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Form **990-PF**Department of the Treasury  
Internal Revenue Service**Return of Private Foundation**  
or Section 4947(a)(1) Nonexempt Charitable Trust  
Treated as a Private Foundation**Note.** The foundation may be able to use a copy of this return to satisfy state reporting requirements

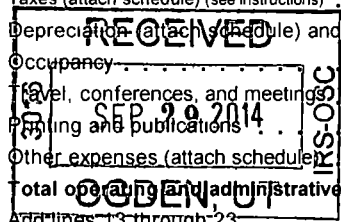
OMB No 1545-0052

**2012****Open to Public Inspection****For calendar year 2012 or tax year beginning , 2012, and ending , 20**

Name of foundation <b>THE KT FAMILY FOUNDATION</b>		<b>A Employer identification number</b> 91-2151390						
Number and street (or P O box number if mail is not delivered to street address) <b>C/O TAX DEPT; P.O. BOX 2076</b>		<b>B Telephone number (see instructions)</b> 253-733-4628						
City or town, state, and ZIP code <b>TACOMA, WA 98401-2076</b>		<b>C</b> If exemption application is pending, check here <input type="checkbox"/>						
<b>G</b> Check all that apply: <table style="display: inline-table; vertical-align: top;"> <tr><td><input type="checkbox"/> Initial return</td><td><input type="checkbox"/> Initial return of a former public charity</td></tr> <tr><td><input type="checkbox"/> Final return</td><td><input checked="" type="checkbox"/> Amended return</td></tr> <tr><td><input checked="" type="checkbox"/> Address change</td><td><input type="checkbox"/> Name change</td></tr> </table>		<input type="checkbox"/> Initial return	<input type="checkbox"/> Initial return of a former public charity	<input type="checkbox"/> Final return	<input checked="" type="checkbox"/> Amended return	<input checked="" type="checkbox"/> Address change	<input type="checkbox"/> Name change	<b>D</b> 1 Foreign organizations check here <input type="checkbox"/> 2 Foreign organizations meeting the 85% test check here and attach computation <input type="checkbox"/>
<input type="checkbox"/> Initial return	<input type="checkbox"/> Initial return of a former public charity							
<input type="checkbox"/> Final return	<input checked="" type="checkbox"/> Amended return							
<input checked="" type="checkbox"/> Address change	<input type="checkbox"/> Name change							
<b>H</b> Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		<b>E</b> If private foundation status was terminated under section 507(b)(1)(A) check here <input type="checkbox"/>						
<b>I</b> Fair market value of all assets at end of year (from Part II, col (c), line 16) <b>\$ 321,260.00</b>		<b>F</b> If the foundation is in a 60-month termination under section 507(b)(1)(B) check here <input type="checkbox"/>						
<b>J</b> Accounting method: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____								

<b>Part I Analysis of Revenue and Expenses</b> (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
<b>Revenue</b>	1 Contributions, gifts, grants, etc., received (attach schedule) . . . . .	100,000.00			
	2 Check <input type="checkbox"/> if the foundation is not required to attach Sch. B . . . . .				
	3 Interest on savings and temporary cash investments . . . . .				
	4 Dividends and interest from securities . . . . .				
	5a Gross rents . . . . .				
	b Net rental income or (loss) . . . . .				
	6a Net gain or (loss) from sale of assets not on line 10 . . . . .				
	b Gross sales price for all assets on line 6a . . . . .				
	7 Capital gain net income (from Part IV, line 2) . . . . .				
	8 Net short-term capital gain . . . . .				
	9 Income modifications . . . . .				
	10a Gross sales less returns and allowances . . . . .				
b Less Cost of goods sold . . . . .					
c Gross profit or (loss) (attach schedule) . . . . .					
11 Other income (attach schedule) . . . . .					
12 <b>Total.</b> Add lines 1 through 11 . . . . .	100,000.00				
<b>Operating and Administrative Expenses</b>	13 Compensation of officers, directors, trustees, etc . . . . .				
	14 Other employee salaries and wages . . . . .				
	15 Pension plans, employee benefits . . . . .				
	16a Legal fees (attach schedule) . . . . .				
	b Accounting fees (attach schedule) . . . . .				
	c Other professional fees (attach schedule) . . . . .				
	17 Interest . . . . .				
	18 Taxes (attach schedule) (see instructions) . . . . .				
	19 Depreciation (attach schedule) and depletion . . . . .				
	20 Occupancy . . . . .				
	21 Travel, conferences, and meetings . . . . .				
	22 Printing and publications . . . . .				
	23 Other expenses (attach schedule) . . . . .	310.00			
	24 <b>Total operating and administrative expenses.</b> Add lines 13 through 23 . . . . .	310.00			
	25 Contributions, gifts, grants paid . . . . .	63,092.00			63,092.00
26 <b>Total expenses and disbursements.</b> Add lines 24 and 25 . . . . .	63,402.00			63,092.00	
27 Subtract line 26 from line 12 . . . . .					
a Excess of revenue over expenses and disbursements . . . . .	36,598.00				
b <b>Net investment income</b> (if negative, enter -0-) . . . . .					
c <b>Adjusted net income</b> (if negative, enter -0-) . . . . .					

SCANNED SEP 30 2014



<b>Part II Balance Sheets</b>		Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)		Beginning of year	End of year	
				(a) Book Value	(b) Book Value	(c) Fair Market Value
<b>Assets</b>	1	Cash - non-interest-bearing . . . . .		245,513.00	282,111.00	282,111.00
	2	Savings and temporary cash investments . . . . .		39,149.00	39,149.00	39,149.00
	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 ▶				
	8	Inventories for sale or use . . . . .				
	9	Prepaid expenses and deferred charges . . . . .				
	10 a	Investments - U S and state government obligations (attach schedule),				
	b	Investments - corporate stock (attach schedule) . . . . .				
	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) . . . . .				
	14	Land, buildings, and equipment basis Less accumulated depreciation (attach schedule) ▶				
15	Other assets (describe ▶ )					
16	<b>Total assets</b> (to be completed by all filers -- see the instructions Also, see page 1, item I) . . . . .			284,662.00	321,260.00	321,260.00
<b>Liabilities</b>	17	Accounts payable and accrued expenses . . . . .				
	18	Grants payable . . . . .				
	19	Deferred revenue . . . . .				
	20	Loans from officers, directors, trustees, and other disqualified persons .				
	21	Mortgages and other notes payable (attach schedule) . . . . .				
	22	Other liabilities (describe ▶ )				
23	<b>Total liabilities</b> (add lines 17 through 22) . . . . .					
<b>Net Assets or Fund Balances</b>	<b>Foundations that follow SFAS 117, check here ▶ <input type="checkbox"/></b> <b>and complete lines 24 through 26 and lines 30 and 31.</b>					
	24	Unrestricted . . . . .				
	25	Temporarily restricted . . . . .				
	26	Permanently restricted . . . . .				
	<b>Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. ▶ <input type="checkbox"/></b>					
	27	Capital stock, trust principal, or current funds . . . . .				
	28	Paid-in or capital surplus, or land, bldg, and equipment fund . . . . .				
	29	Retained earnings, accumulated income, endowment, or other funds . .			284,662.00	321,260.00
	30	<b>Total net assets or fund balances</b> (see instructions), . . . . .			284,662.00	321,260.00
	31	<b>Total liabilities and net assets/fund balances</b> (see instructions) . . . . .			284,662.00	321,260.00

**Part III Analysis of Changes in Net Assets or Fund Balances**

1	Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) . . . . .	1	284,662.00
2	Enter amount from Part I, line 27a . . . . .	2	36,598.00
3	Other increases not included in line 2 (itemize) ▶	3	
4	Add lines 1, 2, and 3 . . . . .	4	321,260.00
5	Decreases not included in line 2 (itemize) ▶	5	
6	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30 . . . . .	6	321,260.00

**Part IV Capital Gains and Losses for Tax on Investment Income**

(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 acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
<b>1a</b>					
<b>b</b>					
<b>c</b>					
<b>d</b>					
<b>e</b>					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)		
<b>a</b>					
<b>b</b>					
<b>c</b>					
<b>d</b>					
<b>e</b>					
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	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	(l) Gains (Col (h) gain minus col (k), but not less than -0- ) or Losses (from col (h))		
<b>a</b>					
<b>b</b>					
<b>c</b>					
<b>d</b>					
<b>e</b>					
<b>2</b> Capital gain net income or (net capital loss)	<div style="display: flex; align-items: center;"> <div style="border-left: 1px solid black; border-right: 1px solid black; padding: 0 5px;">           If gain, also enter in Part I, line 7            If (loss), enter -0- in Part I, line 7         </div> </div>		<b>2</b>		
<b>3</b> Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8			<b>3</b>		

**Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income**

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.)

If section 4940(d)(2) applies, leave this part blank.

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?

☐ Yes ☒ No

If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part.

**1** Enter the appropriate amount in each column for each year, see the instructions before making any entries

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2011	55,053.00	306,949.00	0.1794
2010	87,437.00	379,193.00	0.2306
2009	67,433.00	458,157.00	0.1472
2008	70,779.00	517,446.00	0.1368
2007	49,736.00	309,119.00	0.1609
<b>2</b> Total of line 1, column (d)			<b>2</b> 0.8549
<b>3</b> Average distribution ratio for the 5-year base period - divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years			<b>3</b> 0.1710
<b>4</b> Enter the net value of noncharitable-use assets for 2012 from Part X, line 5			<b>4</b> 286,861.55
<b>5</b> Multiply line 4 by line 3			<b>5</b> 49,053.33
<b>6</b> Enter 1% of net investment income (1% of Part I, line 27b)			<b>6</b>
<b>7</b> Add lines 5 and 6			<b>7</b> 49,053.33
<b>8</b> Enter qualifying distributions from Part XII, line 4 If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions			<b>8</b> 63,092.00

**Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions)**

1 a Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1 . . . . . Date of ruling or determination letter _____ (attach copy of letter if necessary - see instructions)		1	
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input type="checkbox"/> and enter 1% of Part I, line 27b . . . . .			
c 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	
3 Add lines 1 and 2 . . . . .		3	
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		4	
5 <b>Tax based on investment income.</b> Subtract line 4 from line 3. If zero or less, enter -0-		5	
6 Credits/Payments			
a 2012 estimated tax payments and 2011 overpayment credited to 2012 . . . . .	6a	86.00	
b Exempt foreign organizations - tax withheld at source . . . . .	6b		
c Tax paid with application for extension of time to file (Form 8868) . . . . .	6c		
d Backup withholding erroneously withheld . . . . .	6d		
7 Total credits and payments. Add lines 6a through 6d . . . . .	7	86.00	
8 Enter any <b>penalty</b> for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached . . . . .	8		
9 <b>Tax due.</b> If the total of lines 5 and 8 is more than line 7, enter <b>amount owed</b> . . . . .	9		
10 <b>Overpayment.</b> If line 7 is more than the total of lines 5 and 8, enter the <b>amount overpaid</b> . . . . .	10	86.00	
11 Enter the amount of line 10 to be <b>Credited to 2013 estimated tax</b> ▶ 86.00 <b>Refunded</b> ▶	11		

**Part VII-A Statements Regarding Activities**

	Yes	No
1 a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? . . . . .		X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the definition)? . . . . . If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities		X
c Did the foundation file <b>Form 1120-POL</b> for this year? . . . . .		X
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 ▶ \$ _____		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers ▶ \$ _____		
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		X
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes . . . . .		X
4 a Did the foundation have unrelated business gross income of \$1,000 or more during the year? . . . . .		X
b If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year? . . . . .		
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? . . . . . If "Yes," attach the statement required by General Instruction T		X
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 directions that conflict with the state law remain in the governing instrument? . . . . .	X	
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	X	
8 a 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 General (or designate) of each state as required by General Instruction G? If "No," attach explanation . . . . .	X	
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2012 or the taxable year beginning in 2012 (see instructions for Part XIV)? If "Yes," complete Part XIV . . . . .		X
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses . . . . .		X

**Part VII-A Statements Regarding Activities (continued)**

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions)	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address <b>►</b> <u>N/A</u>	13	X	
14	The books are in care of <b>►</b> <u>DAVITA HEALTHCARE PARTNERS, INC</u> Telephone no <b>►</b> <u>253-733-4628</u> Located at <b>►</b> <u>1423 PACIFIC AVENUE TACOMA WA</u> ZIP+4 <b>►</b> <u>98402</u>			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> - Check here <b>►</b> <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the year <b>►</b> <u>15</u>			
16	At any time during calendar year 2012, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for Form TD F 90-22.1 If "Yes," enter the name of the foreign country <b>►</b>	16	Yes	No X

**Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required****File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.**

		Yes	No
1a	During the year did the foundation (either directly or indirectly)		
(1)	Engage in the sale or exchange, or leasing of property with a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(2)	Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(3)	Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(4)	Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(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)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(6)	Agree to pay money or property to a government official? ( <b>Exception.</b> Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b	If any answer is "Yes" to 1a(1)-(6), did <b>any</b> of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? <input type="checkbox"/> Organizations relying on a current notice regarding disaster assistance check here <b>►</b> <input type="checkbox"/>	1b	
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2012?	1c	X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))		
a	At the end of tax year 2012, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2012? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," list the years <b>►</b> _____		
b	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to <b>all</b> years listed, answer "No" and attach statement - see instructions)	2b	
c	If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here <b>►</b> _____		
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b	If "Yes," did it have excess business holdings in 2012 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? ( <i>Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2012</i> )	3b	
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2012?	4b	X

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**Part VII-B** Statements Regarding Activities for Which Form 4720 May Be Required (continued)**5a** During the year did the foundation pay or incur any amount to(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? ☐ Yes ☒ No(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive? ☐ Yes ☒ No(3) Provide a grant to an individual for travel, study, or other similar purposes? ☐ Yes ☒ No(4) Provide a grant to an organization other than a charitable, etc., organization described in section 509(a)(1), (2), or (3), or section 4940(d)(2)? (see instructions) ☐ Yes ☒ No(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? ☐ Yes ☒ No**b** If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)? ☐ Yes ☒ NoOrganizations relying on a current notice regarding disaster assistance check here ☐**c** If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? ☐ Yes ☐ No

If "Yes," attach the statement required by Regulations section 53.4945-5(d)

**6a** Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? ☐ Yes ☒ No**b** Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? ☐ Yes ☒ No

If "Yes" to 6b, file Form 8870

**7a** At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? ☐ Yes ☒ No**b** If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? ☐ Yes ☒ No**Part VIII** Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors**1** List all officers, directors, trustees, foundation managers and their compensation (see instructions).

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (if not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
SEE STATEMENT 2				

**2** Compensation of five highest-paid employees (other than those included on line 1 - see instructions). If none, enter "NONE."

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				

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

**Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors** *(continued)***3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE."**

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
-----		
-----		
-----		
-----		
-----		
-----		

**Total** number of others receiving over \$50,000 for professional services . . . . . ►

**Part IX-A Summary of Direct Charitable Activities**

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc	Expenses
<b>1</b> THE FOUNDATION WAS ESTABLISHED IN MAY 2001 AND FUNDED ON 6/10/02. THIRTY ONE SCHOLARSHIPS WERE PAID TO CHILDREN OF DAVITA EMPLOYEES IN 2012 TO FURTHER THEIR SECONDARY SCHOOL OR COLLEGE EDUCATION	63,092.00
<b>2</b> -----	
<b>3</b> -----	
<b>4</b> -----	

**Part IX-B Summary of Program-Related Investments** (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
<b>1</b> NONE	
<b>2</b> -----	
All other program-related investments See instructions	
<b>3</b> NONE	
<b>Total.</b> Add lines 1 through 3 . . . . . ►	

Form 990-PF (2012)



**Part X Minimum Investment Return** (All domestic foundations must complete this part. Foreign foundations, see instructions.)

<b>1</b>	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
<b>a</b>	Average monthly fair market value of securities	<b>1a</b>	
<b>b</b>	Average of monthly cash balances	<b>1b</b>	291,230.00
<b>c</b>	Fair market value of all other assets (see instructions)	<b>1c</b>	
<b>d</b>	<b>Total</b> (add lines 1a, b, and c)	<b>1d</b>	291,230.00
<b>e</b>	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	<b>1e</b>	
<b>2</b>	Acquisition indebtedness applicable to line 1 assets	<b>2</b>	
<b>3</b>	Subtract line 2 from line 1d	<b>3</b>	291,230.00
<b>4</b>	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	<b>4</b>	4,368.45
<b>5</b>	<b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3. Enter here and on Part V, line 4.	<b>5</b>	286,861.55
<b>6</b>	<b>Minimum investment return.</b> Enter 5% of line 5.	<b>6</b>	14,343.08

**Part XI 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.)

<b>1</b>	Minimum investment return from Part X, line 6	<b>1</b>	14,343.08
<b>2a</b>	Tax on investment income for 2012 from Part VI, line 5	<b>2a</b>	
<b>b</b>	Income tax for 2012 (This does not include the tax from Part VI).	<b>2b</b>	
<b>c</b>	Add lines 2a and 2b	<b>2c</b>	
<b>3</b>	Distributable amount before adjustments. Subtract line 2c from line 1.	<b>3</b>	14,343.08
<b>4</b>	Recoveries of amounts treated as qualifying distributions	<b>4</b>	
<b>5</b>	Add lines 3 and 4	<b>5</b>	14,343.08
<b>6</b>	Deduction from distributable amount (see instructions)	<b>6</b>	
<b>7</b>	<b>Distributable amount as adjusted.</b> Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	<b>7</b>	14,343.08

**Part XII Qualifying Distributions** (see instructions)

<b>1</b>	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
<b>a</b>	Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26	<b>1a</b>	63,092.00
<b>b</b>	Program-related investments - total from Part IX-B	<b>1b</b>	
<b>2</b>	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	<b>2</b>	
<b>3</b>	Amounts set aside for specific charitable projects that satisfy the		
<b>a</b>	Suitability test (prior IRS approval required)	<b>3a</b>	
<b>b</b>	Cash distribution test (attach the required schedule)	<b>3b</b>	
<b>4</b>	<b>Qualifying distributions.</b> Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4.	<b>4</b>	63,092.00
<b>5</b>	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).	<b>5</b>	
<b>6</b>	<b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4.	<b>6</b>	63,092.00

**Note.** The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

**Part XIII Undistributed Income** (see instructions)

	(a) Corpus	(b) Years prior to 2011	(c) 2011	(d) 2012
<b>1</b> Distributable amount for 2012 from Part XI, line 7 . . . . .				14,343.08
<b>2</b> Undistributed income, if any, as of the end of 2012				
<b>a</b> Enter amount for 2011 only . . . . .				
<b>b</b> Total for prior years 20____, 20____, 20____				
<b>3</b> Excess distributions carryover, if any, to 2012				
<b>a</b> From 2007 . . . . . 34,656.00				
<b>b</b> From 2008 . . . . . 45,121.00				
<b>c</b> From 2009 . . . . . 44,540.00				
<b>d</b> From 2010 . . . . . 68,478.00				
<b>e</b> From 2011 . . . . . 39,706.00				
<b>f</b> <b>Total</b> of lines 3a through e . . . . .	232,501.00			
<b>4</b> Qualifying distributions for 2012 from Part XII, line 4 ► \$ 63,092.00				
<b>a</b> Applied to 2011, but not more than line 2a . . .				
<b>b</b> Applied to undistributed income of prior years (Election required - see instructions) . . . . .				
<b>c</b> Treated as distributions out of corpus (Election required - see instructions) . . . . .				
<b>d</b> Applied to 2012 distributable amount . . . . .				14,343.08
<b>e</b> Remaining amount distributed out of corpus . .	48,748.92			
<b>5</b> Excess distributions carryover applied to 2012 . (If an amount appears in column (d), the same amount must be shown in column (a) )				
<b>6</b> <b>Enter the net total of each column as indicated below:</b>				
<b>a</b> Corpus Add lines 3f, 4c, and 4e Subtract line 5	281,249.92			
<b>b</b> Prior years' undistributed income Subtract line 4b from line 2b . . . . .				
<b>c</b> 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 . . . . .				
<b>d</b> Subtract line 6c from line 6b Taxable amount - see instructions . . . . .				
<b>e</b> Undistributed income for 2011 Subtract line 4a from line 2a Taxable amount - see instructions . . . . .				
<b>f</b> Undistributed income for 2012 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2013 . . . . .				
<b>7</b> Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see instructions) . . .				
<b>8</b> Excess distributions carryover from 2007 not applied on line 5 or line 7 (see instructions) . . .	34,656.00			
<b>9</b> <b>Excess distributions carryover to 2013.</b> Subtract lines 7 and 8 from line 6a . . . . .	246,593.92			
<b>10</b> Analysis of line 9				
<b>a</b> Excess from 2008 . . . 45,121.00				
<b>b</b> Excess from 2009 . . . 44,540.00				
<b>c</b> Excess from 2010 . . . 68,478.00				
<b>d</b> Excess from 2011 . . . 39,706.00				
<b>e</b> Excess from 2012 . . . 48,748.92				

**Part XIV Private Operating Foundations** (see instructions and Part VII-A, question 9)

**1 a** If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2012, enter the date of the ruling ▶ N/A

**b** Check box to indicate whether the foundation is a private operating foundation described in section ☐ 4942(j)(3) or ☐ 4942(j)(5)

	Tax year	Prior 3 years			(e) Total
	(a) 2012	(b) 2011	(c) 2010	(d) 2009	
<b>2 a</b> Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed					
<b>b</b> 85% of line 2a					
<b>c</b> Qualifying distributions from Part XII line 4 for each year listed					
<b>d</b> Amounts included in line 2c not used directly for active conduct of exempt activities					
<b>e</b> Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c					
<b>3</b> Complete 3a, b, or c for the alternative test relied upon					
<b>a</b> "Assets" alternative test - enter					
<b>(1)</b> Value of all assets					
<b>(2)</b> Value of assets qualifying under section 4942(j)(3)(B)(i)					
<b>b</b> "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
<b>c</b> "Support" alternative test - enter					
<b>(1)</b> Total support other than gross investment income (interest dividends, rents, payments on securities loans (section 512(a)(5)) or royalties)					
<b>(2)</b> Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
<b>(3)</b> Largest amount of support from an exempt organization					
<b>(4)</b> Gross investment income					

**Part XV Supplementary Information** (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year - see instructions.)

**1 Information Regarding Foundation Managers:**

**a** List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2) )

KENT THIRY, TREASURER - CFO

**b** List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest

NONE

**2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:**

Check here ☐ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d

**a** The name, address, and telephone number or e-mail of the person to whom applications should be addressed

SEE EXHIBIT 1

**b** The form in which applications should be submitted and information and materials they should include

**c** Any submission deadlines

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

**Part XV** Supplementary Information (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

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
<b>a</b> <i>Paid during the year</i> SEE STATEMENT 3				63,092.00
<b>Total</b> . . . . .			<b>3a</b>	63,092.00
<b>b</b> <i>Approved for future payment</i> SEE STATEMENT 4				39,000.00
<b>Total</b> . . . . .			<b>3b</b>	39,000.00

**Part XVI-A Analysis of Income-Producing Activities**

Enter gross amounts unless otherwise indicated

Enter gross amounts unless otherwise indicated	Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See instructions )
	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	
<b>1</b> Program service revenue					
<b>a</b> _____					
<b>b</b> _____					
<b>c</b> _____					
<b>d</b> _____					
<b>e</b> _____					
<b>f</b> _____					
<b>g</b> Fees and contracts from government agencies					
<b>2</b> Membership dues and assessments . . . . .					
<b>3</b> Interest on savings and temporary cash investments					
<b>4</b> Dividends and interest from securities . . . . .					
<b>5</b> Net rental income or (loss) from real estate					
<b>a</b> Debt-financed property . . . . .					
<b>b</b> Not debt-financed property . . . . .					
<b>6</b> Net rental income or (loss) from personal property .					
<b>7</b> Other investment income . . . . .					
<b>8</b> Gain or (loss) from sales of assets other than inventory					
<b>9</b> Net income or (loss) from special events . . .					
<b>10</b> Gross profit or (loss) from sales of inventory . .					
<b>11</b> Other revenue <b>a</b> _____					
<b>b</b> _____					
<b>c</b> _____					
<b>d</b> _____					
<b>e</b> _____					
<b>12</b> Subtotal. Add columns (b), (d), and (e) . . . .					
<b>13</b> Total. Add line 12, columns (b), (d), and (e) . . . . .					

(See worksheet in line 13 instructions to verify calculations)

## Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

[illegible]

1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?		Yes	No
<b>a</b> Transfers from the reporting foundation to a noncharitable exempt organization of			
(1) Cash			X
(2) Other assets			X
<b>b</b> Other transactions			
(1) Sales of assets to a noncharitable exempt organization			X
(2) Purchases of assets from a noncharitable exempt organization			X
(3) Rental of facilities, equipment, or other assets			X
(4) Reimbursement arrangements			X
(5) Loans or loan guarantees			X
(6) Performance of services or membership or fundraising solicitations			X
<b>c</b> Sharing of facilities, equipment, mailing lists, other assets, or paid employees			X
<b>d</b> If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received			

[illegible]

**2a** Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? ☐ Yes ☐ No

**b** If "Yes," complete the following schedule

(a) Name of organization	(b) Type of organization	(c) Description of relationship

**Sign  
Here**

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief it is true correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

correct, and complete Declaration of preparer (other than

► Ray S Kargne

Signature of officer or trustee

9-11-14  
Date

preparer has any knowledge

▶ *Secretary*  
*Director*

Title

May the IRS discuss this return with the preparer shown below (see instructions)? ☐ Yes ☐ No

**Paid  
Preparer  
Use Only**

Print/Type preparer's name

Preparer's signature

Date \_\_\_\_\_

Check <input type="checkbox"/> if self-employed	PTIN
---	------

Firm's name ▶

Firm's EIN ▶

Firm's address ►

Phone no

## Schedule of Contributors

OMB No 1545-0047

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

2012

Name of the organization

Employer identification number

THE KT FAMILY FOUNDATION

91-2151390

Organization type (check one)

Filers of:

Section:

Form 990 or 990-EZ

☐ 501(c)( ) (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

- ☒ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II.

### Special Rules

- ☐ For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3 % support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution 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 a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.
- ☐ For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use *exclusively* for religious, charitable, etc., purposes, but these contributions did not total to 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. Do not complete any of the parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year. . . . . ► \$ \_\_\_\_\_

**Caution.** An organization that is not covered by the General Rule and/or the Special Rules does not 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 Part I, line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization

THE KT FAMILY FOUNDATION

Employer identification number

91-2151390

**Part I Contributors** (see instructions) Use duplicate copies of Part I if additional space is needed

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	THIRY-O'LEARY FOUNDATION 2000 16TH STREET DENVER, CO 80202	\$ 100,000.00	Person <input checked="checked" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
			Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
			Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
			Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
			Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
			Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
			Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)



Name of organization

THE KT FAMILY FOUNDATION

Employer identification number

91-2151390

**Part II** Noncash Property (see instructions) Use duplicate copies of Part II if additional space is needed

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
---	----- ----- ----- -----	\$ -----	-----
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
---	----- ----- ----- -----	\$ -----	-----
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
---	----- ----- ----- -----	\$ -----	-----
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
---	----- ----- ----- -----	\$ -----	-----
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
---	----- ----- ----- -----	\$ -----	-----
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
---	----- ----- ----- -----	\$ -----	-----
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
---	----- ----- ----- -----	\$ -----	-----

Name of organization THE KT FAMILY FOUNDATION	Employer identification number 91-2151390
--	--

**Part III** Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations that total more than \$1,000 for the year. Complete columns (a) through (e) and the following line entry

For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc., contributions of \$1,000 or less for the year (Enter this information once See instructions) ► \$ \_\_\_\_\_

Use duplicate copies of Part III if additional space is needed

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-----	----- ----- -----	----- ----- -----	----- ----- -----
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	----- ----- -----	----- ----- -----	
-----	----- ----- -----	----- ----- -----	----- ----- -----
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	----- ----- -----	----- ----- -----	
-----	----- ----- -----	----- ----- -----	----- ----- -----
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	----- ----- -----	----- ----- -----	
-----	----- ----- -----	----- ----- -----	----- ----- -----
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	----- ----- -----	----- ----- -----	

# **EXHIBIT 1**

**Form 990-PF**

***Return of Private Foundation***

**Page 10, Part XV**



## Scholarship Foundation Application 2011-2012



The DaVita Children's Foundation and the K.T. Family Foundation are scholarship programs offered to children and grandchildren of teammates. We award scholarships to students that demonstrate outstanding leadership, community service or academic performance.

- ✖ DaVita Children's Foundation applicants must be enrolled in college or 12<sup>th</sup> grade (graduate school students are not eligible)
- ✖ K.T. Family Foundation applicants must be enrolled in grades 6 - 11
- ✖ DaVita awards scholarships to 25% of the eligible applicants
- ✖ Volunteer Trustees (non DaVitans) review the applications and select the winners
- ✖ Scholarships range from \$1,000.00 - \$3,000.00
- ✖ Awards can be used for tuition, fees, and books

<b>Scholarship Foundation Application 2011-2012 Component and Deadline Information</b>	
<b>E-mail to:</b> <a href="mailto:scholarshipfoundations@davita.com">scholarshipfoundations@davita.com</a>	<b>Mail to:</b> Scholarship Foundations
<b>Fax to:</b> 877.731.4434	1991 Industrial Drive DeLand, FL 32724
Application Distributed	August 3, 2011 – October 31, 2011
<ul style="list-style-type: none"> <li>▪ Completed Informational Page</li> <li>▪ Academic Record for 2010-2011 (1 full year)</li> <li>▪ About Me Page</li> <li>▪ Letter of Recommendation</li> <li>▪ Community Service responses (2)</li> <li>▪ Essays (2)</li> </ul>	Submission and Postmark Deadline: November 7, 2011
Trustees Review Applications	December 2011 – March 2012
Announcement of Winners	April - June 2012

### **HELPFUL HINTS:**

- In the spirit of DaVita Village Green, we encourage students to submit the application components electronically.
- So that we know you are applying and interested, please submit the informational page with contact information as soon as possible.
- Pay attention to deadlines. Our suggested last day to mail is November 1, 2011 to ensure that it arrives on time. We must receive all components by November 7, 2011.
- For your transcript or report card and letter of recommendation, please keep in mind it can take at least two weeks for completion once you request them.

If you have any additional questions, please contact:  
[scholarshipfoundations@davita.com](mailto:scholarshipfoundations@davita.com)

**Kay Kargul**, Scholarship Foundations Director  
815.675.2405  
**Nicole Stumbo**, People Services Generalist  
386.626.7987  
Fax 877.731.4434

Postmark Deadline  
November 7, 2011

**SCHOLARSHIP FOUNDATION APPLICATION**

**INFORMATIONAL PAGE 2011-2012**

**APPLICANT INFORMATION:**

☐ Child of Teammate

☐ Grandchild of Teammate

Name \_\_\_\_\_ Home Phone \_\_\_\_\_

Home Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Personal e-mail \_\_\_\_\_

**SCHOOL INFORMATION:** *Please mark current level*

☐ 6<sup>th</sup> ☐ 7<sup>th</sup> ☐ 8<sup>th</sup> ☐ 9<sup>th</sup> ☐ 10<sup>th</sup> ☐ 11<sup>th</sup> ☐ 12<sup>th</sup> ☐ Community College ☐ University/College

School attending in 2011-2012 \_\_\_\_\_

**DAVITA FACILITY INFORMATION:**

Facility # \_\_\_\_\_ Facility Name \_\_\_\_\_

Facility Phone (\_\_\_\_) \_\_\_\_\_

**TEAMMATE INFORMATION:**

Name (as it appears on your paycheck) \_\_\_\_\_ Six Digit ID# \_\_\_\_\_

Date of Hire \_\_\_\_\_ Position/Title at DaVita \_\_\_\_\_

Work e-mail \_\_\_\_\_

Personal e-mail \_\_\_\_\_ Cell phone (optional) \_\_\_\_\_

Home Address and phone number w/ area code (if different from above): \_\_\_\_\_

**ELIGIBILITY CHECKLIST:**

- ☐ I currently work as a regular part-time or full-time DaVita teammate and my hire date was before November 7, 2010.
- ☐ The applicant is a natural child/grandchild, stepchild, legally adopted child or a foster child of mine
- ☐ My child/grandchild is currently enrolled in school as a full time student and I understand that they must complete the entire school year from fall 2011 through spring 2012.
- ☐ I understand that an applicant will not be eligible for a 2011-2012 scholarship award if the applicant's parents/grandparents employment with DaVita is terminated for any reason on or before March 15, 2012, unless the applicant was previously granted a scholarship award under K.T. Family Foundation or The DaVita Children's Foundation. If the applicant was previously granted a scholarship award, this eligibility rule does not apply and the applicant may reapply for an additional award regardless of whether the applicant's parent/grandparent is still employed with DaVita.

**AFFIDAVIT:**

I, \_\_\_\_\_, am a DaVita teammate and the legal \_\_\_\_\_  
(print teammate full legal name) (description of relationship to student)

of \_\_\_\_\_, I understand that supporting documentation will be necessary if the student is  
(print student's legal name)

chosen as a recipient of a scholarship award. Not providing requested and accurate documentation will eliminate my child/grandchild's award.

SIGNATURE of TEAMMATE \_\_\_\_\_ Date \_\_\_\_\_

**PUBLIC RELEASE STATEMENT:**

I hereby authorize the Scholarship Foundations and DaVita, Inc to use/disclose a segment of my child/grandchild's completed 2011-2012 application and/or a picture associated with the Scholarship Foundations. I understand that the purpose of this disclosure is for creating communications (newsletters, bulletin boards, or stories) associated with DaVita, Inc.

SIGNATURE of TEAMMATE \_\_\_\_\_ Date \_\_\_\_\_

Postmark Deadline  
November 7, 2011

**ACADEMIC RECORD, ABOUT ME PAGE AND LETTER OF RECOMMENDATION**

**For questions please call Kay Kargul: 815.675.2405**

**Submit by e-mail: [scholarshipfoundations@davita.com](mailto:scholarshipfoundations@davita.com)**

**Submit by fax: 877.731.4434 (include name of student, # of pages and contact number in case of submission error)**

**Submit by mail: Scholarship Foundations  
1991 Industrial Drive  
DeLand, FL 32724**

- ☐ Academic record must show completed fall 2010 - spring 2011 full time school year
- ☐ About Me Page (one page)
  - Your opportunity to be unique from all other applicants. What would you like the trustees to know and consider in their review.
  - Ideas: Activities, projects, opinions, achievements, personal experiences, a personal writing, goals, likes, hobbies.
- ☐ Letter of Recommendation
  - Contact someone you have known for years. Consider coaches, church/scout leaders, family friends, teachers (preferably not a family member).
  - Give them a copy of this page.
  - Author should submit to Scholarship Foundations directly.

**Information for author of letter of recommendation:**

- Student will be evaluated on leadership, community service/citizenship, academic performance and their completed application. Take this opportunity to describe the applicant's unique qualities with specific examples that come from your interactions and experiences with them.
- In your letter please include all of the following information:
  - Full name of student
  - How you know the student and how long you have known them
  - Your signature and printed name
  - Email address
  - Phone number (optional)

*DaVita Inc., a FORTUNE 500® company, is a leading provider of kidney care in the United States, delivering dialysis services and education to patients with chronic kidney failure and end stage renal disease. As of March 31, 2011, DaVita operated or provided administrative services at 1,642 dialysis facilities, serving approximately 128,000 patients. DaVita develops, participates in and donates to numerous programs dedicated to transforming communities and creating positive, sustainable change for children, families and our environment. The company's leadership development initiatives and corporate social responsibility efforts have been recognized by Fortune, Modern Healthcare, Newsweek, and WorldBlu, among others. DaVita - which is Italian for "giving life" - has more than 36,000 teammates (employees) around the nation working to provide superior patient care.*

*We created the Scholarship Foundations to give back to teammates and local communities. The programs offer scholarships ranging from \$1000.00 - \$3000.00 to the children and grandchildren of our teammates. If you are interested in learning more about DaVita, please visit [www.davita.com](http://www.davita.com)*

Postmark Deadline  
November 7, 2011

### **COMMUNITY SERVICE QUESTIONS AND ESSAYS**

**Submit by e-mail:** [scholarshipfoundations@davita.com](mailto:scholarshipfoundations@davita.com)

**Submit by fax:** 877.731.4434 (include name of student, # of pages and contact number in case of submission error)

**Submit by mail:** Scholarship Foundations  
1991 Industrial Drive  
DeLand, FL 32724

- All applicants must complete both community service questions and the two grade appropriate essay questions.
- Include your name, grade level and the question you are answering at the top of each page
- One page response per question.
- Typed responses in black ink only and no staples, clips or covers please.

#### **Community Service Questions (All Grades):**

Make a bulleted list of three community service events where you have participated and how much time you give.

- Describe how these experiences have made you think differently about yourself or others.
- What types of skills or knowledge have you developed from your community service experiences?

#### **Essays:**

Grade 6 and 7:

- We live in a technological world today. What is the hardest part about that as a kid today?
- You are growing into your own person and style. What makes you unique? Describe some experiences or traits. What is it about you today that makes you a great candidate for this scholarship?

Grade 8 and 9:

- Describe one activity that you have absolutely loved. What have you gained from that experience and where do you struggle? Be specific.
- Name a book/story that has affected you deeply. Explain why and how this touched you so personally.

Grade 10 and 11:

- Are your grades an accurate reflection of your potential? Describe where they seem to fit and where they don't. Be honest and have fun with your analysis of yourself.
- How do you handle conflict? Give a recent example of a situation and your resolution style.

Grade 12:

- You are planning a meeting for parents of new high school students. What insight or wisdom do you think you have that they need?
- What do you anticipate to be your greatest challenge as you move towards college? How do you plan to prepare yourself for next year?

All College:

- Moving from high school to college can be a huge transition. Share your surprises. What were your takeaways and what did you learn?
- Write a brief autobiography. Please include your education, goals and dreams. Explain how you will get there.

**KT Family Foundation**  
**EIN: 91-2151390**  
**For Year Ended 12/31/12**

**Attachment to**  
**Form 990-PF, *Return of Private Foundation***  
**Page 1, G: Amended return**

This return is being amended to report a contribution that was inadvertently left off the original return. Additionally, we adjusted other expenses and the average monthly cash balance to actual.



**KT Family Foundation**  
**Form 990-PF, *Return of Private Foundation***  
**For Year Ended December 31, 2012**

**91-2151390**

Statement 1

**990-PF: Page 1**  
**Other Expenses, Part I, Line 23**

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California Franchise Tax	10
Account Analysis Fee	300
<b>Total</b>	<b><u>310</u></b>

KT Family Foundation  
 EIN: 91-2151390  
 For Year Ended 12/31/12

Statement 2

Attachment to  
 Form 990-PF, Return of Private Foundation  
 Page 6, Part VIII, Line 1

A. Name and Address	B. Title & average hours per week devoted to position	C. Compensation	D. Contribution to employee benefit plans and deferred compensation	E. Expense account, other compensation
Grace Limaye 2000 16th Street Denver, CO 80202	TRUSTEE 1 hr/wk	NONE	NONE	NONE
Eva Price 2000 16th Street Denver, CO 80202	TRUSTEE 1 hr/wk	NONE	NONE	NONE
Kathy Diekroger 2000 16th Street Denver, CO 80202	TRUSTEE 1 hr/wk	NONE	NONE	NONE
Keith Ehrmann 2000 16th Street Denver, CO 80202	TRUSTEE 1 hr/wk	NONE	NONE	NONE
Ellie Fischbacher 2000 16th Street Denver, CO 80202	TRUSTEE 1 hr/wk	NONE	NONE	NONE
Denise O'Leary 2000 16th Street Denver, CO 80202	PRESIDENT 1 hr/wk	NONE	NONE	NONE
Kay Kargul 9802 Fox Bluff Lane Spring Grove, IL 60081	SECRETARY 1 hr/wk	NONE	NONE	NONE
Kent Thiry 2000 16th Street Denver, CO 80202	TREASURER 1 hr/wk	NONE	NONE	NONE

**KT FAMILY FOUNDATION**  
**Form 990-PF, Return of Private Foundation**  
**For Year Ended 12/31/12**

EIN: 91-2151390

990-PF: Page 11, Part XV, Line 3a  
 Grants and Contributions Paid During the Year

Statement 3  
 (1 of 3)

A. Name and Address	B. If receipt is an individual, show any relationship to any foundation manager or substantial contributor	C. Foundation Status of Recipient	D. Purpose of Grant or Contribution	E. Amount
Kelsie Bingham 7856 N Roundstone Dr Tucson, AZ 85741	Child/Grandchild of DaVita Employee	N/A	For college education expenses: tuition, room, or board	1,110
Karissa Huighe 10943 Shea Drive St. Louis, MO 63123	Child/Grandchild of DaVita Employee	N/A	For college education expenses: tuition, room, or board	472
Rachel Calwell 97 Pruett Ridge Canton, NC 28716	Child/Grandchild of DaVita Employee	N/A	For college education expenses: tuition, room, or board	2,145
Dorothy Helene Flaig 111 Woodlawn Ave Green Bay, WI 54303	Child/Grandchild of DaVita Employee	N/A	For college education expenses: tuition, room, or board	1,035
Carly Spencer Mainwal 17638 Wildflower Place Chino Hills, CA 91709	Child/Grandchild of DaVita Employee	N/A	For college education expenses: tuition, room, or board	1,035
Joshua Huighe 10943 Shea Drive St. Louis, MO	Child/Grandchild of DaVita Employee	N/A	For college education expenses: tuition, room, or board	1,010
Elizabeth Li 761 Heatherstone Drive Berwyn, PA 19312	Child/Grandchild of DaVita Employee	N/A	For college education expenses: tuition, room, or board	3,030
Jennifer Iacono 104 Delaine Woods Drive Irmo, SC 29063	Child/Grandchild of DaVita Employee	N/A	For college education expenses: tuition, room, or board	3,030
Ellen Bengston 1316 Rathwood Ave Richland, VA 99352	Child/Grandchild of DaVita Employee	N/A	For college education expenses: tuition, room, or board	2,020
Rachel Calwell 97 Pruett Ridge Canton, NC 28716	Child/Grandchild of DaVita Employee	N/A	For college education expenses: tuition, room, or board	1,010
Chelsea Kostrzewa 27148 Spring Gate Brownstown, MI 48183	Child/Grandchild of DaVita Employee	N/A	For college education expenses: tuition, room, or board	3,055
Katrina Greathouse 604 N Vernon Dearborn, MI 48128	Child/Grandchild of DaVita Employee	N/A	For college education expenses: tuition, room, or board	2,020
Lauren Nyland 407 Shadowood Drive Smyrna, TN 37167	Child/Grandchild of DaVita Employee	N/A	For college education expenses: tuition, room, or board	3,000
<b>SUBTOTAL</b>				<b>23,972</b>

**KT FAMILY FOUNDATION**  
**Form 990-PF, Return of Private Foundation**  
**For Year Ended 12/31/12**

EIN: 91-2151390

990-PF Page 11, Part XV, Line 3a  
 Grants and Contributions Paid During the Year

Statement 3  
 (2 of 3)

A. Name and Address	B. If receipt is an individual, show any relationship to any foundation manager or substantial contributor	C. Foundation Status of Recipient	D. Purpose of Grant or Contribution	E. Amount
Briana Freeman 2174 Bruneau Boise, ID 83709	Child/Grandchild of DaVita Employee	N/A	For college education expenses: tuition, room, or board	2,120
Jessica Whitley 2031 Upwind Drive Franklin, TN 37067	Child/Grandchild of DaVita Employee	N/A	For college education expenses: tuition, room, or board	1,000
Lily Ziva Moline 3436 Welwyn Way Tallahassee, FL 32309	Child/Grandchild of DaVita Employee	N/A	For college education expenses: tuition, room, or board	3,000
Samantha Ann Nichols 257 Washington Street Norwich, CT 06360	Child/Grandchild of DaVita Employee	N/A	For college education expenses: tuition, room, or board	3,000
Demetrich Baker 8108 41st Street Ct W University Place, WA 98467	Child/Grandchild of DaVita Employee	N/A	For college education expenses: tuition, room, or board	3,000
Melanie Marino 3720 Thoroughbred Lane Owings Mills, MD 21117	Child/Grandchild of DaVita Employee	N/A	For college education expenses: tuition, room, or board	3,000
Brianna Jackson 196 Buttercup Lane Americus, GA 31709	Child/Grandchild of DaVita Employee	N/A	For college education expenses: tuition, room, or board	3,000
Will Mims 4 Greensbourne Lane Savannah, GA 32411	Child/Grandchild of DaVita Employee	N/A	For college education expenses: tuition, room, or board	1,000
Giselle Castro 9 Muirfield Court Westhampton NJ 08060	Child/Grandchild of DaVita Employee	N/A	For college education expenses: tuition, room, or board	1,000
Hunter Matthews 109 North 78th Ave Yakima, WA 98908	Child/Grandchild of DaVita Employee	N/A	For college education expenses: tuition, room, or board	1,000
Alexander Groesch 114 Jersey Avenue St Louis, MO 63119	Child/Grandchild of DaVita Employee	N/A	For college education expenses: tuition, room, or board	3,000
Andrew Groesch 114 Jersey Avenue St Louis, MO 63119	Child/Grandchild of DaVita Employee	N/A	For college education expenses: tuition, room, or board	1,000
Kendall Lucy 6055 Poor House Rd Dolphin, VA 23843	Child/Grandchild of DaVita Employee	N/A	For college education expenses: tuition, room, or board	3,000
SUBTOTAL				28,120

**KT FAMILY FOUNDATION**  
**Form 990-PF, Return of Private Foundation**  
**For Year Ended 12/31/12**

EIN: 91-2151390

990-PF Page 11, Part XV, Line 3a  
 Grants and Contributions Paid During the Year

Statement 3  
 (3 of 3)

A. Name and Address	B. If receipt is an individual, show any relationship to any foundation manager or substantial contributor	C. Foundation Status of Recipient	D. Purpose of Grant or Contribution	E. Amount
Shannon Lucy 6055 Poor House Rd Dolphin, VA 23843	Child/Grandchild of DaVita Employee	N/A	For college education expenses: tuition, room, or board	3,000
Daryl Kristofer Suba 555E Olive Ave, Apt 109 Burbank, CA 91501	Child/Grandchild of DaVita Employee	N/A	For college education expenses: tuition, room, or board	3,000
Jessica Whitley 2031 Upwind Dr Franklin, TN 37067	Child/Grandchild of DaVita Employee	N/A	For college education expenses: tuition, room, or board	1,000
Sarah Catherine Hickey 928 North Irving Ave Scranton, PA 1851	Child/Grandchild of DaVita Employee	N/A	For college education expenses: tuition, room, or board	1,000
Sam Detwiler 310 Cottman Street Jenkintown, PA 19046	Child/Grandchild of DaVita Employee	N/A	For college education expenses: tuition, room, or board	1,000
Justin Pring 3936 Crofton Way South San Francisco, CA 94080	Child/Grandchild of DaVita Employee	N/A	For college education expenses: tuition, room, or board	2,000
SUBTOTAL				11,000
			GRAND TOTAL	63,092

A. Name and Address	B. If receipt is an individual, show any relationship to any foundation manager or substantial contributor	C. Foundation Status of Recipient	D. Purpose of Grant or Contribution	E. Amount
Matthew Carpenter 433 Lexington Ave Cranford NJ 7016	Child/Grandchild of DaVita Employee	N/A	For college education expenses: tuition, room, or board	1,000
Brannen Fowler 13658 Woodside Lane SW Port Orchard WA 98367	Child/Grandchild of DaVita Employee	N/A	For college education expenses: tuition, room, or board	2,000
Timothy Fowler 13658 Woodside Lane SW Port Orchard WA 98367	Child/Grandchild of DaVita Employee	N/A	For college education expenses: tuition, room, or board	1,000
Amaris Garcia 114 S Jupiter Garland TX 75042	Child/Grandchild of DaVita Employee	N/A	For college education expenses: tuition, room, or board	2,000
Nikita Gerard 1300 Citadel Ct Franklin TN 37067	Child/Grandchild of DaVita Employee	N/A	For college education expenses: tuition, room, or board	1,000
Houston Hardman 8302 N 101st E Ave Owasso OK 74055	Child/Grandchild of DaVita Employee	N/A	For college education expenses: tuition, room, or board	1,000
Cody Hawkins 6121 Sweetbay Dr Crestwood KY 40014	Child/Grandchild of DaVita Employee	N/A	For college education expenses: tuition, room, or board	2,000
Jordan Helmer 2238 N. Stoneybrook Ct. Wichita KS 67226	Child/Grandchild of DaVita Employee	N/A	For college education expenses: tuition, room, or board	1,000
Kristin Helmer 2238 N. Stoneybrook Ct. Wichita KS 67226	Child/Grandchild of DaVita Employee	N/A	For college education expenses: tuition, room, or board	3,000
Zane Homs 10001 Lochalsh Lane Vienna VA 22181	Child/Grandchild of DaVita Employee	N/A	For college education expenses: tuition, room, or board	2,000
Tricia Interino 1214 Lexington Green Drive Missouri City TX 77459	Child/Grandchild of DaVita Employee	N/A	For college education expenses: tuition, room, or board	2,000
Ilona Jileeva 3739 Golden Eagle LP SE Olympia WA 98513	Child/Grandchild of DaVita Employee	N/A	For college education expenses: tuition, room, or board	3,000
Yesuk Kim 5803 Playa Way Cypress CA 90630	Child/Grandchild of DaVita Employee	N/A	For college education expenses: tuition, room, or board	3,000
Wyatt Lauer 5913 Chowan Ave. S Edina MN 55410	Child/Grandchild of DaVita Employee	N/A	For college education expenses: tuition, room, or board	3,000
Michael O'Dea 27 Farmstead Lane West Hartford CT 6117	Child/Grandchild of DaVita Employee	N/A	For college education expenses: tuition, room, or board	3,000
Ashley Petersen 426 N 9th St Oakes ND 58474	Child/Grandchild of DaVita Employee	N/A	For college education expenses: tuition, room, or board	3,000
Lani Renshaw 36420 Cypress Point Dr. Newark CA 94560	Child/Grandchild of DaVita Employee	N/A	For college education expenses: tuition, room, or board	3,000
SUBTOTAL				36,000

KT FAMILY FOUNDATION  
Form 990-PF, Return of Private Foundation  
For Year Ended 12/31/12

EIN: 91-2151390

990-PF Page 11, Part XV, Line 3b

Statement 4

Grants and Contributions Paid During the Year or Approved for Future Payment

(2 of 2)

A. Name and Address	B. If receipt is an individual, show any relationship to any foundation manager or substantial contributor	C. Foundation Status of Recipient	D. Purpose of Grant or Contribution	E. Amount
Nate Daniel Walters 678 CR 2213 Cleveland OH 77327	Child/Grandchild of DaVita Employee	N/A	For college education expenses: tuition, room, or board	2,000
Seth Andrew Walters 678 CR 2213 Cleveland OH 77327	Child/Grandchild of DaVita Employee	N/A	For college education expenses: tuition, room, or board	1,000
SUBTOTAL				3,000
			GRAND TOTAL	39,000