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.
 ▶ Go to www.irs.gov/Form990PF for instructions and the latest information.

Form 990-PF (2017)

| | For c | alend | ar year 2017 or tax year beginning , a | and ending | | | | |
|---------------|---------------------------------|-----------|---|--|---|-----------------------------------|--------------------------------|------------------------------------|
| | Nan | e of four | ndation | | | A Emplo | oyer identification number | |
| | a. | | a Foundation | | | 62 | -6279182 | |
| | | | as Foundation street (or PO box number if mail is not delivered to street address) | Ro | om/suite | | hone number (see instructions | |
| | | | Box 869 | | onvoine | | 7-734-0944 | • |
| | | | state or province, country, and ZIP or foreign postal code | | | | | |
| | W: | ilso | on WY 83014 | | | C If exer | nption application is pending, | check here |
| | G C | heck a | Il that apply Initial return Initial return Initial return | rn of a former public cl | nanty | D 1 Fo | reign organizations, check he | ere 🕨 |
| | | | Final return Amended | return | | 2 Fo | reign organizations meeting t | he |
| | | | Address change Name cha | inge | 1 | 85 | % test, check here and attach | computation • |
| | н с | heck t | ype of organization. X Section 501(c)(3) exempt private | foundation | OV | E If priva | ate foundation status was tem | ninated under |
| [| | Section | 4947(a)(1) nonexempt charitable trust Other taxable | le private foundation | | sectio | n 507(b)(1)(A), check here | ▶ _ |
| | I Fa | ır marl | ket value of all assets at J Accounting method | X Cash Acc | ruai | | foundation is in a 60-month te | |
| | en | d of ye | ear (from Part II, col (c), Other (specify) | | | under | section 507(b)(1)(B), check h | iere 🕨 📘 |
| _ | | e 16) 🎚 | | be on cash basis.) | | l | | (4) 5 - 1 |
| る語 | ∴P: | | Analysis of Revenue and Expenses (The total of | (a) Revenue and expenses per | (b) Net inv | restment | (c) Adjusted net | (d) Disbursements for chantable |
| 壁。 | | | amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions)) | books | inco | ne | income | purposes (cash basis only) |
| 64 | | 1 | Contributions, gifts, grants, etc., received (attach schedule) | 72,500 | 111, 113, 124, 127, 137, 137, 137, 137, 137, 137, 137, 13 | | | Comments of the second |
| 0 | | 2 | Check ▶ ☐ if the foundation is not required to attach Sch. B | | <i></i> | | | 3 |
| 63 | | 3 | Interest on savings and temporary cash investments | | | | | |
| JAN | | 4 | Dividends and interest from securities | | | | | 53.5/58877.5888 |
| \rightarrow | | 5a | Gross rents | | | | SECEIVED | 7. 17. 30. 30. 31. 44. |
| \mathbf{Q} | <u>•</u> | և | Net rental income or (loss) | 1 | | iiiiiiiii op iii | | |
| 当 | Revenue | 6a | Net gain or (loss) from sale of assets not on line 10 | | (<u> </u> | | | |
| Ź | | b | Gross sales price for all assets on line 6a | | . W.A.S | | | |
| 4 | æ | 7 | Capital gain net income (from Part IV, line 2) | <u> </u> | V. W. 80. 80 | <u> L0</u> | COSTAL LITA | |
| SCANNED |) | 8 | Net short-term capital gain | | | | OGDEN. UTO | |
| | | 9 | Income modifications | ************************************** | 00 77 C | 7777.300 301.380 | | |
| | | 10a | Gross sales less returns and allowances | | | | | |
| | | b | Less. Cost of goods sold | \$ 7 7 MANUAL TO THE TO | 6; V.W. | | | |
| | | 11 | Gross profit or (loss) (attach schedule) Other income (attach schedule) | | 277 | <u> </u> | - | |
| | | 12 | Total. Add lines 1 through 11 | 72,500 | | 0 | 0 | 2.79. · 3.3.1.28 |
| | | 13 | Compensation of officers, directors, trustees, etc | 0 | | | | |
| | šės | 14 | Other employee salaries and wages | | | | | |
| | penses | 15 | Pension plans, employee benefits | | | _ | | |
| | | 16a | Legal fees (attach schedule) | | | | | |
| | Operating and Administrative Ex | ь | Accounting fees (attach schedule) Stmt 1 | 100 | | 100 | | |
| | Ě | С | Other professional fees (attach schedule) | | | | | |
| | tra | 17 | Interest | | | | | |
| | Ę. | 18 | Taxes (attach schedule) (see instructions) | | | | | Z.MX |
| | Ē | 19 | Depreciation (attach schedule) and depletion | | | | | |
| | Ā | 20 | Occupancy | 15 700 | - | | | 15,799 |
| | ğ | 21 | Travel, conferences, and meetings | 15,799 | | | | 15,799 |
| | ă | 22 | Printing and publications | | | | | |
| | ng. | 23 24 | Other expenses (att sch) Total operating and administrative expenses. | | | | | |
| | ā | 24 | Add lines 13 through 23 | 15,899 | | 100 | 0 | 15,799 |
| | Þe | 25 | Contributions, gifts, grants paid | 55,426 | | | 7 788 | 55,426 |
| | 0 | 26 | Total expenses and disbursements. Add lines 24 and 25 | 71,325 | | 100 | | |
| | _ | 27 | Subtract line 26 from line 12 | | X 3, 7 73 | W 1887 | | |
| | | a | Excess of revenue over expenses and dishursements | 1,175 | Toppide and Carlo | 2.00 88800 ได้สีครั้งสิทธิการ์ | | |
| | | b | Net investment income (if negative, enter -0-) | 7 , 3 | | 0 | | |
| | | ۱ _ | Adjusted net income (if negative enter -0-) | N / / W / / W | | | 0 | Y 7 % 35 % W |

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4,355

4,355

3

4

5

6

3 Other increases 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

Decreases not included in line 2 (itemize) ▶

Add lines 1, 2, and 3

| Rant IV Capital Gains a | nd Losses for Tax on Investme | ent Income | 02-02/9182 | | Page 3 |
|--|--|--|---------------------------------------|--|--|
| (a) List and describe | the kind(s) of property sold (for example, real estate, irehouse, or common stock, 200 shs MLC Co) | (b) How acquired P – Purchase D – Donation | (c) Date acqui | | |
| 1a N/A | | | D = OGILLION | | - |
| b | | | | | |
| С | | - | | | |
| d | | | | | |
| e | | | | | |
| (e) Gross sales pnce | (f) Depreciation allowed (or allowable) | | or other basis pense of sale | | (h) Gain or (loss) e) plus (f) minus (g)) |
| a | | | | | |
| b | | | | | |
| С | | | | | |
| <u>d</u> | | | | | |
| e | | 10/0 | | | |
| Complete only for assets showing | g gain in column (h) and owned by the fo | oundation on 12/3 | 1/69. | | ins (Col (h) gain minus |
| (i) FMV as of 12/31/69 | (j) Adjusted basis as of 12/31/69 | | cess of col (i) | | but not less than -0-) or bases (from col. (h)) |
| a | | | | | |
| _b | | | | | |
| <u>c</u> | | | | | |
| d | | | | | |
| е | | D-41 1 7 | | | |
| 2 Capital gain net income or (net c | apital loss) If gain, also enter in | | | | |
| 2. Not about town comital coin or (los | If (loss), enter -0- in | _ | ŀ | 2 | |
| | ss) as defined in sections 1222(5) and (6 , column (c) See instructions. If (loss), e | | | | |
| Part I, line 8 | | | | 3 | |
| Part V Qualification Ur | nder Section 4940(e) for Reduc | ed Tax on Ne | t Investment Inco | me | |
| | nis part blank tion 4942 tax on the distributable amoun lify under section 4940(e) Do not compli | | e base period? | | Yes X No |
| | each column for each year, see the instr | · · · · · · · · · · · · · · · · · · · | king ony ontrios | | |
| 1 Enter the appropriate amount in (a) | | uctions before ma | | | (d) |
| Base period years | (b) Adjusted qualifying distributions | Net va | (c) liue of nonchantable-use asset | s , | Distribution ratio |
| Calendar year (or tax year beginning in 2016 | / | ,938 | 4 . 4 | 197 | 12.883700 |
| 2015 | | ,170 | 30,: | | 1.881644 |
| 2014 | | ,964 | 66,0 | | 0.877804 |
| 2013 | | ,483 | 134, | | 0.547682 |
| 2012 | | ,110 | 213, | | 0.267334 |
| 2 Total of line 1, column (d) | | , | | 2 | 16.458164 |
| . , , | 5-year base period – divide the total on I | ine 2 by 5 0 or by | the | | |
| | has been in existence if less than 5 years | | | 3 | 3.291633 |
| 4 Enter the net value of noncharita | ble-use assets for 2017 from Part X, line | : 5 | | 4 | 3,669 |
| 5 Multiply line 4 by line 3 | | | | 5 | 12,077 |
| 6 Enter 1% of net investment incor | ne (1% of Part I, line 27b) | | | 6 | |
| 7 Add lines 5 and 6 | · · | | | 7 | 12,077 |
| 8 Enter qualifying distributions fron | n Part XII. line 4 | | | 8 | 71,225 |
| If line 8 is equal to or greater that | n line 7, check the box in Part VI, line 1b | , and complete the | at part using a 1% tax r | ــــــــــــــــــــــــــــــــــــــ | |
| Part VI instructions | | | | | |

2

3

5

b

d

R 9

10

11

4a

7

8a

complete Part XIV

If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General

Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(I)(5) for calendar year 2017 or the taxable year beginning in 2017? See instructions for Part XIV If "Yes,"

Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their

(or designate) of each state as required by General Instruction G? If "No," attach explanation

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·X

8b

| | irt VII-A Sta | tements Regarding Activities (continued) | | . <u> </u> | | | |
|----|------------------------|---|---------------|------------|------------------|--------------|-----------------|
| | • | | | | 879 | Yes | No |
| 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>X</u> |
| 12 | Did the foundation | make a distribution to a donor advised fund over which the foundation or a disqualified | | | | | |
| | person had advisor | ry privileges? If "Yes," attach statement. See instructions | | | 12 | | X |
| 13 | Did the foundation | comply with the public inspection requirements for its annual returns and exemption ap | plication? | | 13 | X | <u>L_</u> |
| | Website address | | | | | | |
| 14 | | | elephone no 🕨 | 307-7 | 34- | 094 | 4 |
| | P | . O. Box 869 | | | | | |
| | Located at ▶ Wil | son WY | ZIP+4 ▶ | 83014 | 4 | | |
| 15 | Section 4947(a)(1) | nonexempt chantable trusts filing Form 990-PF in lieu of Form 1041 - check here | | | | | ▶ □ |
| | and enter the amou | unt of tax-exempt interest received or accrued during the year | ▶ [_ | 15 | | | |
| 16 | At any time during | calendar year 2017, did the foundation have an interest in or a signature or other autho | rity | | | Yes | No |
| | over a bank, secur | ities, or other financial account in a foreign country? | | | 16 | | X |
| | See the instruction | s for exceptions and filing requirements for FinCEN Form 114 If "Yes," enter the name | of | | | . % | |
| | the foreign country | > | | | | | |
| Pa | in VII-B Sta | tements Regarding Activities for Which Form 4720 May Be Requir | ed | | | | |
| | File Form 4720 if | any item is checked in the "Yes" column, unless an exception applies. | | | | Yes | No |
| 1a | During the year, die | d the foundation (either directly or indirectly) | | | | | |
| | (1) Engage in the | sale or exchange, or leasing of property with a disqualified person? | Yes | X No | | 7% ,? | |
| | (2) Borrow money | from, lend money to, or otherwise extend credit to (or accept it from) a | _ | _ | | | |
| | disqualified pe | rson? | Yes | X No | | . | 1 13 |
| | (3) Furnish goods, | , services, or facilities to (or accept them from) a disqualified person? | Yes | X No | | / // | |
| | (4) Pay compensa | ition to, or pay or reimburse the expenses of, a disqualified person? | Yes | X No | 8 77 | | |
| | (5) Transfer any in | ncome or assets to a disqualified person (or make any of either available for | _ | | | | |
| | the benefit or u | use of a disqualified person)? | Yes | X No | | | \$70 |
| | (6) Agree to pay m | noney or property to a government official? (Exception. Check "No" if the | _ | _ | 8. 73 | Œ. | £,\i |
| | foundation agr | eed to make a grant to or to employ the official for a period after | | | | (() | |
| | termination of | government service, if terminating within 90 days) | Yes | X No | * | ** | \ |
| b | If any answer is "Y | es" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Re | gulations | | × | | |
| | section 53 4941(d) | -3 or in a current notice regarding disaster assistance? See instructions | | N/A | 1b | | |
| | Organizations relyi | ng on a current notice regarding disaster assistance, check here | | ▶ 🗍 | | 1 | |
| С | Did the foundation | engage in a prior year in any of the acts described in 1a, other than excepted acts, that | t | | (2000) (2000) | _\%. | Cal. |
| | were not corrected | before the first day of the tax year beginning in 2017? | | N/A | 1c | | |
| 2 | Taxes on failure to | distribute income (section 4942) (does not apply for years the foundation was a private | • | | 2 ,/ | J*** | 18 |
| | operating foundation | on defined in section 4942(j)(3) or 4942(j)(5)) | | | 120 | | wid. |
| а | At the end of tax ye | ear 2017, did the foundation have any undistributed income (lines 6d and | | | | | ∮ ₩ |
| | 6e, Part XIII) for ta | x year(s) beginning before 2017? | Yes | X No | | | |
| | If "Yes," list the yea | ars ▶ 20 , 20 , 20 , 20 | | | | . %: | |
| b | Are there any year | s listed in 2a for which the foundation is not applying the provisions of section 4942(a)(| 2) | | | * ** | 1399.0 |
| | (relating to incorred | ct valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2 | !) to | _ | | 140 | (CCS |
| | all years listed, and | swer "No" and attach statement – see instructions) | | N/A | 2b | ļ | <u> </u> |
| C | If the provisions of | section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here | | | | | 123 |
| | ▶ 20 , 20 | , 20 , 20 | | | 7 Y | ľà, | |
| 3a | Did the foundation | hold more than a 2% direct or indirect interest in any business enterprise | | | 1383 | ľ·. | |
| | at any time during | the year? | Yes | X No | | / /// | / |
| b | | excess business holdings in 2017 as a result of (1) any purchase by the foundation or | | | | <i>,</i> %/ | |
| | disqualified person | s after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the | ne | | | ľŻ | 1. ; |
| | Commissioner und | ler section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the laps | e of | | | | 1. |
| | the 10-, 15-, or 20- | year first phase holding period? (Use Schedule C, Form 4720, to determine if the | | | | | |
| | foundation had exc | ess business holdings in 2017) | | N/A | _3b | | |
| 4a | Did the foundation | invest during the year any amount in a manner that would jeopardize its charitable purp | ooses? | | 4a | | X |
| b | | make any investment in a prior year (but after December 31, 1969) that could jeopardiz | | | & . | | |
| | charitable purpose | that had not been removed from jeopardy before the first day of the tax year beginning | in 2017? | | 4b | | X |
| | | | | | Form 99 | 0-P | F (2017) |

| -orm | 1990-PF (2017) STEYAS FOUL | Idacion | | 2/3102 | | |
|---------|---|---|---------------------------------------|-----------------------------|---|--|
| Re | rt VII-B Statements Regar | ding Activities for Which F | <u>form 4720 May Be R</u> | equired (conti | inued) | ************************************** |
| 5a | During the year did the foundation pay | or incur any amount to | | _ | _ | |
| | (1) Carry on propaganda, or otherwise | e attempt to influence legislation (se | ection 4945(e))? | <u> </u> | es X No | |
| | (2) Influence the outcome of any spec | ific public election (see section 495 | 55), or to carry on, | | <u></u> | |
| | directly or indirectly, any voter regi | stration drive? | | <u></u> | es X No | |
| | (3) Provide a grant to an individual for | travel, study, or other similar purpo | oses? | Y | es 🗓 No | |
| | (4) Provide a grant to an organization | other than a charitable, etc., organ | ization described in | | | |
| | section 4945(d)(4)(A)? See instruc | tions | | <u> </u> | es 🛚 X No | % /#/3/%: |
| | (5) Provide for any purpose other than | religious, charitable, scientific, lite | erary, or educational | | _ | |
| | purposes, or for the prevention of | cruelty to children or animals? | | Y | es 🛚 X No | |
| b | If any answer is "Yes" to 5a(1)-(5), did | any of the transactions fail to qual | lify under the exceptions de | escribed in | | |
| | Regulations section 53.4945 or in a cu | rrent notice regarding disaster ass | istance? See instructions | | N/A | 5b |
| | Organizations relying on a current noti | ce regarding disaster assistance, c | check here | | ▶ ∐ | |
| С | If the answer is "Yes" to question 5a(4 |), does the foundation claim exemp | otion from the tax | . — | | |
| | because it maintained expenditure res | ponsibility for the grant? | | N/A 📗 Y | ′es ∐ No | |
| | If "Yes," attach the statement required | by Regulations section 53 4945-5 | (d) | | | |
| 6a | Did the foundation, during the year, re- | ceive any funds, directly or indirect | ly, to pay premiums | | | |
| | on a personal benefit contract? | | | <u></u> | es 🗓 No | |
| b | Did the foundation, during the year, pa | y premiums, directly or indirectly, o | on a personal benefit contr | act? | | 6b X |
| | If "Yes" to 6b, file Form 8870 | | | - | | |
| | At any time during the tax year, was the | | | _ | es X No | .A. Die jan |
| | If "Yes," did the foundation receive any | proceeds or have any net income | attributable to the transac | tion? | N/A | 7b |
| P | | Officers, Directors, Trustee | es, Foundation Mana | agers, Highly | Paid Employe | ees, |
| | and Contractors | | | | | |
| 1 I | ist all officers, directors, trustees, ar | nd foundation managers and the | ir compensation. See ins | structions. | | Ι |
| | | | (b) Title, and average | (c) Compensation | (d) Contributions to employee benefit | (e) Expense account, |
| | (a) Name an | d address | hours per week devoted to position | (If not paid, enter -0-) | plans and deferred | other allowances |
| | | | | | compensation | |
| | H. Sayers, Jr | Wilson | Trustee | | | |
| | O. Box 869 | WY 83014 | 0.00 | 0 | 0 | 0 |
| | ndy Sayers | Wilson | Trustee | | | |
| | O. Box 869 | WY 83014 | 0.00 | 0 | 0 | 0 |
| | len D. Lentz | Wilson | Trustee | | 0 | |
| ₽. | O. Box 869 | WY 83014 | 0.00 | | 0 | - |
| | | | | | | |
| | Compensation of five highest-paid | employees (other than those inc | luded on line 1 – see inst | tructions) If non | e enter | |
| - | "NONE." | employees (other than those me | tuded on mile i ede me | | o, oo. | |
| | | | (b.) Title and suggest | | (d) Contributions to | |
| | (a) Name and address of each employe | ee paid more than \$50,000 | (b) Title, and average hours per week | (c) Compensation | employee benefit plans and deferred | (e) Expense account, other allowances |
| | ,, | | devoted to position | | compensation | Outer anowances |
| NC | ONE | | | | | |
| | | | | | | |
| | | | | | | <u> </u> |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| T - 4 - | I number of other employees paid over | £50.000 | | | | 0 |

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|-----------------|---|-----------------------------------|---------------------------------------|
| Part VIII | Information About Officers, Directors, Trustees, Fo | oundation Managers, Highly Paid E | mployees, |
| 3 Five high | • and Contractors (continued) est-paid independent contractors for professional services. See | nstructions If none enter "NONE" | |
| 3 Five Ingli | (a) Name and address of each person paid more than \$50,000 | (b) Type of service | (c) Compensation |
| NONE | (a) Name and addicase of cash person paid more than 900,000 | (0) 1/1/0 0.00.110 | , , , , , , , , , , , , , , , , , , , |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| Total number of | others receiving over \$50,000 for professional services | | |
| Part IX-A | | | |
| | 's four largest direct chantable activities during the tax year. Include relevant statistical information other beneficianes served, conferences convened, research papers produced, etc. | nation such as the number of * | Expenses |
| 1 N/A | | | |
| | · | | |
| 2 | | | |
| | | | |
| 3 | | | |
| | | | |
| 4 | | | |
| | | | <u> </u> |
| Part IX-B | Summary of Program-Related Investments (see in | nstructions) | 1 |
| | argest program-related investments made by the foundation during the tax year on lines 1 an | d 2 | Amount |
| 1 N/A | | | |
| 2 | | . | |
| | | | |

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All other program-related investments. See instructions

Total. Add lines 1 through 3

62-6279182 Form 990-PF (2017) Sreyas Foundation 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: Average monthly fair market value of securities 1a 1b Average of monthly cash balances Fair market value of all other assets (see instructions) 1c 1d Total (add lines 1a, b, and c) Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation) Acquisition indebtedness applicable to line 1 assets 2 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) 5 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4. 183 Minimum investment return. Enter 5% of line 5 Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ▶ ☐ and do not complete this part.) 183 Minimum investment return from Part X, line 6 1 2a Tax on investment income for 2017 from Part VI, line 5 2a Income tax for 2017 (This does not include the tax from Part VI.) 2b h 2c Add lines 2a and 2b 183 3 3 Distributable amount before adjustments Subtract line 2c from line 1 4 4 Recoveries of amounts treated as qualifying distributions 183 5 5 Add lines 3 and 4 6 Deduction from distributable amount (see instructions) Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, 7 183 7 line 1 Part XII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: 71,225 Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26 1a 1b Program-related investments - total from Part IX-B b 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) 3a Cash distribution test (attach the required schedule) 3b Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4 4 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income

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

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Enter 1% of Part I, line 27b. See instructions

Adjusted qualifying distributions. Subtract line 5 from line 4

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

| | 990-PF (2017) STEYAS FOUND | acion | | 02-02/31 | 02 | rage 3 |
|--------|--|--------------------|--|--|--|--|
| Pa | rt XIII Undistributed Income | (see instructions) | | | <u>,</u> . | |
| | | | (a) | (b) | (c) | (d) |
| 1 | Distributable amount for 2017 from Part X | (I, | Corpus | Years pnor to 2016 | 2016 | 2017 |
| | line 7 | | / | (4.5) S. W. (90.9) | 73 | 183 |
| 2 | Undistributed income, if any, as of the en- | d of 2017: | 7 W., FW, W. W. | | | |
| а | Enter amount for 2016 only | | | | | |
| b | Total for prior years: 20 , 20 | , 20 | | | 2003.007.779 | |
| 3 | Excess distributions carryover, if any, to 2 | | Market Village | 77 Y 20 Y 20 Y 37 W 10 Y | | 105/21/1997 All |
| ă | From 2012 | 46,507 | | | | |
| h | From 2013 | 66,798 | ///////////////////////////////////// | | | |
| | From 2014 | 54,718 | | | | |
| ا | From 2015 | 55,651 | | | | |
| u | From 2016 | 57,713 | | | | |
| e | , | 31,113 | 281,387 | | ymbyy, y | |
| ۱ 4 | Total of lines 3a through e | 4 VII | 2027 207 | | | |
| 4 | Qualifying distributions for 2017 from Par | t AII, | | | | |
| | line 4 ▶ \$ 71,225 | _ | | | Maisis and realite & Side I'M | |
| | Applied to 2016, but not more than line 2 | _ | 3586.0037.0038.00 | 1000 0000 0000 000 000 000 000 000 000 | 827477774878888 | |
| D | Applied to undistributed income of prior y | eais | | | | |
| | (Election required – see instructions) | | <u>ranos (, </u> | 77.55 5.88.83 8.88.88 | | |
| С | Treated as distributions out of corpus (Ele | ection | | | | |
| _ | required – see instructions) | | 3000000 V (c) //s | | | 183 |
| d | Applied to 2017 distributable amount | | 71 042 | | | 103 |
| | Remaining amount distributed out of corp | | 71,042 | | | 3477375.385.385. |
| 5 | Excess distributions carryover applied to | | . X. X. A. | | | |
| | (If an amount appears in column (d), the | same | | | | |
| | amount must be shown in column (a)) | | | | | |
| 6 , | Enter the net total of each column as | | | | | |
| | indicated below: | | | | | |
| à | Corpus Add lines 3f, 4c, and 4e Subtrac | ct line 3 | 352,429 | 7 /10 / / 10 K w 20 Marine | *************************************** | a contraction of the contraction |
| b | Prior years' undistributed income. Subtra- | ct | | | | |
| | line 4b from line 2b | | 3773. 327473.5550 | -: | | |
| С | Enter the amount of prior years' undistrib | uted | | | | |
| | income for which a notice of deficiency has | as , | | | | |
| | been issued, or on which the section 494 | 2(a) | | | | |
| | tax has been previously assessed | | 12. 3. 282. 3. | | <u> </u> | |
| d | Subtract line 6c from line 6b Taxable | | | | 828.9.8827. | |
| | amount - see instructions | | 884.77 <u></u> | | ## 77 J. S. | |
| е | Undistributed income for 2016 Subtract I | line | | | | |
| | 4a from line 2a Taxable amount - see | | | | | Kamaza |
| | instructions | | | | | -36 '*** |
| f | Undistributed income for 2017. Subtract I | lines | PCCunik vij | | | |
| | 4d and 5 from line 1 This amount must be | oe . | | | | |
| | distributed in 2018 . * | | | (2000) | 7077877. | 0 |
| 7 | Amounts treated as distributions out of co | orpus | | | 1686 3.6 | |
| | to satisfy requirements imposed by section | on | | | | |
| | 170(b)(1)(F) or 4942(g)(3) (Election may | be | | | | Bakeri (Mali |
| | required—see instructions) | | | | | |
| 8 | Excess distributions carryover from 2012 | not · | | | | |
| | applied on line 5 or line 7 (see instruction | | 46,507 | | | (Paniominapidomina) |
| 9 | Excess distributions carryover to 2018 | | | | 6. 1. 3. 3. 3. 7. 7. 7. 7. 7. 7. 7. 7. 7. 7. 7. 7. 7. | |
| , | Subtract lines 7 and 8 from line 6a | | 305,922 | | | |
| 10 | Analysis of line 9 | | | <i>1888</i> | | () () () () () () () () () () |
| а | Excess from 2013 | 66,798 | | | Marshallar Comman | Marian an dadam |
| b | Excess from 2014 | 54,718 | and expensive framework of the | | | |
| c | Excess from 2015 | 55,651 | | | | |
| d | Excess from 2016 | . 57,713 | | | | |
| e | Excess from 2017 | 71,042 | | | DAS (MEA) | |

| Form | 990-PF (2017) Sreyas Found | ation | | 62-6279 | 182 | |
|-------------|--|--|--------------------------|--------------------------|------------------------|-------------------------|
| | rt XIV Private Operating Fou | | structions and Pa | rt VII-A, question | 9) | _ |
| 1a | If the foundation has received a ruling or | | | | | |
| | foundation; and the ruling is effective for | 2017, enter the date o | f the ruling | • | | |
| b | Check box to indicate whether the foundation | | | bed in section | 4942(j)(3) or 49 | 942(j)(5) |
| 2a | Enter the lesser of the adjusted net | Tax year | | Pnor 3 years | | |
| | income from Part I or the minimum | (a) 2017 | (b) 2016 | (c) 2015 | (d) 2014 | (e) Total |
| | investment return from Part X for | · · · · · · · · · · · · · · · · · · · | | | | |
| | each year listed | | | | | |
| b | 85% of line 2a | | | | | - |
| c | Qualifying distributions from Part XII, | <u> </u> | | | | |
| | line 4 for each year listed | | | | | |
| d | Amounts included in line 2c not used directly | <u>=- +</u> | \ = - | | | <u> </u> |
| _ | for active conduct of exempt activities | | | | | |
| е | Qualifying distributions made directly | | | | / | - |
| | for active conduct of exempt activities | | | / | | |
| | Subtract line 2d from line 2c | | | | | |
| 3 | Complete 3a, b, or c for the | | | | | · |
| • | alternative test relied upon | | | / | | |
| а | "Assets" alternative test – enter | | | / | | |
| _ | (1) Value of all assets | | | / | 1 | |
| | (2) Value of assets qualifying under | | | / | | |
| | section 4942(j)(3)(B)(i) | | / | 1 | | |
| b | "Endowment" alternative test – enter 2/3 | | | | | |
| | of minimum investment return shown in | | | | | |
| | Part X, line 6 for each year listed | | | | | |
| С | "Support" alternative test – enter | | | | | |
| | (1) Total support other than gross | | | | | |
| | investment income (interest, | | | | | |
| | dividends, rents, payments on | | / | | 1 | |
| | securities loans (section | | / | | | |
| | 512(a)(5)), or royalties) | | 7 | | - | - |
| | (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 | · | | | | |
| P | Supplementary Inform | nation (Complete | this part only if | the foundation | had \$5,000 or mo | ore in assets at |
| | any time during the ye | <u>ear – see instruc</u> | tions.) | | | |
| 1 | Information Regarding Foundation Ma | - | | | | |
| а | List any managers of the foundation who | | | | | |
| | before the close of any tax year (but only | of they have contribute | ed more than \$5,000) | (See section 507(d) | (2).) | |
| | N/A | | | | | |
| b | List any managers of the foundation who | | • | | ge portion of the | |
| | ownership of a partnership or other entity | of which the foundat | ion has a 10% or grea | iter interest | | |
| | N/A | | | | | |
| 2 | Information Regarding Contribution, C | | | | lulaaa mek (| |
| | | | to preselected charital | | | |
| | unsolicited requests for funds If the foun | | ants, etc , to individua | is or organizations ur | naer otner conditions, | |
| | complete items 2a, b, c, and d. See instr | | £10 | | | _ |
| а | The name, address, and telephone numb | | tne person to whom | applications should b | e addressed: | |
| | Hanley Sayers 301-73 | | | | | |
| | P.O. Box 869 Wilson | | | | | <u> </u> |
| b | The form in which applications should be | submitted and inform | ation and materials th | ey snoula include | | |
| | See Statement 2 | | | | | |
| С | Any submission deadlines: | | | | | |
| — | N/A | anale and the second of the | Carlones absorbed 0 | Salala Incerta of months | lone or -th -:: | |
| d | Any restrictions or limitations on awards, | such as by geographi | cai areas, charitable f | ieias, kinas ot institut | ions, or other | |
| | factors N/A | | | | | |
| | N/A | | | | | Form 990-PF (201 |
| DAA | | | | | | 101111 000-11 (20) |

Form 990-PF (2017) Sreyas Foundation 62-6279182 Page **11** Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient show any relationship to Purpose of grant or status of Amount any foundation manager contribution recipient Name and address (home or business) or substantial contributor a Paid during the year Shikar Safari Club 501(c)3 7834 South Lake Shore None Tempe AZ 85284 Wildlife education 28,206 Community Foundation 501(c)3 3833 Cleghorn Ave #400 None Community improvement Nashville TN 37215 2,000 Montgomery Bell Academy West End Ave 501(c)3 None Nashville TN 37205 Education 10,000 National Museum of 2820 Rungius Rd 501(c)3 None Jackson Hole WY 83002 Wildlife appreciation 8,750 Hoover Institution 501(c)3 434 Galvez Mall None Stanford CA 94305 Operating fund 1,000 Misc organizations 501(c)3 None Jackson WY 83001 misc 5,470 55,426 3a Total b Approved for future payment N/A

Total

▶ 3b

| ı, | art XVI-A | Analysis of Income-Producing Acti | vities | | | | |
|----|---------------|--|---------------------------------------|---|--|--|---|
| | | unts unless otherwise indicated | 1 | ed business income | Exclude | d by section 512, 513, or 514 | (2) |
| | | | (a) Business code | (b) Amount | (c) Exclusion code | (d) Amount | (e) Related or exempt function income (See instructions) |
| 1 | Program sen | vice revenue. | | - | | | (See insudctions) |
| | | | | | | | |
| | b | | | | | | |
| | c | | | | <u> </u> | | |
| | d | | _ | - | 1 | | |
| | e | | | | 1 | · | |
| | f | | | | <u> </u> | | |
| | • | d contracts from government agencies | | | 1 | | |
| | | dues and assessments | | | 14 | <u>-</u> | |
| | | avings and temporary cash investments | <u> </u> | | 14 | | |
| | | d interest from securities | M/M/7 | 7.7 (388) 8.7 (3.8 (3.8 (3.8 (3.8 (3.8 (3.8 (3.8 (3.8 | 2777207 | N 80 C 1 C 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | 7. S. |
| 5 | | come or (loss) from real estate. | <u> </u> | 8 . \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ | ************************************* | N. 89 - ANN - 2007 - 2023 - 3 | 7,4 48,7 (88,8 (80, 1, 7, 1, 1) |
| | | anced property | | | | | |
| _ | | -financed property | | | | | |
| | | come or (loss) from personal property | | | | | |
| - | Other investr | | | | | · | |
| | - | from sales of assets other than inventory | | <u></u> | | | |
| | | or (loss) from special events | | | <u> </u> | _ | |
| | | or (loss) from sales of inventory | | | | | |
| 11 | | ue: a | | | + | - | |
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| | e | | | | | 0 | 0 |
| | | d columns (b), (d), and (e) | | i | · PX:32 | 13 | 0 |
| | | ne 12, columns (b), (d), and (e) | | | | 13 _ | |
| | Part XVI-B | In line 13 instructions to verify calculations) Relationship of Activities to the Activities | complishe | ent of Exempt P | urnose | | |
| | Line No. | Explain below how each activity for which income | | | | | <u>.</u> |
| | Lille No. ▼ | accomplishment of the foundation's exempt purpo | | | | | |
| _ | N/A | accomplishment of the foundation of exempt purpo | 000 (0110) 1110 | r by protium grames to | | <u>,</u> | |
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| orm 990 | -PF (201 | 7) Sreyas Fo | undati | .on | | 62-6 | 279182 | | | Page 13 |
|--------------|-------------|--|-------------------|--------------------------|--|------------------------|--------------------|--------------------------------------|--------------|--------------|
| Part X | X# | Information Rega Exempt Organiza | arding Tra | ansfers To and | d Transactio | ns and Relation | onships Wit | h Noncharitab | | • |
| 1 Did | | nization directly or indi | | e in any of the foll | owing with any o | ther organization | described | ·- | Y | es No |
| ın s | ection 50 | 01(c) (other than section | | • | - | | Jeschbed | | | |
| v | anızatıon | | | | | | | | 長沙杉 | |
| a Tra | nsfers fro | om the reporting found | ation to a no | ncharitable exemp | ot organization of | | | | Jan Jan | villanis |
| (1) | Cash | | | | | | | | 1a(1) | _ X |
| (2) | Other as | ssets | | | | | | | 1a(2) | X |
| b Oth | er transa | ictions | | | | | | | | |
| (1) | Sales of | assets to a nonchanta | able exempt | organization | | | | | 1b(1) | X |
| (2) | Purchas | es of assets from a no | ncharitable (| exempt organization | on | | | | 1b(2) | X |
| (3) | Rental o | of facilities, equipment, | or other ass | ets | | | | | 1b(3) | X |
| (4) | Reimbui | rsement arrangements | i | | | | | | 1b(4) | x |
| (5) | Loans o | r loan guarantees | | | | | | | 1b(5) | X |
| • • | | ance of services or me | embership or | fundraising solicit | tations | | | | 1b(6) | X |
| ٠, | | acilities, equipment, ma | • | _ | | | | | 1c | X |
| | • | r to any of the above is | • | • | | nn (b) should alwa | evs show the fa | ır market | • | |
| | | goods, other assets, o | | | | | | | | |
| | | transaction or sharing | | | | | | | | |
| (a) Lin | | (b) Amount involved | | of nonchantable exemp | | | | ansactions, and sharing a | rrangements | |
| I/A | | | | | | | | | | |
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| | | | | | | | | | | |
| | | ation directly or indired section 501(c) (other | | | | -exempt organizat | ions | | Yes | X No |
| b If" | Yes," con | nplete the following sc | hedule | | | T | | | | |
| | | a) Name of organization | | (b) Type of o | rganization | | (c) Descrip | tion of relationship | | |
| N/2 | A | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | <u> </u> | _ | | | |
| | | | | | <u> </u> | ļ | | | | |
| | Under nor | nalties of perjury, I declare th | at I have exami | ned this return includes | a accompanying sch | adulas and statements | and to the best of | my knowledge and helie | f it is true | |
| | correct, ar | nd complete Declaration of p | oreparer (other t | than taxpayer) is based | on all information of | which preparer has any | knowledge | | | _ |
| | / | | | | | | | May the IRS disc with the prepare | | |
| ign | | -11 | 11. | | | , , | | See instructions | | |
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| | | ature of office or trustee | / | | T _ | | - 1100 | | | |
| | Pont/Ty | pe preparer's name | / | | Preparer's signatu | re | 1. | Date | | heck X if |
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| | Firm's a | | wood, | | 7 | | ŀ | Firm's EIN ► | 5-312 | -8247 |
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Schedule B

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

Schedule of Contributors

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

► Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047

2017

Name of the organization **Employer identification number** 62-6279182 Sreyas Foundation Organization type (check one) Filers of: Section: 501(c)(Form 990 or 990-EZ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions. **General Rule** X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II See instructions for determining a contributor's total contributions. Special Rules For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 331/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1 Complete Parts I and II For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, chantable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals Complete Parts I, II, and III. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000 If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, chantable, etc., contributions totaling \$5,000 or more during the year Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Page 1 of 1

Page 2

Name of organization
Sreyas Foundation

Foundation Property of the Pro

Employer identification number 62-6279182

| Part L | Gontributors (see instruct | ions). Use duplicate copies | of Part I if additional space is n | eeded. |
|------------|---|-----------------------------------|------------------------------------|--|
| (a) No. | (I Name, addres | o) s, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 1 | J. H. Sayers, Jr. P.O. Box 869 Wilson | WY 83014 | \$ 72,500 | Person X Payroll Noncash (Complete Part II for noncash contributions.) |
| (a) No. | Name, addres | o) s and 7IP + 4 | (c) Total contributions | (d) Type of contribution |
| NO. | Name, address | s, and an 1 4 | \$ | Person Payroll Noncash (Complete Part II for noncash contributions.) |
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SREYAS Sreyas Foundation 62-6279182

Federal Statements

10/31/2018 3:53 PM

FYE: 12/31/2017

| Form 990-PF, Part II | III, Line 3 - Other Increases |
|--|---|
| Description | Amount |
| Prioryear adjustment | \$ |
| Total | \$ <u> </u> |
| Statement 2 - Form 990-PF, Part XV, Line | 2b - Application Format and Required Contents |
| Description | |
| Written applications with address, con phone mumber. | itact person and |
| Form 990-PF, Part XV, L | ine 2c - Submission Deadlines |
| Description | |
| N/A | |
| Form 990-PF, Part XV, Line 20 | d - Award Restrictions or Limitations |
| Description | |
| N/A | |