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Return of Private Foundation

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

▶ Do not enter social security numbers on this form as it may be made public. Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf.

For calendar year 2015 or tax year beginning JUL	31, 2015	, and ending	DEC 31, 2015	
Name of foundation			A Employer identification	number
THE KORT FAMILY FOUNDATION			35-7075093	,
Number and street (or P O box number if mail is not delivered to street	address)	Room/suite	B Telephone number	·
1355 PEACHTREE ST. NE		1450	404-815-50	50
City or town, state or province, country, and ZIP or foreign p. ATLANTA , GA 30339	ostal code		C If exemption application is p	
	Initial return of a fo	rmor public charity	D 1, Foreign organization	s shock hora
G Check all that apply: X Initial return	Amended return	Tiller public charity	i, roreigh organization	s, check here .
Address change	Name change		Foreign organizations me check here and attach co	eeting the 85% test,
H Check type of organization: X Section 501(c)(3) ex]	
	Other taxable private founda	tion	E If private foundation sta under section 507(b)(1	
I Fair market value of all assets at end of year J Account		Accrual	1	• •
·	her (specify)		F If the foundation is in a under section 507(b)(1	
\$ 2,086,046. (Part I, colu	mn (d) must be on cash b	pasis.)	1 211001 0001.011 001 (12)(1	/(b), 61100/ 11010 . P L
Part 1 Analysis of Revenue and Expenses	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements
(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	expenses per books	income	income	for charitable purposes (cash basis only)
1 Contributions, gifts, grants, etc., received	2,193,603.		N/A	<u> </u>
2 Check If the foundation is not required to attach Sch. B		 	<u> </u>	ļ
3 Interest on savings and temporary cash investments			ļ	
4 Dividends and interest from securities	19,290.	19,290.	·	STATEMENT 1
5a Gross rents			 	ļ
b Net rental income or (loss)	470	<u> </u>	 	GEN MENTENNE D
6a Net gain or (loss) from sale of assets not on line 10	472.			STATEMENT 2
b Gross sales price for all assets not on the form assets on time 6a	} -	0.		······
7 Capital gain net income (from Part IV, line 2)		<u>U</u> ,	<u>, </u>	<u> </u>
8 Net short-term capital gain			 	
9 Income modifications			 	
10a and allowances b Less Cost of goods sold			 	
c Gross profit or (loss)		,	 	
11 Other income		 	 	<u> </u>
12 Total. Add lines 1 through 11	2,213,365.	19,290		
13 Compensation of officers, directors, trustees, etc.	0.	0		0.
14 Other employee salaries and wages]
15 Pension plans, employee benefits				
0 16a Lenal fees STMT 3	4,667.	0	•	4,667
b Accounting fees c Other professional fees				
c Other professional fees			<u> </u>	
Taxes ECEIVED 18 Taxes ECEIVED 19 Special and deptetion 20 Special and deptetion 21 Taxes, conferences, and meetings 22 Plunting and publications			 	
TaxeRECEIVED				
Depreciation and depletion				·
2 E 24 Secupancy R. 8 0 2016 S				
Y 2 Travel, conferences, and meetings.	<u></u>			-
	<u> </u>		 	
23 Undergwoenses			+	
24 Total operating and administrative expenses. Add lines 13 through 23 Contributions, gifts, grants paid 26 Total expenses and disbursements.	4,667.	0	1	1 667
expenses. Add lines 13 through 23 25 Contributions, gifts, grants paid	4,667.	<u>-</u>	•	4,667
26 Total expenses and disbursements.	0.		†	
Add lines 24 and 25	4,667.	0	_)	4,667
27 Subtract line 26 from line 12:	7,007.		1	±,007
2 Excess of revenue over expenses and disbursements	2,208,698.	1		
b Net investment income (if negative, enter -0-)	2,200,000	19,290		
C Adjusted net income (if negative, enter -0-)			N/A	
523501 11-24-15 LHA For Paperwork Reduction Act Notice, see	instructions.		1	Form 990-PF (2015

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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.

	990-PF(2015) THE KORT FAMILY FOUNDATION	35-	7075	<u>093</u>	F	age 4
_	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or	4948	- see ii	<u>ıstru</u>	ction	ıs)
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.	1	-			
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)		ļ			
	Domestic foundations that meet the section 4940(e) requirements in Part V, check here 🕨 🗔 and enter 1%	1_1_	ļ		3	86.
	of Part I, line 27b					1
	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).					_
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2	ļ			0.
3	Add lines 1 and 2	3_			3	86.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		ļ			<u>0.</u>
	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0	5	ļ		3	86.
	Credits/Payments:	ļ	İ			
	2015 estimated tax payments and 2014 overpayment credited to 2015	4]			
	Exempt foreign organizations - tax withheld at source	_				
	Tax paid with application for extension of time to file (Form 8868) 6c	_	ļ			
	Backup withholding erroneously withheld	_	į.			
7	Total credits and payments. Add lines 6a through 6d	7_				<u>0.</u>
8	Enter any penalty for underpayment of estimated tax. Check here Life form 2220 is attached	8	1			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9			3	86.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	<u> </u>			
	Enter the amount of line 10 to be: Credited to 2016 estimated tax	11				
_	rt 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 participate or interven	ne in			Yes	
	any political campaign?			1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition	on)? .		1b_		_X_
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials publis	hed or		[]		
	distributed by the foundation in connection with the activities.				1	
C	Did the foundation file Form 1120-POL for this year?			1c		_X_
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:					
	(1) On the foundation. \triangleright \$ 0 . (2) On foundation managers. \triangleright \$ 0	•				
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation				;	
	managers. ► \$ 0 .					
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?			2		X
	If "Yes," attach a detailed description of the activities.					
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation	ı, or				
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			_3		_X_
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			4a		_X_
b	If "Yes," has it filed a tax return on Form 990-T for this year?	1	A\r	4b		<u></u>
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?			5		X_
	If "Yes," attach the statement required by General Instruction T.					l
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:					,
	By language in the governing instrument, or			1		1
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the st	ate law			ı	
	remain in the governing instrument?			6	X	L
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 II.	XV		_7	X	
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 (or designate)		· —			}
	of each state as required by General Instruction G? If "No," attach explanation			_8b		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 c		-			
	year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes," complete Part XIV			9		X
10		STM	r 6	10	Х	
			Fo	rm 99 0)-PF	(2015)

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X

3Ь

4a

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,

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

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 2015?

Form 4720, to determine if the foundation had excess business holdings in 2015.)

Form 990-PF (2015) THE KORT FAMILY FOUNDATI	ON		<u>35-707509</u>	3 Page 6
Part VII-B Statements Regarding Activities for Which I	orm 4720 May Be F	Required (continu	ued)	
 5a During the year did the foundation pay or incur any amount to: (1) Carry on propaganda, or otherwise attempt to influence legislation (section) 	2/(45/40)		s 🔀 No	
(2) Influence the outcome of any specific public election (see section 4955); o			S LALINO	
any voter registration drive?		. —	s X No	
(3) Provide a grant to an individual for travel, study, or other similar purposes			s X No	
(4) Provide a grant to an organization other than a charitable, etc., organizatio				1
4945(d)(4)(A)? (see instructions)			s [X] No	
(5) Provide for any purpose other than religious, charitable, scientific, literary,			C==7	
the prevention of cruelty to children or animals?		Ye لـــا Ye	s LX No	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und			NT / 7 E	
section 53.4945 or in a current notice regarding disaster assistance (see instru Organizations relying on a current notice regarding disaster assistance check h				'
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fi				
expenditure responsibility for the grant?			s No	
If "Yes," attach the statement required by Regulations section 53.494		,		
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on			
a personal benefit contract?		Ye	s X No	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?		<u>6</u>	X X
If "Yes" to 6b, file Form 8870.				
7a At any time during the tax year, was the foundation a party to a prohibited tax s				
b If Yes, did the foundation receive any proceeds or have any net income attributed Part VIII Information About Officers, Directors, Trust				<u> </u>
Paid Employees, and Contractors	•	magers, migniy	/	
1 List all officers, directors, trustees, foundation managers and their				
(a) Name and address	(b) Title, and average hours per week devoted	(c) Compensation (If not paid,	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
	to position	`enter'-0-)'	compensation	allowances
ANTON GREGORY KORT 1355 PEACHTREE ST. NE, SUITE 1450	CO-TRUSTEE			
ATLANTA , GA 30339	10.00	0.	0.	0.
JONATHAN KORT	CO-TRUSTEE	· · · · ·	0.	<u>U.</u>
1355 PEACHTREE ST. NE, SUITE 1450	CO INODIED			
ATLANTA , GA 30339	10.00	0.	0.	0.
2 Compensation of five highest-paid employees (other than those inc	luded on line 1). If none.	enter "NONE."	<u> </u>	
	(b) Title, and average		(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	and deferred compensation	account, other allowances
NONE				
	-			
				
· · · · · · · · · · · · · · · · · · ·	a contract	, at 100		
	1			•
Total number of other employees paid over \$50,000			•	0

Total. Add lines 1 through 3

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four		ee instructions.)
<u>_</u>			
•	Average monthly fair market value of securities	1a	902,871.
b	Average of monthly cash balances	1b	53,406.
c	Fair market value of all other assets	1c	30,1000
d		1d	956,277.
_	Reduction claimed for blockage or other factors reported on lines 1a and		20012111
Ī	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	956,277.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	14,344.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	941,933.
6	Minimum investment return Enter 5% of line 5 ADJUSTED FOR SHORT TAX PERIOD	6	19,871.
Ť	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are		
_	foreign organizations check here and do not complete this part.)		
1	Minimum investment return from Part X, line 6	1	19,871.
2a	Tax on investment income for 2015 from Part VI, line 5 2a 386.		
Ь		1	
C	Add lines 2a and 2b	2c	386.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	19,485.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	19,485.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	19,485.
F	art XII Qualifying Distributions (see instructions)	*************************************	
	Gualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a		1a	4,667.
b		1b	0.
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		3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	4,667.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		···
	income. Enter 1% of Part I, line 27b	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	4,667.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation 4940(e) reduction of tax in those years.	qualifies for t	

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		T FAMILY FO		A		75093 Page 10
	art XIV Private Operating Fo			A, question 9)	N/A	
1 8	a If the foundation has received a ruling or					
	foundation, and the ruling is effective for					
t	Check box to indicate whether the found		ng foundation described in		4942(j)(3) or 4	942(1)(5)
2 ;	Enter the lesser of the adjusted net	Tax year		Prior 3 years	1	
	income from Part I or the minimum	(a) 2015	(b) 2014	(c) 2013	(d) 2012	(e) Total
	investment return from Part X for					
	each year listed					
t	85% of line 2a					
	Qualifying distributions from Part XII,		·			
	line 4 for each year listed					
(Amounts included in line 2c not					
	used directly for active conduct of					
	exempt activities					
	Qualifying distributions made directly					
	for active conduct of exempt activities.					
	Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the					
	alternative test relied upon:					
•	a "Assets" alternative test - enter: (1) Value of all assets					
	• • • • • • • • • • • • • • • • • • • •				-	
	(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
1	"Endowment" alternative test - enter					
	2/3 of minimum investment return					
	shown in Part X, line 6 for each year]			
	listed Support" alternative test - enter:					
'	• •					
	 Total support other than gross investment income (interest, 					
	dividends, rents, payments on					
	securities loans (section		ľ	:		
	512(a)(5)), or royalties)					
	(2) Support from general public and 5 or more exempt					
	organizations as provided in					
	section 4942(j)(3)(B)(iii)					
	(3) Largest amount of support from					
	an exempt organization					
	(4) Gross investment income] (2				<u> </u>
LP	art XV Supplementary Info		· · · · · · · · · · · · · · · · · · ·	if the foundation	nad \$5,000 or m	nore in assets
	at any time during t		ructions.)			
1	Information Regarding Foundation	•				
	a List any managers of the foundation wh year (but only if they have contributed n			ributions received by the	toundation before the c	ose of any tax
		lore man po,000). (See s	section 507 (u)(z).)			
_	ONE					
	 List any managers of the foundation wh other entity) of which the foundation has 			or an equally large porti	on of the ownership of a	partnership or
37/	• •	3 a 1070 of greater intere				
	ONE CONTRACTOR OF THE CONTRACT		011 11 1			
2	Information Regarding Contributi					
	Check here ► X if the foundation of the foundation makes gifts, grants, etc.	Inly makes contributions	to preselected charitable	organizations and does	not accept unsolicited re	quests for funds. If
		·			 	nu u.
	a The name, address, and telephone num	ber or e-mail address of	the person to whom appli	cations should be addre	ssed:	•
				•		
	h. The form in which applications about h	a cubmitted and informs	stron and materials though	a culd in cluid as		
	b The form in which applications should b	is sommitten sug intorma	LION AND MATERIALS THEY ST	TOUID INCIDDE:		
	c Any submission deadlines:					
	d Any restrictions or limitations on award	s, such as by geographic	al areas, charitable fields,	kinds of institutions, or	other factors:	"
_						6 000 55
523	601 11-24-15					Form 990-PF (2015)

Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, show any relationship to any foundation manager or substantial contributor Recipient Foundation status of Purpose of grant or contribution Amount Name and address (home or business) recipient a Paid during the year NONE Total ▶ 3a 0, b Approved for future payment NONE

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Total

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.	Unrelated	d business income		ded by section 512, 513, or 514	(e)
1 Program service revenue:	(a) Business code	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income
a	T				
b					
c			1 1		
d			1		
e	 				
g Fees and contracts from government agencies	 		+		
•	 		+		
2 Membership dues and assessments		<u> </u>	1		
3 Interest on savings and temporary cash					
investments			1 - 4	10 000	
4 Dividends and interest from securities	ļ	····	14	19,290.	
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	1		1 '		
property					
7 Other investment income					
8 Gain or (loss) from sales of assets other					
than inventory			18	472.	
9 Net income or (loss) from special events					
O Gross profit or (loss) from sales of inventory	1				
1 Other revenue:				-	
a	1				
b		· · · · · · · · · · · · · · · · · · ·	1		
		···	-}		·
c	 				
	l				
d			1		
e			┼	19 762	
e		0		19,762.	
e				19,762.	
e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) 15 See worksheet in line 13 instructions to verify calculations.					
e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) 15 See worksheet in line 13 instructions to verify calculations.					
2 Subtotal. Add columns (b), (d), and (e) 13 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	o the Acco	omplishment of E	xemp	t Purposes	19,762
e 2 Subtotal. Add columns (b), (d), and (e) 3 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 Line No. Explain below how each activity for which incor	o the Acco	omplishment of E	xemp	t Purposes	19,762
2 Subtotal. Add columns (b), (d), and (e) 13 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	o the Acco	omplishment of E	xemp	t Purposes	19,762
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2 Subtotal. Add columns (b), (d), and (e) 3 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	o the Acco	omplishment of E	xemp	t Purposes	19,762
2 Subtotal. Add columns (b), (d), and (e) 3 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	o the Acco	omplishment of E	xemp	t Purposes	19,762
2 Subtotal. Add columns (b), (d), and (e) 3 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	o the Acco	omplishment of E	xemp	t Purposes	19,762
e 12 Subtotal. Add columns (b), (d), and (e) 13 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 Line No. Explain below how each activity for which incor	o the Acco	omplishment of E	xemp	t Purposes	19,762
e 12 Subtotal. Add columns (b), (d), and (e) 13 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 Line No. Explain below how each activity for which incor	o the Acco	omplishment of E	xemp	t Purposes	19,762
e 12 Subtotal. Add columns (b), (d), and (e) 13 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 Line No. Explain below how each activity for which incor	o the Acco	omplishment of E	xemp	t Purposes	19,762

523821 11-24-15

Part XV	Information Re Exempt Organi	egarding Transfers To a	and Transactions a	nd Relationships With	Noncharitat	ile	
4 Dud the		rectly engage in any of the following	on with any other organization	n described in section 501(c) of		Yes	No
		(3) organizations) or in section 52				1.03	110
	• • • • • • • • • • • • • • • • • • • •	ation to a noncharitable exempt or		Zations !		l	
	, ,	· · · · · · · · · · · · · · · · · · ·	=		100	. .l	x
							X
	transactions:					=1	 ^
-		ble everent erganization				41	x
(1) O	urchaege of accore from a nor	ble exempt organization ncharitable exempt organization .			1b(X
(2) F	antal of facilities, equipment,	or other accete			1b(X
(3) IN	ontai oi iaciiitios, cyuipinont, t oimhureamant arrannamante	or other assets			1b(<u>X</u>
						\neg	X
(6) P	erformance of services or me	mbership or fundraising solicitation			1b(X
		uling lists, other assets, or paid em					X
		"Yes," complete the following sche					
		oundation. If the foundation receiv					
		other assets, or services received.		,			
(a) Line no	(b) Amount involved	(c) Name of noncharitable		(d) Description of transfers, tran	sactions, and sharin	arrangen	nents
		N/A					
					· · ·		
					_		
2a Is the	foundation directly or indirec	ctly affiliated with, or related to, one	e or more tax-exempt organi	zations described			
in sec	tion 501(c) of the Code (othe	er than section 501(c)(3)) or in sec	etion 527?		١لــا١	′es 🚨	X No
b If "Yes	s," complete the following sch		· · · · · · · · · · · · · · · · · · ·				
	(a) Name of org	ganization	(b) Type of organization	(c) Description	of relationship		
	N/A	······································					
							
							
				<u></u>			
		that I have examined this return, including including the peclaration of preparer (other the			May the	IRS discus	s this
Sign	A M.	16.1	3/20/2016		shown b	th the prep elow (see in	arer nstr)?
Here	Jane 1	mycr		1100100	رلغا ا	∕es L	No
	Signature of office or trustee		Date	Title			
	Print/Type preparer's n	ame Preparer's	signature	Date Check	if PTIN		
Daid		(IV)	lun, X	Ville self- employe			_
Paid	WILLIAM C.				P005		<u> </u>
Prepar	Thirtie Haine F 2200	ORE STEPHENS TII	LLEAR LIKE	Firm's EIN	▶ 58-067	3524	
Use Or			/	0.5			
		30 JOHNSON FERRY	.	25	404 0==		_
	<u> </u>	<u> LANTA, GA 30342</u>	ડ	Phone no.	<u>404-256</u>		
					Form	990-PI	F (2015)

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.
 ▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.is.gov/form990.

OMB No 1545-0047

2015

Employer identification number Name of the organization 35-7075093 THE KORT FAMILY FOUNDATION Organization type (check one): Filers of Section: 501(c)() (enter number) organization Form 990 or 990-EZ 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization X 501(c)(3) exempt private foundation Form 990-PF 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. General Rule [X] For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. **Special Rules** For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, Ine 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$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 its Form 990-PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2015)

Name of organization

Employer identification number

THE KORT FAMILY FOUNDATION

35-7075093

	OKI TAMILI TOUNDATION		
Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	I space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	SCHWAB - 3789 SEP IRA 1355 PEACHTREE ST., NE STE 1450 ATLANTA , GA 30339	\$117,491.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	SCHWAB -9265 SPOUSAL ROLLOVER (AURORA) 1355 PEACHTREE ST., NE STE 1450 ATLANTA , GA 30339	\$1,052,524.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	SCHWAB -6275 IRA CONTRIBUTORY 1355 PEACHTREE ST., NE STE 1450 ATLANTA , GA 30339	\$ 528,229.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4	SCHWAB- 8272 SPOUSAL ROLLOVER 1355 PEACHTREE ST., NE STE 1450 ATLANTA , GA 30339	\$ 495,359.	Person X Payroll
(a) No. 2 (a) No. 2 (a) No. 3 (a) No. 4 (a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Employer identification number

THE KORT FAMILY FOUNDATION

35-7075093

Part II	Noncash Property (see instructions). Use duplicate copies of Part	Il 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
		 \$	

FORM 990-PF	DIVIDENDS	AND INTEREST	FROM SECUR	ITIES S	TATEMENT 1
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS	(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	
CHARLES SCHWAB	43,693.	24,403.	19,290.	19,290.	
TO PART I, LINE 4	43,693.	24,403.	19,290.	19,290.	·

FORM 990-PF GAIN O	R (LOSS)	FROM	SALE	OF	ASSETS		STA	PEMEN	т 2
(A) DESCRIPTION OF PROPERTY					MANNER ACQUIREI		ATE UIRED	DATE	SOLD
PUBLICALY TRADED SECURITIES						-		-	
GROSS VA	(C) LUE AT OF ACQ.	EX	(D) PENSE SALE	OF	(E) DEPREC	1.	GAIN	(F)	oss
898,882.	924,027.			0.	<u> </u>	0.			,145.
(A) DESCRIPTION OF PROPERTY					MANNER ACQUIREI		ATE UIRED	DATE	SOLI
CYBERONICS MERGER					PURCHASEI)			
(B) GROSS CO	(C) ST OR	EX	(D) EPENSE	OF	(E)			(F)	
	R BASIS		SALE		DEPRE	2.	GAIN	OR L	oss
1,214.	0.			0.		0.		1	,214.
NET GAIN OR LOSS FROM SALE O	F ASSETS							-23	,931.
CAPITAL GAINS DIVIDENDS FROM	PART IV						, ,	24	,403.
TOTAL TO FORM 990-PF, PART I	, LINE 6A								472.
FORM 990-PF	LE(GAL	FEES				STA	TEMEN	T 3
DESCRIPTION	(A) EXPENSE PER BOO		NET I		ST- AD	(C) JUSTE INCO) TABLE
LEGAL FEES	4,6	67.			0.			4	,667.
TO FM 990-PF, PG 1, LN 16A	4,6	67.			0.			4	,667.

FORM 990-PF	CORPO	RATE STOCK		STATEMENT	4
DESCRIPTION			BOOK VALUE	FAIR MARKET VALUE	?
ARIAD PHARMACEUTICAL		_	15,495.	11,87	
BORG WARNER			14,252.	12,10	
CATEPILLAR, INC.			15,726.	13,59	
CHEMOURS COMPANY			437.		4.
CHEVRON CORPORATION			17,696.	17,99	
COCA COLA COMPANY			16,432.	17,18	
CONSOLIDATED EDISON			12,718.	12,85	
COOPER COMPANIES			12,149.	9,39	
DU PONT EI DE NEMOUR			11,152.	13,32	
DUKE ENERGY CORP			4,899.	4,71	
GENTHERM, INC.			19,208.	18,48	
HALYARD HEALTH, INC.			1,019.		35.
HANCOCK JOHN FINANCIAL			21,660.	21,30	
HEXCEL CORP			17,593.	16,72	
JOHNSON & JOHNSON			20,042.	20,54	
KIMBERLY-CLARK CORP			22,994.	25,46	
KRAFT HEINZ COMPANY			5,250.	4,80	
LIVANOVA			10,409.	8,90	
MELCO CROWN ENTERTAINMENT			13,960.	11,42	
METLIFE, INC.			19,600.	16,87	
MONDELEZ INTL CLASS			9,042.	8,96	
NETSCOUT SYSTEMS, INC.			17,379.	14,12	
NOVO-NORDISK			23,184.	23,23	
PAYPAL HOLDINGS INCO PHILIP MORRIS INTERNATIONAL			9,645.	9,41	
SENSIENT TECHNOLOGIES			17,106. 21,479.	17,58	
SNAP ON, INC.			11,173.	20,41	
TRINITY INDUSTRIES			16,107.	12,00 13,93	
WESTERN UNION CO.			10,291.	9,85	
WESTERN UNION CO.			10,291.	7,05	<u> </u>
TOTAL TO FORM 990-PF, PART II,	LINE 1	.0B	408,097.	388,11	13.
FORM 990-PF	OTHER	INVESTMENTS		STATEMENT	5
		VALUATION		FAIR MARKET	r
DESCRIPTION		METHOD	BOOK VALUE	VALUE	
DOUBLELINE LOW DURATION		COST	60,256.	59,8	72
TEMPLETON GLOBAL BOND		COST	30,082.	29,0	
VANGUARD SHORT TERM INVESTMENT		COST	-		. • •
GRADE FUND			60,164.	59,80	00.
-		COST	258.	- -	88.
ASTON MONTAG & CALDWELL				4.1	~ -
DODGE & COX STOCK FUND		COST	72,835.	67,42	

THE KORT FAMILY FOUNDATION			35-7075093
FPA CRESCENT FUND	COST	53,340.	49,391.
LONGLEAF PARTNERS SMALL CAP FUND	COST	124,699.	121,583.
MATTHEWS ASIA SMALL CO.	COST	50,066.	50,067.
MATTHEWS PACIFIC TIGER	COST	88,059.	80,325.
OAKMARK INTERNATIONAL FUND	COST	79,712.	70,374.
PIMCO ALL ASSET INSTL	COST	51,938.	46,991.
PRINCIPAL MIDCAP INST SALIENT MLP & ENERGY	COST COST	105,547. 54,103.	93,505. 33,411.
T ROWE PRICE NEW ASIA FUND	COST	101,278.	98,767.
VANGUARD INTERNATIONAL EXPLORER	COST	69,322.	64,309.
VIRTUS FOERIGN OPPTY	COST	77,188.	75,667.
WESTWOOD INCOME OPPY	COST	51,495.	49,652.
SPDR S&P 500	COST	427,205.	413,856.
VANGUARD DIVIDEND APPRECIATION	COST	91,939.	89,968.
TOTAL TO FORM 990-PF, PART II, LIN	JE 13	1,709,655.	1,606,987.
-	TANTIAL CONTRI VII-A, LINE 10	BUTORS	STATEMENT 6
NAME OF CONTRIBUTOR	ADDRESS		
SCHWAB-3789 SEP IRA	1355 PEACHTREE STREET NE, STE 1450 ATLANTA, GA 30309		
SCHWAB-9265 SPOUSAL ROLLOVER (AURORA)	1355 PEACHTE	REE STREET NE, STE	1450
(ATTROPA)			

SCHWAB-6275 IRA CONTRIBUTORY

SCHWAB-8272 SPOUSAL ROLLOVER

1355 PEACHTREE STREET NE, STE 1450

1355 PEACHTREE STREET NE, STE 1450

ATLANTA , GA 30309

ATLANTA , GA 30309