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C107 T

Form 990-PF

Return of Private Foundation

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

20**14**

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Do not enter social security numbers on this form as it may be made public.

Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf.

and ending For calendar year 2014 or tax year beginning A Employer Identification number Name of foundation The Steven M & Betsy S Kramer Family Foundation, Inc. Number and street (or P O box number if mail is not delivered to street address) Room/suite 58-2578302 B Telephone number (see instructions) 9815 Buice Road State ZIP code City or town GA 30022-6324 (678) 366-2244 Johns Creek Foreign postal code C If exemption application is pending, check here Foreign country name Foreign province/state/county G Check all that apply Initial return of a former public charity D 1. Foreign organizations, check here Initial return Final return Amended return 2. Foreign organizations meeting the 85% test, Address change ■ Name change check here and attach computation H Check type of organization X Section 501(c)(3) exempt private foundation E If private foundation status was terminated under section 507(b)(1)(A), check here Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation Accounting method X Cash Accrual Fair market value of all assets at F. If the foundation is in a 60-month termination end of year (from Part II, col. (c), Other (specify) under section 507(b)(1)(B), check here ▶ 🔲 (Part I, column (d) must be on cash basis) Ine 16) ▶ \$ 33,711 (d) Disbursements Part I Analysis of Revenue and Expenses (The total of (a) Revenue and (b) Net investment (c) Adjusted net for charitable amounts in columns (b), (c), and (d) may not necessarily expenses per ıncome ıncome purposes books equal the amounts in column (a) (see instructions)) (cash basis only) Contributions, gifts, grants, etc., received (attach schedule) Check ▶☐ If the foundation is not required to attach Sch B 2 Interest on savings and temporary cash investments 21 21 Dividends and interest from securities 4 5a Gross rents Net rental income or (loss) b Net gain or (loss) from sale of assets not on line 10 6a Gross sales price for all assets on line 6a 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 Less Cost of goods sold Gross profit or (loss) (attach schedule) 11 Other income (attach schedule) 12 Total. Add lines 1 through 11 21 21 Compensation of officers, directors, trustees, etc. 13 Operating and Administrative Expenses 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees (attach schedule) Accounting fees (attach schedule) Other professional fees (attach schedule) 17 Interest Taxes (attach schedule) (see instructions) 18 Depreciation (attach schedule) and depletion 19 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses (attach schedule) 100 Total operating and administrative expenses. Add lines 13 through 23 100 3.000 3,000 25 Contributions, gifts, grants paid . 26 Total expenses and disbursements. Add lines 24 and 25 3,100 O 3.000 Subtract line 26 from line 12 Excess of revenue over expenses and disbursements -3,079 Net investment income (if negative, enter -0-) 21 c Adjusted net income (if negative, enter -0-)

For Paperwork Reduction Act Notice, see instructions.

Form **990-PF** (2014)

P	art II	Balance Sheets Attached schedules and amounts in the description column	Beginning of year	End o	f year
_	art II	should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash—non-interest-bearing			
	2	Savings and temporary cash investments .	36,739	33,711	33,711
	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			
रा	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
As	10a	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		*	
		1			
	12	Less accumulated depreciation (attach schedule) ► Investments—mortgage loans		-	
	13	Investments—other (attach schedule)	····		
	14	Land, buildings, and equipment basis			· -
	17	***************************************			
	15				
	16	Other assets (describe Total assets (to be completed by all filers—see the			
	10	instructions Also, see page 1, item I)	20.720	20 744	20.744
	17	Accounts payable and accrued expenses	36,739	33,711	33,711
	18	Grants payable			
Liabilities	19	Deferred revenue			
ij	20				
abi	21	Loans from officers, directors, trustees, and other disqualified persons Mortgages and other notes payable (attach schedule)			
Ξ	22	Other liabilities (describe American Express Payable)			
	23	Total liabilities (add lines 17 through 22)		51	
_	20		0	51	
S		Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.			
ည	24	Unrestricted			
Balances	25				
ä	26 26	Temporarily restricted			
рu	20	Permanently restricted .			
Net Assets or Fund		Foundations that do not follow SFAS 117, check here ▶ ☒ and complete lines 27 through 31.			
2	27	Capital stock, trust principal, or current funds			
S	28	· · ·			
se	29	Paid-in or capital surplus, or land, bldg , and equipment fund	20.720	22.000	
AS		Retained earnings, accumulated income, endowment, or other funds	36,739	33,660	
¥,	30	Total net assets or fund balances (see instructions)	36,739	33,660	
ž	31	Total liabilities and net assets/fund balances (see			
Do	III	Instructions)	36,739	33,711	
	rt III	Analysis of Changes in Net Assets or Fund Balances	N line 00 (45	
1		net assets or fund balances at beginning of year—Part II, column (a	i), line 30 (must agree v		
_		of-year figure reported on prior year's return)	•	1	36,739
		amount from Part I, line 27a		2	-3,079
		r increases not included in line 2 (itemize)		3	
		ines 1, 2, and 3		4	33,660
		eases not included in line 2 (itemize)		5	
b	ı ota!	net assets or fund balances at end of year (line 4 minus line 5)—Pa	π II, column (b), line 30	6	33,660

orm 99	0-PF (2014) The Steve	en M & Betsy S Kramer Family	Foundation	Inc		58-	2578302 Page
art l	V Capital Gains and	Losses for Tax on Investn	nent Incom	ie			
		e kind(s) of property sold (e.g., real estatuse, or common stock, 200 shs MLC Co		Ì P—Pu	rcnase i '	Date acquired mo , day, yr)	(d) Date sold (mo , day, yr)
1a							
b							
C							
<u>d</u>				_			
<u>e</u>							
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		ost or other basi expense of sale			n or (loss) f) minus (g)
a							
b			<u>. </u>				
C							
d		 				· · · · · · · · · · · · · · · · · · ·	
<u>e</u> _	Complete only for excets sh	owing gain in column (h) and owned	t by the found	ation on 12/3:	1/69		
	(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) [Excess of col (i) er col (j), if any		col (k), but no	i (h) gain minus t less than -0-) or from col (h))
		23 01 120 1700		, so. ₍₎ , u	-	<u> </u>	
<u>a</u> _			-				
b c	-						17 11 11 11 11
d d							
e							
<u> </u>	Capital gain net income oi	r (not canital loce)	also enter ır), enter -0- ır)		
3		n or (loss) as defined in sections	1222(5) and	d (6)			
	If gain, also enter in Part I Part I, line 8	, line 8, column (c) (see instructi	ons) If (loss), enter -0- II	\ \ \ ₃		
art	V Qualification Und	ler Section 4940(e) for Redu	uced Tax o	n Net Inve	stment Inco	ome	
as t	tion 4940(d)(2) applies, leave he foundation liable for the s," the foundation does not	ve this part blank section 4942 tax on the distribu qualify under section 4940(e) E	table amoun	t of any year ete this part	ın the base ı	period?	☐ Yes 🛛 N
1	Enter the appropriate amo	ount in each column for each yea	ar, see the ir	structions b	efore making	any entries	
Cal	(a) Base period years endar year (or tax year beginning ir	(b)		(c)	table-use assets	Dis	(d) stribution ratio divided by col (c))
	2013	7	3,000	-	36,02		0 0832
	2012		3,302		40,12		0 0822
	2011		9,284		55,67	2	0 5260
	2010	2	9,213	-	66,74	1	0 4377
	2009	2	9,758		75,34	4	0 3949
2	Total of line 1, column (d))				2	1.5242
3		for the 5-year base period—dividation has been in existence if le			5, or by the	3	0 3048
1	Enter the net value of non	acharitable-use assets for 2014 f	rom Part X,	line 5		4	_33,
5	Multiply line 4 by line 3					5	10,2
6	Enter 1% of net investmen	nt income (1% of Part I, line 27b)			6	
7	Add lines 5 and 6 .	·				7	10,2
8	Enter qualifying distribution	ons from Part XII, line 4				8	3,0
		ater than line 7, check the box in	Part VI, line	1b, and cor	nplete that pa	irt using a 1%	tax rate See the

Part	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see instructi	ons)				
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)					
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check					
	here ▶ ☐ and enter 1% of Part I, line 27b .					
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-)		0			
3						
4	() The contract of the contra					
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-		0	ļ		
6	Credits/Payments					
a h	2014 estimated tax payments and 2013 overpayment credited to 2014 Exempt foreign erganizations tax withhold at accuracy					
b c	Exempt foreign organizations—tax withheld at source Tax paid with application for extension of time to file (Form 8868) 6c					
d	Tax paid with application for extension of time to file (Form 8868) Backup withholding erroneously withheld 6c 6d					
7	Total credits and payments Add lines 6a through 6d		0	i		
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8			-		
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed					
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid					
11	Enter the amount of line 10 to be Credited to 2015 estimated tax ► Refunded ► 11					
	VII-A Statements Regarding Activities					
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it	<u> </u>	Yes			
L	participate or intervene in any political campaign?	<u> 1a</u>	<u> </u>	<u> </u>		
D	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	1b		X		
	published or distributed by the foundation in connection with the activities					
С						
d	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 imposed	_				
_	on foundation managers \$	ļ	L	<u>[</u>]		
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		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	3		X		
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a	<u> </u>	Х		
b 5	If "Yes," has it filed a tax return on Form 990-T for this year? Was there a liquidation, termination, dissolution, or substantial contraction during the year?	4b	N/A	 		
•	If "Yes," attach the statement required by General Instruction T	5	-	X		
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either	[
_	By language in the governing instrument, or	ŀ	İ			
	By state legislation that effectively amends the governing instrument so that no mandatory directions that	ļ				
	conflict with the state law remain in the governing instrument?					
7						
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)					
	GA	.				
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General		<u> </u>	 		
•	(or designate) of each state as required by General Instruction G? If "No," attach explanation.	8b	X	ļ,		
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 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "Yes," complete Part XIV			_		
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their	9		_ <u>x</u> _		
	names and addresses	10		Х		
		- 00				

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	1		
	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		<u> X</u>
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified			
	person had advisory privileges? If "Yes," attach statement (see instructions)	12		Χ_
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
	Website address ► http://www.Kramer-family.org	- <i></i>		-
14	The books are in care of ► Steven & Betsy Kramer Telephone no ► (678) 366	-224	4	
	Located at ▶ 9815 Buice Road Johns Creek GA ZIP+4 ▶ 30022-63	24		<u></u>
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—Check here		ı	▶ □
	and enter the amount of tax-exempt interest received or accrued during the year			
16	At any time during calendar year 2014, 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		<u> </u>
	See the instructions for exceptions and filing requirements for FinCEN Form 114, (formerly TD F 90-22.1) If		1	
	"Yes," enter the name of the foreign country			
Par	VII-B Statements Regarding Activities for Which Form 4720 May Be Required		I	<u> </u>
	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)	İ		
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X 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)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the			
	foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days)			
_				
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in	46	N/A	
	Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance check here	1b	IN/A	
_	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that			
С	were not corrected before the first day of the tax year beginning in 2014?	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 2014, did the foundation have any undistributed income (lines 6d and			
_	6e, Part XIII) for tax year(s) beginning before 2014?			
	If "Yes," list the years 20 , 20 , 20 , 20			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to			
	all years listed, answer "No" and attach statement—see instructions)	2b	N/A	
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
	▶ 20 , 20 , 20			
За	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
	at any time during the year?			
b	If "Yes," did it have excess business holdings in 2014 as a result of (1) any purchase by the foundation or			
	disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the			
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse			
	of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the	L		ļ
_	foundation had excess business holdings in 2014)	3b	N/A	<u> </u>
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its chantable purposes?	<u>4a</u>		_ X_
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	45		
	chantable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2014?	4b	l	X

Part	: VII-B	Statements Regarding Activities f	<u>or Whi</u>	ich Form 47	<u> 20 Ma</u>	y Be Req	<u>uired (</u>	continue	ed)			
5a		ne year did the foundation pay or incur an y on propaganda, or otherwise attempt to			(sectio	n 4945(e))	?	Yes	X No			,
		ence the outcome of any specific public el tly or indirectly, any voter registration driv		(see section	4955), (or to carry o	on,	☐ Yes	⊠ No			
		ide a grant to an individual for travel, stud		her sımılar pı	ırposes	? .		Yes	⊠ No			
		ide a grant to an organization other than a on 4945(d)(4)(A)? (see instructions)	a chanta	charitable, etc , organization			ed in	☐ Yes	∑ No			
		ide for any purpose other than religious, coses, or for the prevention of cruelty to ch			literary	, or educati	onal	☐ Yes	∑ No			
b	Regulations section 53 4945 or in a current notice regarding disaster assistance						•		bed in	5b	N/A	
С	If the an	ations relying on a current notice regardin swer is "Yes" to question 5a(4), does the it maintained expenditure responsibility f	founda	tion claim ex			ax	☐ Yes	► □ □ No			
	If "Yes."	attach the statement required by Regulat	ions se	ction 53 494	5-5(d)							
6a								☐ Yes	⊠ No			
b	b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit						enefit c	contract?		6b		
72	If "Yes"	to 6b, file Form 8870						☐ Yes	X No			
b	 7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? b If "Yes," did the foundation receive any proceeds or have any net income attributable to the 				the trai			7b	N/A			
Part	VIII	Information About Officers, Directo								ploye	es,	
		and Contractors										
1	List all	officers, directors, trustees, foundation				•						
		(a) Name and address	ì hou	e, and average rs per week ed to position	i (If r	mpensation not paid, nter -0-)	emplo	Contribution byee benefit erred compo	plans	(e) Expe	nse aco allowan	
	n M Kran Buice Ro	er ad Johns Creek, GA 30022-6324	Chairn	nan & Treasu 00								
	S Kramo Buice Ro	er ad Johns Creek, GA 30022-6324	Vice C	hair & Secre 00								
			<u></u>				-					
2	"NONE	nsation of five highest-paid employees	(other	than those	include	ed on line '	I—see		··	none,	enter ——	
	(a) Name a	and address of each employee paid more than \$50,00	0 -	(b) Title, and a hours per v devoted to p	veek	(c) Comper	nsation	(d) Contrib employee plans and compen	benefit deferred	(e) Expe	nse acc allowan	
NONE	Ē											
Total	number	of other employees paid over \$50,000				•			•			

The Steven M & Betsy S Kramer Family Foundation, Inc

Form 990-PF (2014)

58-2578302

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Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid and Contractors (continued)	i Employees,
3 Five highest-paid independent contractors for professional services (see instructions). If none, enter	er "NONE."
(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NONE	
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 beneficianes served, conferences convened, research papers produced, etc.	Expenses
1 N/A	
	· ·
2	
3	
4	
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
1 <u>N/A</u>	
2	
All other program-related investments. See instructions	
· ·	
3	
Total. Add lines 1 through 3	•

Form 990-PF (2014)

	90-PF (2014) The Stevential & Betsy S. Klainer Falliny Foundation, inc	36-2376302	
Part		n foundations	
	see instructions.)		
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
_	purposes	 	•
_	Average monthly fair market value of securities	1a	34.000
b	Average of monthly cash balances .	1b	34,088
ب 2	Fair market value of all other assets (see instructions)	1c	34.000
d	Total (add lines 1a, b, and c)	1d	34,088
е	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation) 1e		
2	· · · · · · · · · · · · · · · · · · ·	+	
2	Acquisition indebtedness applicable to line 1 assets	2	24.000
3	Subtract line 2 from line 1d Cosh do mad hold for phoretable activities. Enter 1.1/ % of line 3 (for greater amount and	3	34,088
4	Cash deemed held for charitable activities Enter 1 ½ % of line 3 (for greater amount, see		F44
_	instructions)	4	511
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	33,577
6	Minimum investment return. Enter 5% of line 5	6	1,679
Part			
	foundations and certain foreign organizations check here and do not complete this part)	1.1	
1	Minimum investment return from Part X, line 6	1	1,679
2a	Tax on investment income for 2014 from Part VI, line 5	-	
b	Income tax for 2014 (This does not include the tax from Part VI)	 	
С	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments Subtract line 2c from line 1	3	1,679
4	Recoveries of amounts treated as qualifying distributions .	4	
5	Add lines 3 and 4	5	1,679
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 1	
	<u>line 1 </u>	7	1,679
Pari	XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes	T I	
а	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	1a	3,000
b	Program-related investments—total from Part IX-B	1b	- 0,000
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	3,000
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income		3,000
5	Enter 1% of Part I, line 27b (see instructions)	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	3,000
O			
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating w	memer me four	iuation

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Part	XIII Undistributed Income (se	<u>e instructions)</u>				
	•		(a)	(b)	(c)	(d)
1	Distributable amount for 2014 from P	Part XI,	Corpus	Years prior to 2013	2013	2014
•	line 7	Ī				1,679
2	Undistributed income, if any, as of the en	d of 2014		_ _		
а	Enter amount for 2013 only				0	
b	Total for prior years 20, 20_	, 20				
3	Excess distributions carryover, if any	, to 2014				
а	From 2009	25,991				
b	From 2010	26,427				
C	From 2011	26,500				
d	From 2012	1,432				
е	From 2013	1,199				
f	Total of lines 3a through e	<u> </u>	81,549			
4	Qualifying distributions for 2014 from	n Part XII,				
	line 4 ▶ \$ 3,000					
а	Applied to 2013, but not more than li	ne 2a				
b	Applied to undistributed income of pr	rior years				
	(Election required—see instructions)					
C	Treated as distributions out of corpus	s (Election				
	required—see instructions)	ļ				
d	Applied to 2014 distributable amount					1,679
e	Remaining amount distributed out of		1,321			
5	Excess distributions carryover applie					·
	(If an amount appears in column (d),					
	amount must be shown in column (a					
6	Enter the net total of each column	as				
	indicated below:					
	Corpus Add lines 3f, 4c, and 4e. Su		82,870			
b	Prior years' undistributed income Su	ubtract				
	line 4b from line 2b .			0		
С	Enter the amount of prior years' und	[:			
	income for which a notice of deficien					
	been issued, or on which the section	1 4942(a)				
	tax has been previously assessed	ļ				
d	Subtract line 6c from line 6b Taxable	е				
	amount—see instructions					
е	Undistributed income for 2013 Subt					
	4a from line 2a Taxable amount—se	ee			اء ا	
_	instructions .				0	
Ť	Undistributed income for 2014 Subt	i i				
	4d and 5 from line 1 This amount m	ust be				^
-	distributed in 2015					0
7	Amounts treated as distributions out	•	,			
	to satisfy requirements imposed by s					
	170(b)(1)(F) or 4942(g)(3) (Election	may be				
	required—see instructions) .	2000 204				
8	Excess distributions carryover from 2		35.004			
	applied on line 5 or line 7 (see instru		25,991	<u> </u>		
9	Excess distributions carryover to	2015.	EC 070			
40	Subtract lines 7 and 8 from line 6a		56,879			
10	Analysis of line 9	26 407				
_	Excess from 2010	26,427				
b	Excess from 2011	26, <u>5</u> 00				
C	Excess from 2012	1,432				
d	Excess from 2013	1,199				
е	Excess from 2014	1,321		I	I .	

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

Steven M Kramer 9815 Buice Road Johns Creek, GA 30022-6324 (678) 366-2244 chair@Kramer-family org

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

APPLICANTS SHOULD SUBMIT LETTERS STATING THE EXACT PURPOSE OF THE REQUESTS, WITH SUPPORTING DOCUMEN

c Any submission deadlines

NONE

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

GRANTS ARE LIMITED TO CHARITABLE ORGANIZATIONS, NO INDIVIDUALS

Supplementary Information (continued)

Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Foundation Recipient show any relationship to Purpose of grant or status of Amount any foundation manager or substantial contributor contribution recipient Name and address (home or business) a Paid during the year NONE Religious Support 1,000 Congregation Gesher L'Torah at the NFJC 4320 Kimball Bridge Road Alpharetta, GA 30022 NONE **Educational Support** 1,000 Jewish Family & Career Services 4549 Chamblee Dunwoody Road Atlanta, GA 30338 NONE Educational Support 500 Danbury High School 43 Clapboard Bridge Road Danbury, CT 06811 **NONE** Educational Support 500 **Bentley University** 175 Forest Street Waltham, MA 02452 За 3,000 Approved for future payment Total

Pa	rt XVI-A Analysis of Income-Producing Ac	tivities				
	er gross amounts unless otherwise indicated		isiness income	Excluded by sect	on 512, 513, or 514	7
		(a) Business code	(b) Amount	(c) Exclusion code	(d)	(e) Related or exempt function income (See instructions)
1	Program service revenue					(Occ manuchons)
	a					
	b					
	<u> </u>					
	d					
	<u> </u>					
	f					
	g Fees and contracts from government agencies					
2	Membership dues and assessments .					
3	Interest on savings and temporary cash investments .		<u> </u>			
4	Dividends and interest from securities			14	21	
5	Net rental income or (loss) from real estate					
	a Debt-financed property					
_	b Not debt-financed property					
6	Net rental income or (loss) from personal property					
7	Other investment income					
8	Gain or (loss) from sales of assets other than inventory					
9	Net income or (loss) from special events	<u> </u>				
10	Gross profit or (loss) from sales of inventory					
11	Other revenue a					
	b			_		
	<u> </u>			-		
	d					
	e		0			
40			1 (1		21	0
	Subtotal Add columns (b), (d), and (e)			<u> </u>		
13	Total. Add line 12, columns (b), (d), and (e)			<u> </u>	13	21
13 (Sec	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation					
13 (See	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation at XVI-B Relationship of Activities to the A	ccomplishm	ent of Exempt	Purposes	13	21
13 (See	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation t XVI-B Relationship of Activities to the A e No. Explain below how each activity for which incom	ccomplishm	ent of Exempt	Purposes XVI-A contributed	13	21
13 (See	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation at XVI-B Relationship of Activities to the A	ccomplishm	ent of Exempt	Purposes XVI-A contributed	13	21
13 (See	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation t XVI-B Relationship of Activities to the A e No. Explain below how each activity for which incom	ccomplishm	ent of Exempt	Purposes XVI-A contributed	13	21
13 (See	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation t XVI-B Relationship of Activities to the A e No. Explain below how each activity for which incom	ccomplishm	ent of Exempt	Purposes XVI-A contributed	13	21
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13 (See	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation t XVI-B Relationship of Activities to the A e No. Explain below how each activity for which incom	ccomplishm	ent of Exempt	Purposes XVI-A contributed	13	21
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13 (See	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation t XVI-B Relationship of Activities to the A e No. Explain below how each activity for which incom	ccomplishm	ent of Exempt	Purposes XVI-A contributed	13	21
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Form 990)-PF (2014) Ine Steve	en M & Betsy S Kra	amer Family Found	ation, inc				58-25/8302	Page 13
Part	XVII	Information Exempt Org	Regarding Trans	sfers To and Trai	nsaction	s and R	elationships	With No	ncharitable	
1	Dıd t	the organization o	directly or indirectly e	engage in any of the	following	with any	other organiz	ation desci	ribed	Yes No
•	ın se	ection 501(c) of th	e Code (other than s	section 501(c)(3) or	ganızatıon	s) or in s	ection 527, re	lating to po	olitical	
	orga	nizations?			_			-		1
	_		porting foundation to	a noncharitable ex	empt orga	nization o	of			3 3
		Cash							1a(1)	Х
		Other assets							1a(2)	X
		er transactions								
			a noncharitable exe	mpt organization					1b(1)	
			ets from a noncharite		ation		•	•	1b(2)	1
			, equipment, or othe	•					1b(3)	
		Reimbursement a		400010					1b(4)	
		oans or loan gua	-		• •		•		1b(5)	
		_	ervices or membersh	un or fundraising so	licitations	•			1b(6)	
			quipment, mailing lis			ovees			1c	X
			the above is "Yes," cor				should always	show the fa		L I ^
	value	e of the goods, othe	er assets, or services of n or sharing arrangement	iven by the reporting	foundation	. If the fou	ndation receive	d less than	fair market	
(a) Line		(b) Amount involved	,	charitable exempt organiz	·				ns, and sharing arra	angements
(4) 2		(2) / 11102111 11102112	(0) 1121110 01 112111	p. op. ogu		(, 200			,	
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						L				
	desc	cribed in section 5	ctly or indirectly affili 501(c) of the Code (c following schedule					anızatıons	☐ Yes	X No
	······	(a) Name of organ		(b) Type of	organization			(c) Descriptio	n of relationship	
				(=, -, -, -,				.,		
			·							
	_									
			 							
	Unde	er penalties of penuty. I dec	clare that I have examined this re	L eturn, including accompanying	schedules and	statements ar	L_ id to the best of my kr	nowledge and he	lief, it is true	
Sian			ion of preparer (other than taxpa				•	iomougo amo so		
Sign	l N	It MK	L	4/45/004	c				May the IRS discuss with the preparer sho	
Here	Sic	nature of officer or tru	stee	4/15/201 Date	5 / Cn.	aırman/Tı	easurer		(see instructions)?	Yes No
	1 316	Print/Type preparer		Preparer's signature			Date	1	PTIN	
Paid		, po proparer		SELF-PREP	ARED	RETHE		Check	(
Prep	arei	·		JOLLI -FINER	AILU	VE LOP			mployed	
Use (Firm's name		·				Firm's EIN		· .
	- • • • • •	Firm's address						Phone no		

Part I, Line 23 (990-PF) - Other Expenses

	_	100	0	0	0
	Description	Revenue and Expenses per Books	Net investment Income	Adjusted Net Income	Disbursements for Charitable Purposés
1	Postage	19			
2	Georgia Secretary of State	30			
3	H&R Block Tax Software	51			

Part II, Line 22 (990-PF) - Other Liabilities

		0	51
		Beginning	Ending
	Description	Balance	Balance
. 1	American Express Payable		51

									0	0	0
Check	Check "X"							Avg Hrs			Expense
if Busi	siness	Street	Cuty	State	State Zip Code	Foreign Country	Trtle	Per Week	Per Week Compensation	Benefits	Account
	86	9815 Buice Road	Johns Creek	YS VS	30022-6324		×~ 1	00 0			
		_		-			Treasurer				
	88	9815 Buice Road	Johns Creek	Ą	30022-6324		Vice Chair &	000			
							Secretary	_			