	on of			
	<b>(1)</b> Ca	sh			1a(1)		No
	(2) Ot	her assets			1a(2)		No
b	Other tr	ransactions					
	<b>(1)</b> Sa	les of assets to a nonchari	table exempt organization		1b(1)		No
	<b>(2)</b> Pu	rchases of assets from a n	oncharitable exempt organization		1b(2)		No
	<b>(3)</b> Re	ntal of facilities, equipmer	nt, or other assets		1b(3)		No
	<b>(4)</b> Re	ımbursement arrangemen	ts		1b(4)		No
	( <b>5</b> ) Lo	ans or loan guarantees.			1b(5)		No
	<b>(6)</b> Per	formance of services or m	embership or fundraising solicitations		1b(6)		No
C	Sharing	of facilities, equipment, n	nailing lists, other assets, or paid employees		1c		No
(a)	) Line No	(b) Amount involved	(c) Name of noncharitable exempt organization	(d) Description of transfers, transactions, and sha	ring arra	ngemen	ts
_							
_							
_							
_							
2a	Is the fo	l oundation directly or indire	 ectly affiliated with, or related to, one or moi	re tax-exempt organizations			
		` ,	Code (other than section 501(c)(3)) or in se	ection 527?	☐Yes	✓	No
b	If "Yes,	complete the following so		(a) December of selection			

<b>d</b> If the a	nswer to any of the above goods, other assets, or set cransaction or sharing arra	e is "Yes," cor vices given b	mplete the follow by the reporting	ving schedule Co foundation If the	lumn <b>(b)</b> sho	ould alv	vays show the fair d less than fair ma	market value arket value
(a) Line No	(b) Amount involved	(c) Name of	noncharitable exe	mpt organization	(d) Descri	ption of	transfers, transactior	s, and sharing arrangements
describ	oundation directly or indir ed in section 501(c) of the " complete the following s (a) Name of organizati	c Code (other	than section 50	•	tion 527? .	-		☐ Yes ☑ No
Sign		f, it is true, c						statements, and to the best based on all information of May the IRS discuss this return
Here	Signature of officer or t	trustee		Date		le		with the preparer shown below (see instr )?
	Print/Type preparer's	s name	Preparer's Sigi	nature	Date		Check if self-	PTIN P01218669

Garry T Center CPA

Firm's name ► Garry T Center CPAs

Firm's address ▶ 1721 Central Avenue

Albany, NY 12205

Paid **Preparer** 

**Use Only** 

Firm's EIN ▶14-1661514

Phone no (518) 869-2051

employed ▶ □

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, (d) (b) (c) (a) 2-story brick warehouse, or common stock, 200 shs MLC Co ) How acquired Date acquired Date sold P-Purchase (mo, day, yr) (mo, day, yr) D-Donation 200 ABBVIE INC Р 2015-06-08 2017-06-26 2 ADVANSIX INC Ρ 2011-02-07 2017-04-10 5 ALPHABET INC CL C Р 2014-09-05 2017-06-26 5 ALPHABET INC CL A Р 2014-09-05 2017-06-26 50 ANADARKO PETE Ρ 2015-06-08 2017-06-26 30 APPLE INC Ρ 2012-12-20 2017-04-10 Р 1233 61 BLACKROCK GLOBAL LONG/SHORT CR 2015-09-28 2017-06-22 Р 10 BLACKROCK INC 2012-01-13 2017-04-10 Ρ 50 INTERNATIONAL BUSINESS MACHS 2006-06-22 2017-08-25 Р 2017-04-10 50 MCDONALDS CORP 2012-12-20 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h (e) Gross sales price Depreciation allowed Cost or other basis Gain or (loss) (f) (or allowable) (g) plus expense of sale (h) (e) plus (f) minus (g) 14,292 13,433 859 15 51 36 4,780 2,873 1,907 4,873 2.940 1,933 2,316 4,214 -1,898 4,325 2,215 2,110 12,682 12,817 -135 3,809 1,860 1,949 3,881 7,187 3,306 6,526 4,496 2,030 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - I Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 Gains (Col (h) gain minus col (k), but not less than -0-) or (i) F M V as of 12/31/69 Adjusted basis Excess of col (1) **(I)** Losses (from col (h)) (j) as of 12/31/69 (k) over col (j), if any 859 36 1,907 1,933 -1,8982,110 -135 1,949 3,306 2,030

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, (c) (d) (b) (a) 2-story brick warehouse, or common stock, 200 shs MLC Co ) How acquired Date acquired Date sold P-Purchase (mo, day, yr) (mo, day, yr) D-Donation 50 MCKESSON CORP Р 2015-06-08 2017-04-10 100 MICROSOFT CORP Ρ 2015-06-08 2017-04-10 100 OCCIDENTAL PETE CORP DEL Р 2009-06-30 2017-06-26 70 PROCTER & GAMBLE CO Р 2010-05-25 2017-04-10 180 SELECT SECTOR SPDR TR HEALTHCARE Р 2015-07-20 2017-04-10 Ρ 70 TJX COS INC NEW 2011-02-07 2017-04-10 Р 1483 395 THORNBURG INTL VALUE FUND 2011-02-04 2017-06-22 Р 30 3M CO 2012-01-13 2017-06-26 70 3M CO Ρ 2017-08-25 2012-01-13 540 VANGUARD REIT Р 2017-04-10 2012-12-20 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h (e) Gross sales price Depreciation allowed Cost or other basis Gain or (loss) (f) (or allowable) (g) plus expense of sale (h) (e) plus (f) minus (g) 7,227 11,840 -4,613 6,564 4,734 1,830 6,080 6,250 -170 6,296 4,360 1,936 13,361 13,850 -489 5,315 3,671 1,644 40,586 43,449 -2,863 6,374 2,505 3,869 5,844 14,169 8,325 44,783 32,810 11,973 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - I Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 Gains (Col (h) gain minus col (k), but not less than -0-) or (i) F M V as of 12/31/69 Adjusted basis Excess of col (1) **(I)** Losses (from col (h)) (j) as of 12/31/69 (k) over col (j), if any -4,613 1,830 -170 1,936 -489 3,671 -2,863 3,869 8,325 11,973

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) (c) (d) (a) 2-story brick warehouse, or common stock, 200 shs MLC Co ) How acquired Date acquired Date sold P—Purchase (mo, day, yr) (mo, day, yr) D-Donation 2012-12-20 310 VANGUARD REIT Ρ 2017-08-25 50 WELLS FARGO & CO Ρ 2009-06-30 2017-04-10 100 WELLS FARGO & CO Р 2011-07-13 2017-04-10 100 MEDTRONIC PLC IRELAND Р 2015-06-08 2017-04-10 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h (e) Gross sales price Cost or other basis Gain or (loss) Depreciation allowed (f) (or allowable) (g) plus expense of sale (h) (e) plus (f) minus (q) 25 955 18 763 7 192

Country Country	Caine and Lances for Taylor	Tours above and Tours and Californ	!
8,036		7,577	459
5,501		2,819	2,682
2,751		1,176	1,575
23,333		10,703	7,132

	5,501		2,819	2,682		
	8,036		7,577	459		
For	orm 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - I					
	Complete only for assets show	Gains (Col (h) gain minus				

Form 990PF Part IV - Capital	Gains and Losses for Tax on	Investment Income - Colum	ns i - I
Complete only for assets show	Gains (Col (h) gain minus		
(i) F M V as of 12/31/69	Adjusted basis	Excess of col (ı)	col (k), but not less than -0-) or (l) Losses (from col (h))

l	Complete only for assets show	Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69				
	(i) F M V as of 12/31/69	Adjusted basis <b>(j)</b> as of 12/31/69	Excess of col(ı) <b>(k)</b> over col( <u>j</u> ), ıf any	col (k), but not less than -0-) or (I) Losses (from col (h))		
I				7 192		

(i) F M V as of 12/31/69	Adjusted basis (j) as of 12/31/69	Excess of col(၊) <b>(k)</b> over col(յ), ıf any	(I) Losses (from col (h))
			7,192

()) d3 0/ 12/31/03	(R) over cor (j), it ally	
		7,192
		1,575

	1,575
	2,682
	459

### Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year BREAST HEALTH OF SARASOTA INC N/A PC FOR BREAST CANCER 160 3663 BEE RIDGE ROAD PREVENTION AND CURE SARASOTA, FL 34233 COMM FIREFIGHTERS ASSOC INC N/A NC FOR CENTERVILLE

1875 FALLMOUTH ROAD CENTERVILLE, MA 02632			FIREFIGHTERS ASSOC PROGRAMS	
FLORIDA STUDIO THEATRE INC 1241 N PALM AVE	N/A	PC	FOR PERFORMING ARTS SCHOLARSHIP	

FLORIDA STUDIO THEATRE INC 1241 N PALM AVE SARASOTA, FL 34236	N/A	PC	FOR PERFORMING ARTS SCHOLARSHIP	
HOPEHEALTH INC765 ATTUCKS LANE	N/A	PC	FOR HOSPICE AND PALLIATIVE	

C,				
HOPEHEALTH INC765 ATTUCKS LANE HYANNIS, MA 02601	N/A	PC	FOR HOSPICE AND PALLIATIVE CARE	300
JEWISH FAMILY & CHILDRENS SVCS	N/A	PC PC	FOR SOCIAL SERVICES AND	50

SARASOTA, FL 34236				
HOPEHEALTH INC765 ATTUCKS LANE HYANNIS, MA 02601	N/A	PC	FOR HOSPICE AND PALLIATIVE CARE	
JEWICH EAMTLY & CHILDRENG SVCS	N/A	DC.	EOB SOCIAL SERVICES AND	

3A(4301A,1E 34230				<u> </u>
HOPEHEALTH INC765 ATTUCKS LANE HYANNIS, MA 02601	N/A	PC	FOR HOSPICE AND PALLIATIVE CARE	
JEWISH FAMILY & CHILDRENS SVCS	N/A	PC	FOR SOCIAL SERVICES AND	

IYANNIS, MA 02601			CARE	I
EWISH FAMILY & CHILDRENS SVCS 688 FRUITVILLE RD ARASOTA, FL 34237	N/A	PC	FOR SOCIAL SERVICES AND HEALTHCARE PROGRAMS	50

50

2,700

Takal	-			33 500
2688 FRUITVILLE RD SARASOTA, FL 34237			HEALTHCARE PROGRAMS	
JEWISH FAMILY & CHILDRENS SVCS	N/A	PC	FOR SOCIAL SERVICES AND	I

SARASOTA, FL 34237		TEALTHCARE TROOKAMS	
Total	 		33,590

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year KIWANIS CLUB OF LONGBOAT KEY N/A PC FOR EDUCATIONAL PROGRAMS 100 **FOUNDATION** PO BOX 8097 LONGBOAT KEY, FL 34228 N/A PC 200 OSTERVILLE VILLAGE LIBRARY FOR EDUCATIONAL & LITERACY CORPORATION PROGRAMS

43 WIANNO AVENUE OSTERVILLE, MA 02655			PROGRAMS	
OSTERVILLE HISTORICAL SOCIETY 155 W BAY RD OSTERVILLE, MA 02655	N/A	PC	FOR HISTORIC PRESERVATION PROGRAM	175
OUR LADY OF THE ASSUMPTION CHURCH 76 WIANNO AVE OSTERVILLE, MA 02655	N/A	NC	FOR PARISH SUPPORT	385
RINGLING COLLEGE LIBRARY ASSOCIATION 3178 REGATTA CIR SARASOTA, FL 34231	N/A	PC	FOR EDUCATIONAL PROGRAM	2,300

33,590

Total.

За

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	Foundation status of	Purpose of grant or contribution	Amount	
Name and address (home or business)	any foundation manager or substantial contributor	recipient			
a Paid during the year					
SARASOTA FILM SOCIETY INC 330 S PINEAPPLE AVE SARASOTA, FL 34236	N/A	NC	FOR FILM INDUSTRY EDUCATIONAL AND OUTREACH PROGRAMS	50	
FLORIDA WEST COAST SYMPHONY INC 709 N TAMIAMI TRAIL SARASOTA, FL 34236	N/A	PC	FOR MUSIC PROGRAM	3,500	
SENIOR FRIENDSHIP CENTERS INC 1888 BROTHER GREENEN WAY SARASOTA, FL 34236	N/A	NC	FOR ADULT HEALTHCARE AND EDUCATIONAL PROGRAMS	100	
SOCIETY OF AFRICAN MISSIONS SMA FATHER 23 BLISS AVE TENAFLY, NJ 07670	N/A	NC	FOR AFRICAN MISSIONS	20	
SUNCOAST SENIOR MENS TENNIS 5351 LANINGS BLVD SARASOTA, FL 34231	N/A	NC	FOR EDUCATIONAL PROGRAM	100	
Total	33,590				

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year THE UNITED WAY1445 2ND ST N/A PC. FOR WORLDWIDE PROGRAMS 2,200 SARASOTA, FL 34236 WESTCOAST BLACK THEATRE TROUPE N/A PC FOR PERFORMING ARTS 3,400 OF FL **PROGRAM** 1646 10TH WAY SARASOTA EL 34236 000 340 RINGLING COLLEGE OF ART AND N/A PC FOR ART PROGRAMS 1.040 **DESIGN INC** 

3AIA301A,1E 34230				
INLY SCHOOL INC 46 WATCH HILL DRIVE SCITUATE, MA 02066	N/A	PC	FOR EDUCATIONAL PROGRAM	2,00
MANHASSET SCHOOL COMMUNITY ASSOCIATION PO BOX 33 MANHASSET, NY 11030	N/A	PC	FOR AFTER SCHOOL PROGRAMS	34

33,590

2700 NORTH TAMIAMI TRAIL SARASOTA, FL 34234

Total . 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	Foundation status of	Purpose of grant or contribution	Amount	
Name and address (home or business)	any foundation manager or substantial contributor	recipient			
a Paid during the year					
THE TOWER FOUNDATION OF MANHASSET INC PO BOX 421 MANHASSET, NY 11030	N/A	PC	FOR AUTISM PROGRAM	2,450	
AMERICAN MUSEUM OF NATURAL HISTORY CENTRAL PARK W 79TH ST NEW YORK, NY 10024	N/A	PC	FOR SCIENTIFIC RESEACH AND EDUCATIONAL PROGRAMS	250	
THE ROTARY CLUB OF LBKPO BOX 8351 LONGBOAT KEY, FL 34228	N/A	PC	FOR SOCIAL SERVICES PROGRAM	1,050	
ST MARY STAR OF THE SEA CHURCH 4280 GULF OF MEXICO DR LONGBOAT KEY, FL 34228	N/A	NC	FOR PARISH SUPPORT	100	
THE GRACIE SWAN FOUNDATION 510 BAY ISLES ROAD LONGBOAT KEY, FL 34228	N/A	PC	FOR SWAN RESEARCH AND DEVELOPMENT PROGRAMS	1,400	
Total				33,590	

За

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	Foundation status of	Purpose of grant or contribution	Amount	
Name and address (home or business)	any foundation manager or substantial contributor	recipient			
a Paid during the year					
THE GIRL SCOUTS OF NASSAU COUNTY 110 RING ROAD WEST GARDEN CITY, NY 11530	N/A	PC	FOR YOUTH DEVELOPMENT	140	
JEWISH RECONSTRUCTION SOCIETY OF THE NOR 1001 PLANDOME ROAD PLANDOME, NY 11030	N/A	PC	FOR EDUCATIONAL PROGROM	5,020	
OPERATION OF KINDNESS FLORIDA INC 5080 GULF OF MEXICO DRIVE LONGBOAT KEY, FL 34228	N/A	PC	FOR WOUNDED FLORIDA VETERANS AND THEIR FAMILIES PROGRAM	3,035	
MARIE SELBY BOTANICAL GARDENS 811 S PALM AVENUE SARASOTA, FL 34236	N/A	PC	FOR EDUCATIONAL PROGRAM	100	
AGING IN PARADISE RESOURCE CENTER 6200 GULF OF MEXICO DR LONGBOAT KEY, FL 34228	N/A	PC	FOR ADULT HEALTHCARE AND EDUCATIONAL PROGRAMS	300	

Total . 3a 33,590

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	Foundation status of	Purpose of grant or contribution	Amount		
Name and address (home or business)	any foundation manager or substantial contributor	recipient				
a Paid during the year						
AUTISM SPEAKS INC 7333 INTERNATIONAL PL SARASOTA, FL 34240	N/A	PC	FOR AUTISM RESEARCH	100		
SARASOTA MEMORIAL HEALTHCARE FOUNDA 1515 S OSPREY AVENUE - SUITE B4 SARASOTA, FL 34239	N/A	PC	FOR HEALTHCARE PROGRAMS	100		
TEMPLE BETH SHOLOM 1966 HILLVIEW STREET SARASOTA, FL 34239	N/A	EOF	FOR THE "KIDDUSH" FUND	85		
THORNTON W BURGESS SOCIETY INC 6 DISCOVERY HILL ROAD EAST SANDWICH, MA 02537	N/A	PC	FOR EDUCATIONAL PROGRAMS	40		
COTUIT CENTER FOR THE ARTS 4404 FALMOUTH ROAD COTUIT, MA 02635	N/A	PC	FOR ART PROGRAMS	250		
Total				33,590		

efile GRAPHIC print - DO NOT	PROCESS	As Filed D	ata -		DL	N: 93491178005048
TY 2017 Accounting F	ees Sch	edule				
	Name:	LEWIS FO	OUNDATION			
<b>EIN:</b> 14-6049219						
<b>Software ID:</b> 17005038						
Software	Version:	2017v2.2	<u>;</u>			
Accounting Fees Schedule						
Category	Am	ount	Net Investme Income	ent A	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNTING FEE		9,168	4	4,584	0	4,584

### TY 2017 Depreciation Schedule

Name: LEWIS FOUNDATION

**EIN:** 14-6049219

Software ID: 17005038

Software ID: 17005038  Software Version: 2017v2.2									
Description of Property	Date Acquired	Cost or Other Basis	Prior Years' Depreciation	Computation Method	Rate / Life (# of years)	Current Year's Depreciation Expense	Net Investment Income	Adjusted Net Income	Cost of Goods Sold Not Included
OFFICE EQUIPMENT (2012)	2012-02-07	1,070	1,007	200DB	5 76 %	63			
OFFICE EQUIPMENT (2013)	2013-12-27	1,693	1,346	200DB	10 94 %	185			
OFFICE EQUIPMENT (2015)	2015-03-21	1,718	894	200DB	19 20 %	330			
OFFICE EQUIPMENT (2015)	2015-07-24	1,690	879	200DB	19 20 %	324			
OFFICE EQUIPMENT (2017)	2017-09-06	963		200DB	20 00 %	193			

DLN: 93491178005048

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491178005048
TY 2017 Investments Corpora	ate Stock Schedule	
Name:	LEWIS FOUNDATION	
EIN:	14-6049219	
Software ID:	17005038	
o c	2017 2 2	

Software Version: 2017v2.2		
Name of Stock	End of Year Book Value	End of Year Fair Market Value
TRADED STOCKS-SEE SCHEDULE NO. 1	504,461	697,306

elle GRAPHIC PHILE - DO NOT PROCESS   AS Filed Data -	DLN: 93491176003046
TY 2017 Investments - Other Schedule	
11 2017 Investments - Other Schedule	
Name: LEWIS FOUNDATION	

DI N. 02/0117900E0/9

**EIN:** 14-6049219

**Software ID:** 17005038

**Software Version:** 2017v2.2

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
TRADED MUTUAL FUNDS-SEE SCHEDULE NO. 1	AT COST	465,399	493,975
TRADED HEDGE FUNDS-SEE SCHEDULE NO. 1	AT COST	108,689	108,967
TRADED REAL ESTATE FUNDS-SEE SCH. NO. 1	AT COST	14,019	15,592
TRADED TANGIBLE ASSETS-SEE SCH. NO. 1	AT COST	40,000	23,408

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN	l: 93491178005048
TY 2017 Land, Etc. Schedule			
Name:	LEWIS FOUNDATION		
EIN:	14-6049219		
Software ID:	17005038		
Software Version:	2017v2.2		

Software version: 2017V2.2				
Category / Item	Cost / Other Basis	Accumulated Depreciation	Book Value	End of Year Fair Market Value
Machinery and Equipment	7,134	5,221	1,913	

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN	: 93491178005048	
TY 2017 Other Expenses Schedule					
-					
Name:	LEWIS FOUNDA	TION			
EIN:	14-6049219				
Software ID:	17005038				
Software Version:	2017v2.2				
Other Expenses Schedule					
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes	
EPTL FILING FEES	250	125		125	
MISCELLANEOUS	1,262	631		631	

2,157

1,079

1,078

OFFICE EXPENSE

efile GRAPHIC print - DO NOT PROCES	S As Filed Data	-	DLN	N: 93491178005048	
TY 2017 Other Professional Fees Schedule					
Nan	ne: LEWIS FOUN	NDATION			
EI	<b>IN:</b> 14-6049219				
Software I	<b>ID:</b> 17005038				
Software Version: 2017v2.2					
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes	
INVESTMENT FEES	10,198	5,099	0	5,099	

efile GRAPHIC print - DO NOT PRO	OCESS	As Filed Data	-	DLI	N: 93491178005048		
TY 2017 Taxes Schedule							
I	Name:	LEWIS FOUN	NDATION				
	EIN:	14-6049219					
Softwa	re ID:	17005038					
Software Ve	ersion:	2017v2.2					
Category	A	mount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes		
FOREIGN TAXES		436	218		218		