# 2949115324215 OMB No 1545-0052 **Return of Private Foundation**

Department of the Treasury Internal Revenue Service

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

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

Open to Public Inspection

Fo	r calen	dar year 2017 or tax year beginning		2017, and	ending		, 20
	me of for		· · · · · · · · · · · · · · · · · · ·			r identification numb	
LE	EWIS 1	FOUNDATION			74-2	936403	
		d street (or P O box number if mail is not delivered to street address)		Room/suite	B Telephor	e number (see instruct	ions)
PC	ВОХ	8488			(936)730-1154		
Ci	ty or towr	n, state or province, country, and ZIP or foreign postal code				tion application is pend	ing, check here ▶ □
н	INTSV	ILLE TX 77340					g, 0.,000. 1.0.02
		<del></del>	n of a former p	ublic charity	D 1. Foreig	n organizations, check	here ▶□
-		☐ Final return ☐ Amended	-	•			_
		Address change Name cha	nge			n organizations meeting here and attach compi	
, H	Check	type of organization: Section 501(c)(3) exempt p	private founda	tion 10	E If private	foundation status was	terminated under
,		in 4947(a)(1) nonexempt charitable trust		~ ~	section 5	07(b)(1)(A), check here	▶∐
ī		narket value of all assets at   J   Accounting method			F 1645 - 6		
		f year (from Part II, col. (c), Other (specify)	-	<del></del> '	under se	ndation is in a 60-mont ction 507(b)(1)(B), chec	n termination k here ► 🗍
	line 16		e on cash basis	.)			_
P	art I	Analysis of Revenue and Expenses (The total of			.l <u></u>		(d) Disbursements
		amounts in columns (b), (c), and (d) may not necessarily equal	(a) Revenue a expenses pe	, (D) Ne	t investment ncome	(c) Adjusted net income	for charitable purposes
		the amounts in column (a) (see instructions))	books	] '	ilcome	lincome	(cash basis only)
_	1	Contributions, gifts, grants, etc., received (attach schedule)		37.74	., 14 4 10 .	Kr Star	•
	2	Check ► 🗵 if the foundation is <b>not</b> required to attach Sch. B	40. 4 1. 4 mg-	-0 -1-03-4-			
	3	Interest on savings and temporary cash investments	<u></u>		34.	1.2.45 × 1.2.3	
	4	Dividends and interest from securities			30,564.		
	5a	Gross rents	<u> </u>		30/301.		
	b	Net rental income or (loss)	- I Town to the same				
a	1 .	Net gain or (loss) from sale of assets not on line 10	<del> </del>		- 15 JE		
Revenue	b	Gross sales price for all assets on line 6a		<del>-,   - ',</del>			
ē	7	Capital gain net income (from Part IV, line 2)	<del> </del>		59,596.	<del></del>	
æ	8	Net short-term capital gain	r - '(, , ' = 4		Single a	<u> </u>	· -
	9	Income modifications	***************************************	7			
	10a	Gross sales less returns and allowances	,	1			
	b	Less: Cost of goods sold		76.	# g	(F) (G)	
	C	Gross profit or (loss) (attach schedule)	<del>                                     </del>		*****		<del>                                     </del>
	11	Other income (attach schedule)	-	<del>-   · · ·</del>			
; <b>:</b>	12	Total. Add lines 1 through 11			90,194.		ECEIVED
,	13	Compensation of officers, directors, trustees, etc.	-	<del></del>	30/1211		
Seuses	14	Other employee salaries and wages	F			18	MAY 2 2 7018
SUS	15	Pension plans, employee benefits			<del></del>	88	WAL & Z LOID
ğ	16a	Legal fees (attach schedule)					
ũ	b	Accounting fees (attach schedule) L-1.6b. Stmt.	9	50.	950.		GDEN, UT
<u>ĕ</u> .	C	Other professional fees (attach schedule)		-			
ati	17	Interest			<del></del>		<del> </del>
str	18	Taxes (attach schedule) (see instructions) See Stmt	2,3	11.	2,311.		
Ξ.	19	Depreciation (attach schedule) and depletion		=-	<u> </u>		
E	20	Occupancy	<u> </u>				
Ă	21	Travel, conferences, and meetings				<del></del>	
5	22	Printing and publications				<del></del>	
Operating and Administrative Ex	23	Other expenses (attach schedule) See St.mt.					
<u>.</u>	24	Total operating and administrative expenses.					
<u>ra</u>		Add lines 13 through 23	3,2	61.	3,261.		
o e	25	Contributions, gifts, grants paid	100,0		<u> </u>		100,000.
0	26	Total expenses and disbursements. Add lines 24 and 25	103,2		3,261.	<del></del>	100,000.
_	27	Subtract line 26 from line 12:					
	a	Excess of revenue over expenses and disbursements	-103,2	61.			
	b	Net investment income (if negative, enter -0-) .	100,12	<del>`-</del> -	86,933.		
	C	Adjusted net income (if negative, enter -0-)			<del>3-1300.</del>	<del></del>	<del></del>
	<del></del>					<del></del>	

For Paperwork Reduction Act Notice, see instructions.

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Da	et (1)	Balance Sheets Attached schedules and amounts in the description column	Beginning of year			f year
Fa	rt II	should be for end-of-year amounts only. (See instructions)	(a) Book Value	(b) Book Valu	ie	(c) Fair Market Value
	1	Cash—non-interest-bearing				
	2	Savings and temporary cash investments	3,806.	1,2	54.	1,254.
ļ	3	Accounts receivable ►				
		Less: allowance for doubtful accounts ▶	<u></u>		. –	•
}	4	Less: allowance for doubtful accounts ▶ Pledges receivable ▶	9 2 1 2 14 27 2 27 3 4 28 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	4 Tree 35		
1		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 ▶	1	Î		
2	8	Inventories for sale or use				
Assets	9	Prepaid expenses and deferred charges				
As	10a	Investments – U.S. and state government obligations (attach schedule)				
1	b	Investments—corporate stock (attach schedule)				
	C	Investments—corporate bonds (attach schedule)				<del></del>
	11	Investments—land, buildings, and equipment: basis ▶	とは、大きながった人を教	7. 4. 1 p 2.		<del></del>
		Less: accumulated depreciation (attach schedule) ▶	afantida sa Alambida - Anada I			*
	12	Investments—mortgage loans				
	13	Investments—other (attach schedule)	<u> </u>			<del></del>
	14	Land, buildings, and equipment: basis ▶				· · · · · · · · · · · · · · · · · · ·
		Less: accumulated depreciation (attach schedule) ▶				-
	15	Other assets (describe ► L-15 Stmt )	1,495,806.	1,485,2	64	1,916,199.
	16	Total assets (to be completed by all filers—see the	1,155,000.	2/100/2	<del>• • • • • • • • • • • • • • • • • • • </del>	1/510/155.
		instructions. Also, see page 1, item l)	1 499 612	1 486 5	1 Ω	1 917 /53
_	17	Accounts payable and accrued expenses	1/100/012.	1/100/3	<del>10.</del>	, ,
	18	Grants payable	<del></del>	<del></del>		
es	19	Deferred revenue		<del> </del>		}
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons	<del></del>	<del></del>		
ap	21	Mortgages and other notes payable (attach schedule)	<del></del>			
Ë	22				-	
	23	Other liabilities (describe ► )  Total liabilities (add lines 17 through 22)				
_	-	Foundations that follow SFAS 117, check here				
alances		and complete lines 24 through 26, and lines 30 and 31.				
2	24	Unrestricted				
ala	25	Temporarily restricted				r ·
Ö	26	Permanently restricted				
Net Assets or Fund B		Foundations that do not follow SFAS 117, check here ▶ ⊠			<del> </del>	
Ī	1	and complete lines 27 through 31.	Í			
ō	27	Capital stock, trust principal, or current funds				
ţ	28	Paid-in or capital surplus, or land, bldg., and equipment fund				
Se	29	Retained earnings, accumulated income, endowment, or other funds	1,499,612.	1,486,5	18.	
As	30	Total net assets or fund balances (see instructions)	1,499,612.	1,486,5		
et	31	Total liabilities and net assets/fund balances (see	27.337.022.			
Z	•	instructions)	1,499,612.	1,486,5	18.	
Pa	rt III				<del></del>	·
		al net assets or fund balances at beginning of year—Part II, coli		st agree with	Γ	<u> </u>
		-of-year figure reported on prior year's return)			1	1,499,612.
2		er amount from Part I, line 27a			2	-103,261.
		er increases not included in line 2 (itemize) ► NET_INVESTMEN			3	90,167.
		I lines 1, 2, and 3			4	1,486,518.
5		reases not included in line 2 (itemize) PRIOR YEAR FIT			5	
		al net assets or fund balances at end of year (line 4 minus line 5) –	-Part II, column (b), I		6	1,486,518.

Part	V Capital Gains an	d Losses for Tax on Investr	nent Income			
	(a) List and describe the k 2-story brick wareho	ind(s) of property sold (for example, real euse, or common stock, 200 shs MLC Co	estate, )	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo., day, yr)	(d) Date sold (mo , day, yr )
1a	AMER FDS PFT GRW &	INC		Р	12/12/2014	12/11/2017
<u>b</u>	AMERICAN MOD GR &	INC		P	01/22/2016	
	AMERICAN MUTUAL FU			P	01/01/2016	
d	CAPITAL INCOME BUI	LDER		P	07/25/2012	12/11/2017
<u> </u>	See Statement		1	<u> </u>		
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		r other basis ense of sale		ain or (loss) s (f) minus (g))
<u>a</u>	46,300.		ļ	36,975.		9,325.
<u> </u>	41,000.			33,620.		7,380.
c	2,400.			1,655.		745.
<u>d</u>	1,600.			1,321.		279.
<u>e</u>	48, 154.	oving gars in column (h) and oving	by the foundation	6,287.		41,867.
	(i) FMV as of 12/31/69	owing gain in column (h) and owned  (j) Adjusted basis as of 12/31/69	(k) Exce	ss of col. (i)	col (k), but r	ol. (h) gain minus not less than -0-) <b>or</b> (from col. (h))
a						9,325.
b						7,380.
c						745.
d						279.
е						41,867.
2	Capital gain net income of		also enter in Pa , enter -0- in Pa		2	59,596.
3	If gain, also enter in Par	tin or (loss) as defined in sections t I, line 8, column (c). See instru	actions. If (loss	), enter -0- in <b>}</b>	3	
Part	V Qualification Un	der Section 4940(e) for Red	uced Tax on I	Vet Investment	Income	
Was t		ve this part blank. e section 4942 tax on the distribu qualify under section 4940(e). De			base period?	☐ Yes 🗷 No
1		ount in each column for each ye			aking any entries	<del></del> ,
Cal	(a) Base period years endar year (or tax year beginning i	(b)		(c) of noncharitable-use a	esete C	(d) distribution ratio divided by col (c))
	2016	80,0	000.	1,617,6	529.	0.049455
	2015	90,0	000.	1,580,8	397.	0.056930
	2014	139,8	372.	1,715,6	662.	0.081527
	2013	93,0	000.	1,786,7	759.	0.052050
	2012	95,9	68.	1,857,1	155.	0.051675
2		for the 5-year base period—di	vide the total or	n line 2 by 5.0, o	r by	0.291637
	the number of years the	foundation has been in existence	e if less than 5 y	ears	. 3	0.058327
4	Enter the net value of no	ncharitable-use assets for 2017	from Part X, line	5	. 4	1,761,919.
5	Multiply line 4 by line 3				. 5	102,767.
6	Enter 1% of net investme	ent income (1% of Part I, line 27t	o)		. 6	869.
7	Add lines 5 and 6				. 7	103,636.
8	If line 8 is equal to or gre	ions from Part XII, line 4 eater than line 7, check the box i	 n Part VI, line 1	b, and complete	. 8 that part using a	100,000. 1% tax rate. See the
	Part VI instructions.					

Part '	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4940(c)	48—se	e instr	uctio	ns)
1a	Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ and enter "N/A" on line 1.		-		
	Date of ruling or determination letter (attach copy of letter if necessary—see instructions)	- 1	N/		
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here ► ☐ and enter 1% of Part I, line 27b	1	1,	739.	
С	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of Part I, line 12, col. (b).				-
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)	2		0.	
3	Add lines 1 and 2	3	1,	739.	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)	4	-	0.	
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0	5	1,	739.	
6	Credits/Payments:				
а	2017 estimated tax payments and 2016 overpayment credited to 2017 6a				
b	Exempt foreign organizations—tax withheld at source 6b	}	•		
С	Tax paid with application for extension of time to file (Form 8868) . 6c				
d	Backup withholding erroneously withheld				
7	Total credits and payments. Add lines 6a through 6d	7			
8	Enter any <b>penalty</b> for underpayment of estimated tax. Check here X if Form 2220 is attached	8		49.	
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9	1,	788.	
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid Enter the amount of line 10 to be: Credited to 2018 estimated tax	10		0.	
11 Post		11			
1a	VII-A Statements Regarding Activities  During the tax year, did the foundation attempt to influence any national, state, or local legislation	or did	it	Yes	No
ıa	participate or intervene in any political campaign?		" <u>1a</u>	163	×
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes?			<del> </del>	
	instructions for the definition		1b		×
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any	materia	als		
	published or distributed by the foundation in connection with the activities.				
C	Did the foundation file Form 1120-POL for this year?		1c		×
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:  (1) On the foundation. ▶ \$  (2) On foundation managers. ▶ \$				
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax in on foundation managers. ▶ \$	nposed	i		
2	Has the foundation engaged in any activities that have not previously been reported to the IRS? .  If "Yes," attach a detailed description of the activities.		2		×
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, a incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	articles 	of 3		×
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4a		×
b	If "Yes," has it filed a tax return on Form 990-T for this year?		4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?  If "Yes," attach the statement required by <i>General Instruction T</i> .		5		×
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:				
	By language in the governing instrument, or				
	By state legislation that effectively amends the governing instrument so that no mandatory direct	ions th	at		
	conflict with the state law remain in the governing instrument?				×
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), an	d Part X	<del></del>	×	
8a	Enter the states to which the foundation reports or with which it is registered. See instructions.				
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney (or designate) of each state as required by General Instruction G? If "No," attach explanation	Gener	rai 8b	×	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 49-	12(1)(3)	<u> </u>	<del>  ^-</del> -	
3	4942(j)(5) for calendar year 2017 or the tax year beginning in 2017? See the instructions for Part XIV.				
	complete Part XIV		"   9	1	×
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule lis		eır		<u> </u>
	names and addresses		10		×

Part	VII-A Statements Regarding Activities (continued)			
			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		×
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		×
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	×	
	Website address ► N/A	<b>'</b>		
14	The books are in care of ► NEUWIRTH SLAUGHTER & ASSOCIATES Telephone no. ► (936)  Located at ► P.O. BOX 8488 HUNTSVILLE TX ZIP+4 ► 77340			)
15	Located at ► P.O. BOX 8488 HUNTSVILLE TX ZIP+4 ► 77340 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—check here		·····	<b>▶</b> 🗵
	and enter the amount of tax-exempt interest received or accrued during the year ▶   15			0.
16	At any time during calendar year 2017, 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		×
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of	f		
	the foreign country ▶			<u>L</u>
Part	VII-B Statements Regarding Activities for Which Form 4720 May Be Required		15-	
_	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):	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	Ì	
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? ☐ Yes ☒ No (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			1
	disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	-	1.	
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for			
	the benefit or use of a disqualified person)?			]
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the	-		ļ
	foundation agreed to make a grant to or to employ the official for a period after	1		l
	termination of government service, if terminating within 90 days.)	}	ļ	
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	1b	<u> </u>	
_	Organizations relying on a current notice regarding disaster assistance, check here	Ì		
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 2017?	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 2017, did the foundation have any undistributed income (lines 6d and			
	6e, Part XIII) for tax year(s) beginning before 2017?	1		
	If "Yes," list the years ▶ 20 , 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)			1
	(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.)	QL.		
_	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	2b	<del> </del>	<del> </del>
С	to the provisions of section 4942(a)(z) are being applied to any of the years listed in 2a, list the years here.  ▶ 20, 20, 20, 20, 20			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
<b>J</b> u	at any time during the year?	}		
ь	If "Yes," did it have excess business holdings in 2017 as a result of (1) any purchase by the foundation or			
Ü	disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the			1
	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 2017.)	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		×
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 2017?	4b		×

Part	VII-B	<b>Statements Regarding Activities</b>	for W	hich Form	4720 l	May Be R	equire	d (conti	nued)			
5a	-	year, did the foundation pay or incur a	-								Yes	No
		on propaganda, or otherwise attempt to						☐ Yes	⊠ No			
		nce the outcome of any specific public				•	arry on,		-	ļ	]	
		y or indirectly, any voter registration dri						Yes	⊠ No			
		le a grant to an individual for travel, stu	-		-			☐ Yes	⊠ No	}	, ,	
		le a grant to an organization other than new 4945(d)(4)(A)? See instructions			organiza 		ibea in		<b>.</b>	ŀ		
		le for any purpose other than religious,					 Sational	☐ Yes	⊠ No	j	] ]	
		ses, or for the prevention of cruelty to c						☐Yes	⊠ No			
b		wer is "Yes" to 5a(1)-(5), did any of the										
		ns section 53.4945 or in a current notice								5b	-	
	-	ions relying on a current notice regardir	_	_					▶□	00		
С		wer is "Yes" to question 5a(4), does the							ت ،			
		t maintained expenditure responsibility							□No		] ]	
	If "Yes," a	ttach the statement required by Regula	itions s	ection 53.49	45–5(d)			_				
6a		undation, during the year, receive any					emiums					
	on a pers	onal benefit contract?						☐ Yes	<b>⋈</b> No			
b	Did the fo	undation, during the year, pay premium	ns, dire	ctly or indired	tly, on	a personal	benefit	contract	? .	6b		<u>×</u>
		6b, file Form 8870.						_				
		e during the tax year, was the foundation a						☐ Yes				
		lid the foundation receive any proceeds								7b		
Par		nformation About Officers, Directand Contractors	iors, i	rustees, F	ounga	tion Mana	agers,	Hignly i	'aid E	mpioy	ees,	
1		ficers, directors, trustees, and found	ation r	nanagers an	d their	compens	ation S	See instri	ections			
_ <u>.</u> _	213( 411 01	noors, and totals, trustoco, and round		e, and average		npensation		Contribution				
		(a) Name and address		rs per week ed to position		ot paid, ter -0-)		yee benefit erred compe		(e) Expe	allowan	
ROY	LEWIS		MANA									
		ST 175TH COURT EDMOND OK 73012		2.00		0.			0.			0.
				-								
										<del>_</del>		
2	Company	sation of five highest-paid employee	e loth	or than thos	e incl	ided on li	no 1	see instr	uction	e) If n	000	nter
2	"NONE."	sation of five flightest-paid employee	s (our	er man mos	e more	ded on n	iie i — :	see msu	uction	sj. 11 11	one, e	mer
				01.TH				(d) Contribi	itions to			
	(a) Name and	address of each employee paid more than \$50,00	0	(b) Title, and a hours per v	/eek	(c) Compe	sation	employee	benefit	(e) Expe	nse acc allowan	
				devoted to po	osition			compen		Other	anowan	003
NONE	2						-			-		
				<b></b>								
				<del> </del>		L					<del>_</del>	
Total	number of	other employees paid over \$50,000 .		L						0		
- Clai	namber of	Carlot employees paid over 400,000 .	<u> </u>	· · · · ·	···	· · · · ·	<del></del>	· · ·		Form <b>99</b>	0-PF	(2017)
BAA			RE	/ 01/03/18 PRO					,	Jiii <b>J</b>	<b>-</b>	(2017)

Form 990-PF (2	2017)	Page <b>7</b>
Part VIII	Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Emand Contractors (continued)	nployees,
3 Five	highest-paid independent contractors for professional services. See instructions. If none, enter "NONI	E."
	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NONE		
<del></del>		
Tatal numb	or of others readilying a ver \$50,000 for professional continue	
	er of others receiving over \$50,000 for professional services	0
Part IX-A	Summary of Direct Charitable Activities	
	indation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of ins and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1		
2		
3		1
4		
Part IX-B	Summary of Program-Related Investments (see instructions)	<u></u>
Describe th	the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1		
2		
All other pr	ogram-related investments. See instructions	
3		
Total. Add	lines 1 through 3	
BAA	REV 01/03/18 PRO	Form <b>990-PF</b> (2017

Part	see instructions.)	gn io	undations,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes:		
а	Average monthly fair market value of securities	1a	1,778,319.
b	Average of monthly cash balances	1b	10,431.
С	Fair market value of all other assets (see instructions)	1c	0.
d	<b>Total</b> (add lines 1a, b, and c)	1d	1,788,750.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	1,788,750.
4	Cash deemed held for charitable activities. Enter 11/2% of line 3 (for greater amount, see		
	instructions)	4	26,831.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	1,761,919.
6	Minimum investment return. Enter 5% of line 5	6	88,096.
Part	XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating f and certain foreign organizations, check here ► and do not complete this part.)	ounda	ations
1	Minimum investment return from Part X, line 6	1	88,096.
2a	Tax on investment income for 2017 from Part VI, line 5 2a 1,739.		
b	Income tax for 2017. (This does not include the tax from Part VI.) 2b	]	
c	Add lines 2a and 2b	2c	1,739.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	86,357.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	86,357.
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	
	line 1	7	86,357.
Par	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc. – total from Part I, column (d), line 26	1a	100,000.
b	Program-related investments—total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	100,000.
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	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	100,000.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating qualifies for the section 4940(e) reduction of tax in those years.	g whe	
			5 .000 DE (0017)

art a	Unaistributea income (see instructio	ns)			<del> </del>
1	Distributable amount for 2017 from Part XI,	(a) Corpus	(b) Years prior to 2016	(c) 2016	(d) 2017
	Ine 7				86,357.
2	Undistributed income, if any, as of the end of 2017.				
а	Enter amount for 2016 only			0.	
b	Total for prior years: 20,20,20				
3	Excess distributions carryover, if any, to 2017:				
а	From 2012 0.		•		i I
b	From 2013 0.				i
С	From 2014				ı
d	From 2015				
e	From 2016				
f	Total of lines 3a through e	16,368.			
4	Qualifying distributions for 2017 from Part XII,	20,0001			
•	line 4: ▶ \$ 100,000.			1	
_	Applied to 2016, but not more than line 2a .				
a b	Applied to undistributed income of prior years			+	
D	(Election required—see instructions)		'		
_	Treated as distributions out of corpus (Election				;
C	required—see instructions)				!
					60,000
d	Applied to 2017 distributable amount	20 011			69,989.
е -	Remaining amount distributed out of corpus	30,011.			16 260
5	Excess distributions carryover applied to 2017	16,368.			16,368.
	(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:				
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	30,011.			
b	Prior years' undistributed income. Subtract				!
	line 4b from line 2b		0.		
С	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					'
	amount-see instructions		0.		
е	Undistributed income for 2016. Subtract line				
	4a from line 2a. Taxable amount-see				
	instructions			0.	
f	Undistributed income for 2017. Subtract lines				
	4d and 5 from line 1. This amount must be				
	distributed in 2018				0.
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	-			
•	applied on line 5 or line 7 (see instructions) .	0.			
9	Excess distributions carryover to 2018.	, , , , , , , , , , , , , , , , , , ,			
3	Subtract lines 7 and 8 from line 6a	30,011.			
40	Analysis of line 9:	30,011.		-	
10	Excess from 2013			[	
a		1			
b	Excess from 2014	-			
C	Excess from 2015	-			
d	Excess from 2016	4			
е	Excess from 2017 30,011.	<u>l</u>	<u> </u>	<u> </u>	- 000 DE (0017

ırt.	XIV Private Operating Foundat	<b>ions</b> (see instru	ctions and Part	VII-A, question 9)		N/A
а	If the foundation has received a ruling					
	foundation, and the ruling is effective for		_	<u></u>	+i	1040()
b	Check box to indicate whether the found Enter the lesser of the adjusted net	Tax year	operating tourida	Prior 3 years	ction	3) or _ 4942(j)
а	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	(4) 2011	(8) 2010	(0) 2010	(4) 2014	
ь	85% of line 2a	···	_			
0	Qualifying distributions from Part XII,					<del></del>
	line 4 for each year listed					
d	Amounts included in line 2c not used directly for active conduct of exempt activities				,	
e	Qualifying distributions made directly					
•	for active conduct of exempt activities. Subtract line 2d from line 2c					
	Complete 3a, b, or c for the			<del>                                     </del>		
	alternative test relied upon:					
а	"Assets" alternative test-enter					
	(1) Value of all assets					
	(2) Value of assets qualifying under					
b	section 4942(j)(3)(B)(i)			-		
U	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 securities loans (section 512(a)(5)), or royalties)					
	(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
	(3) Largest amount of support from an exempt organization	7				
	(4) Gross investment income					
rt	XV Supplementary Information	•	•	the foundation ha	ad \$5,000 or mo	re in assets
	any time during the year-		ns.)		· · · · · · · · · · · · · · · · · · ·	
_	Information Regarding Foundation			O/ of the total contr	الممينا ممسورة ويطا	4b 6
а	List any managers of the foundation vibefore the close of any tax year (but o					by the foundation
	N/A	my in they have o	ominated more t	nan 40,000j. (000 bc	000000000000000000000000000000000000000	
	List any managers of the foundation	who own 10% o	r more of the sto	ck of a corporation	(or an equally lar	ge portion of the
_	ownership of a partnership or other er					5 F
	N/A					
	Information Regarding Contribution	, Grant, Gift, Loa	n, Scholarship,	etc., Programs:		
	Check here ► 🗵 if the foundation					
	unsolicited requests for funds. If the fo		gifts, grants, etc.	, to individuals or or	ganizations under	other condition
	complete items 2a, b, c, and d. See in		<del></del>	<del></del>		<del></del>
а	The name, address, and telephone nu	mber or email ad	dress of the perso	on to whom applicat	ions should be ad	dressed:
	See Supplementary Informat	ion Statemen	it			
	The form in which applications should			I materials they shou	ıld include:	

factors:

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

Part XV Supplementary Information (continued)

Recipient	If recipient is an individual,	Foundation		
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	status of recipient	Purpose of grant or contribution	Amount
a Paid during the year	or substantial contributor		<u> </u>	
EDMOND ANIMAL SERVICES				
EDMOND ANIMAL SERVICES 2424 OLD TIMBERS RD				İ
EDMOND OK 73034		TAV_EVEMENT	DONATION	
HOPE CENTER OF EDMOND		I HAY-DADMEI	DONATION	0
1251 N BROADWAY				
EDMOND OK 73034		TAY_EVEMOT	DONATION	0.
DEER CREEK CHURCH OF CHRIST		I MA - DADPIF I	DONATION	0.
6225 NW 178TH ST				
EDMOND OK 73003	]	TAY-FYFMDT	DONATION	15,000.
MD ANDERSON		INV DVPHET	DONALION	13,000.
MD ANDERSON 1				
HOUSTON TX 77001		TAY_FYFMDT	DONATION	7,500.
WESTVIEW BOYS' HOME		TAY DYDIAL I	DONALION	7,300.
PO BOX 553				
HOLLIS OK 73550		ቸልሃ <u>-</u> ድሃፑΜቦጥ	DONATION	15,000.
MERCY HEALTH FOUNDATION		I'III UNDIII I	DOMATION	15,000.
PO BOX 3266				
OKLAHOMA CITY OK 73101		TAX-EXEMPT	DONATION	7,500.
INFANT CRISIS SERVICES				7,500.
4224 N LINCOLN BLVD				
OKLAHOMA CITY OK 73105		TAX-EXEMPT	DONATION	0.
THE CHIRSTIAN CHRONICLE				1
PO BOX 11000				
OKLAHOMA CITY OK 73136		TAX-EXEMPT	DONATION	5,000.
CENTRAL OKLAHOMA HUMANE SOCIETY				3,333.
9300 N MAY AVE STE 400-281				
OKLAHOMA CITY OK 73120		TAX-EXEMPT	DONATION	0.
See Statement				
		}		
				50,000.
Total			▶ 3	a 100,000.
b Approved for future payment				
		ĺ		
		ļ		
Total				b

Form 990-PF (2017)

BAA

_	_	Analysis of Income-Producing Ad		<del></del>	T- · · · · · · · · · · · · · · · · · · ·		····
Ente	r gro	ss amounts unless otherwise indicated.	(a)	(b)	(c)	(d)	(e) Related or exempt function income
1	Pro	gram service revenue:	Business code	Amount	Exclusion code	Amount	(See instructions)
·	а	<b>3</b> • • • • • • • • • • • • • • • •					
	b						
	C						
	d						
	е						
	f						
	g	Fees and contracts from government agencies					
2	Mei	mbership dues and assessments				· · · · · · · · · · · · · · · · · · ·	
3		rest on savings and temporary cash investments					
4		idends and interest from securities					
5		rental income or (loss) from real estate:					
		Debt-financed property					
		Not debt-financed property					
6		rental income or (loss) from personal property					
7		er investment income					
8		n or (loss) from sales of assets other than inventory			<del> </del> -		
9		income or (loss) from special events			<del> </del> -		
10		oss profit or (loss) from sales of inventory			<del> </del>		
11	_	ner revenue: a	····				
	b						
	d d		<del></del>		<del> </del>		
	e						<del></del>
12	-	ototal. Add columns (b), (d), and (e)					<del> </del>
						13	L
		ksheet in line 13 instructions to verify calculation					
		VI-B Relationship of Activities to the A		ent of Exemp	ot Purposes		
Lin	e No	<del></del>				-A contributed ii	mportantly to the
	▼	accomplishment of the foundation's exempt pur	poses (other tha	n by providing fu	nds for such purp	oses). (See instruc	ctions.)
						<del> </del>	·
						<del>-</del>	· <del></del>
		<del></del>			<del></del>		<del></del>
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		<del> </del>			<del></del>		
		<del></del>	<del></del>			<del></del>	

REV 01/03/18 PRO

Part XVII	Information Regarding Transfers to and Transactions and Relationships With Noncharitable Ex	empt
	Organizations	

1	ın se		rectly or indirectly on their than section								Yes	No
а	Trans	fers from the rep	orting foundation to	a nonch	arıtable exer	npt orga	anizatıon	of:				Ţ
	(1) C	ash									1a(1)	×
	(2) 0	ther assets .									1a(2)	×
b	Other	transactions:									, ,	
	(1) Sa	ales of assets to	a noncharitable exe	mpt orga	inization .						1b(1)	×
	(2) Pt	urchases of asse	ts from a noncharita	able exem	npt organizat	tion .					1b(2)	×
			equipment, or othe								1b(3)	×
			rangements								1b(4)	×
		oans or loan guar									1b(5)	×
		-	rvices or membersh								1b(6)	×
С			quipment, mailing lis		_					•	1c	×
ď		-	of the above is "Yes				-					
u			ther assets, or servi									
			on or sharing arrang									
(a) Line		b) Amount involved	(c) Name of nonch					ription of transfe	·			
(a) Lill	110 1	b) Amount involved	(c) Name of honer	iaillable exe		-	(u) Desci	TPHON OF TRANSIC	ns, transactio		- Ing arrangem	
			<del>-</del>									
			<del></del>									
									· · · · · · · · · · · · · · · · · · ·			
	-											
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			·····									
						l						
2a			ctly or indirectly af									
	descr	ribed in section 5	01(c) (other than se	ction 501	(c)(3)) or in s	ection 5	27? .			[	Yes 🗵	No
b	If "Ye	s," complete the	following schedule									
		(a) Name of organi	zation		(b) Type of orga	anızatıon			(c) Description	on of relation	nship	
											<del></del>	
		·										
					<del></del>				<del></del>			
	Unde	r penalties of periury. I	declare that I have examine	ed this return	, including accom	npanying so	hedules and	d statements, and	to the best of	my knowled	ge and belief. i	t is true.
Sign			aration of preparer (other th							<del></del>		
Here		IK as -t		ı	this	148	4D.C.D				RS discuss this reparer shown b	
пет		ature of officer or trus	etee		Date	Trtle	1BER			See instruc	tions XYes	□No
		Print/Type preparer		Prenater	's signature		<del></del>	Date	т-		TIN	
Paid		' ' '			Jaighaid	111	_		Chec	k		
Prep	arer		GHTER, CPA			UV		<u> [05/03/2</u>	ı		20081512	0
Use	Only	Firm's name ▶	Neuwirth Sla				L.L.I	•	Firm's EIN I			
		Firm's address ▶	168 Col. Eth	eredge	Blvd. St			<del> </del>	Phone no.		91-8500	
BAA			Huntsville			ΤX	77340	t		Fo	rm 990-PF	(2017)

**Continuation Statement** Restrictions N/A Submission Information LEWIS FOUNDATION Form 990-PF: Return of Private Foundation Part XV, Line 2: Supplementary Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc. N/A Form Information N/A Name and Address Information N/A

# Form 990-PF: Return of Private Foundation

Part XV, Line 3a: Grants and Contributions Paid During the Year Continuation Statement

Recipient name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a Paid during the year				
DEAN MCGEE EYE INSTITUTE FOUNDATION 608 STANTON L YOUNG BLVD OKLAHOMA CITY, OK 73104		TAX- EXEMPT	DONATION	5,000.
SALVATION ARMY PO BOX 2536 OKLAHOMA CITY, OK 73101		TAX- EXEMPT	DONATION	15,000.
PREVENT BLINDNESS 6 NE 63RD ST SUITE 150 OKLAHOMA CITY, OK 73105		TAX EXEMPT	DONATION	0.
WOUNDED WARRIOR PROJECT PO BOX 758540 TOPEKA, KS 66675		TAX EXEMPT	DONATION	20,000.
OKLAHOMA HEART HOSPITAL RESEARCH FOUNDATION 4200 W MEMORIAL RD STE 510 OKLAHOMA CITY, OK 73120		TAX EXEMPT	DONATION	10,000.
		,		50,000.

## Form 990-PF: Return of Private Foundation

# Part IV: Capital Gains and Losses for Tax on Investment Income

### **Continuation Statement**

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)			(b) How acquired P-Purchase D-Donation	(c) Date	(d) Date sold	
CAPITAL WORLD GRW & IN	С		P	01/01/16	12/11/17	
FUNDAMENTAL INVESTORS	FUND A		P	01/22/16	12/11/17	
INVESTMENT CO OF AMERI	CA		P	01/01/16	12/11/17	
VARIOUS CAPITAL GAIN D	IST		P	01/10/16	12/11/17	
(e) Gross sales price allowed (or basis plus			st or other us expense of sale	(h) Gain (e) plus (g	(f) minus	
2,100.			1,421.		679.	
3,900.			2,861.		1,039.	
2,700.			2,005.		695.	
39,454.			0.		39,454.	
48,154.	. 0.		6,287.		41,867.	
Complete only for assets showing gain in column ( the foundation on 12/31/69			ess of col.	(1) Gains gain minus but not less	col. (k), than -0-)	
(1) F.M.V. as of 12/31/69	of 12/31/69	(1) over	col. (j), if any	or Losses (from col (h))		
					679.	
				<del>_</del>	1,039.	
					695.	
					39,454.	
0.]	0.		0.		41,867.	

2017

Name	Employer Identification No
LEWIS FOUNDATION	74-2936403

#### Line 16a - Legal Fees

Name of Provider	Type of Service Provided	Amount Paid Per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
al to Form 990	_   D-PF, Part I, Line 16a				

#### Line 16b - Accounting Fees

Name of Provider	Type of Service Provided	Amount Paid Per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
NEUWIRTH SLAU	TAX PREPARATIO	950.	950.		
Total to Form 990-	PF, Part I, Line 16b	950.	950.		

#### Line 16c - Other Professional Fees

Name of Provider	Type of Service Provided	Amount Paid Per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
<u> </u>					
otal to Form 990	)-PF, Part I, Line 16c				

Name LEWIS FOUNDATION				ver Identification No 936403
Line 15 - Other Assets:	Beginning Year Book Value	Bool Value		f Year Fair Market Value
MUTUAL FUNDS	1,495,806.	1,485,		1,916,199.
Totals to Form 990-PF, Part II, line 15	1,495,806.	1,485, Beginn Year Bo Value	ing ook	Ending Year Book Value
Totals to Form 990-PF, Part II, line 22				