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Form **990-PF**

Return of Private Foundation

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

OMB No 1545-0052

Department of the Treasury
Internal Revenue Service

Informat

For calendar year 2015 or tax year beginning

► 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.

FUL	alen	uar year zo is or tax year beginning		, and ending		
Nar	ne of	foundation			A Employer identification	on number
K	ozi	metsky Family Foundat:	on		47-208215	5
Nun	ber a	nd street (or P.O. box number if mail is not delivered to s		Room/su	B Totophone namber	
_		1 W. 25th Street		300	512-474-6	312
		own, state or province, country, and ZIP or foreign	n postal code		C If exemption application is	pending check here
		tin, TX 78705		- 		
G	heck	all that apply Initial return		ormer public charity	D 1. Foreign organization	ns, check here
		Final return	Amended return		2. Foreign organizations n check here and attach o	neating the 85% test
	hook	Address change	Name change	·	 1	
		type of organization: X Section 501(c)(3 ction 4947(a)(1) nonexempt charitable trust	exempt private foundation Other taxable private foundation	ation	E If private foundation st	
L Fa		rket value of all assets at end of year J Acco		X Accrual	under section 507(b)(• • •
		Part II, col (c), line 16)	Other (specify)	LAEJ Accidal	F If the foundation is in a under section 507(b)(
•		85.742. (Part I, o	olumn (d) must be on cash i	basis)	— [ander section 507(b)(T)(D), chock here
	rt I	Analysis of Revenue and Expenses	(a) Revenue and	(b) Net investmen	t (c) Adjusted net	(d) Disbursements
<u> </u>		(The total of amounts in columns (b), (c), and (d) may no necessarily equal the amounts in column (a))	expenses per books	income	income	for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received	100,000.		N/A	
	2	Check In the foundation is not required to attach Sch. B				
2016	3	Interest on savings and temporary cash investments				
	4	Dividends and interest from securities	2,676.	2,67	6.	Statement 1
9	١.	Gross rents				
•		Net rental income or (loss)	12 126			<u> </u>
3	62	Net gain or (loss) from sale of assets not on line 10 Gross sales price for all 1 6 0 7 A	<3,126.	<u> </u>		_
*§	7	assets on line 6a Capital gain net income (from Part IV, line 2)	•		0.	
8	8	Net short-term capital gain			<u> </u>	
Ž	9	Income modifications				
2	10a	Gross sales less returns and allowances				
S. ANNERSVEIUN	b	Less Cost of goods sold				
V.) c	Gross profit or (loss)				
	11	Other income	<11,508.	>	0.	Statement 2
	12	Total. Add lines 1 through 11	88,042.	2,67	76.	
	13	Compensation of officers, directors, trustees etc	0.		0.	0.
	14	Other employee salaries and wages				
Ś		Pension plans, employee benefits				
nse		Legal fees				ļ
Expenses	ı	Accounting fees		Charles at 1947 Bord Action		<u> </u>
ē	17	Other professional fees Interest	3 4 1		to 1 1 1	
ativ	18	Taxes	2	- Vani Vi		
istr	19	Depreciation and depletion	3	MAY 2 5 201	6 13	
Ē	20	Occupancy	18	2 6 7111		
Ad	21	Travel, conferences, and meetings	11	DEDEN		
Operating and Administrative	22	Printing and publications		TOWERV, U		
	23	Other expenses				
	24	Total operating and administrative			_	_
a C		expenses. Add lines 13 through 23	0.		0.	0.
_		Contributions, gifts, grants paid	4,600.	 		4,600.
	26	Total expenses and disbursements.	4 600		<u>, </u>	4 600
	27	Add lines 24 and 25 Subtract line 26 from line 12:	4,600.	<u> </u>	0.	4,600.
			83,442.			
		Excess of revenue over expenses and disbursements Net investment income (if negative, enter -0-)	03,442.	2,6	76.	
		Adjusted net income (if negative, enter -0-)			N/A	
5235		.,		<u> </u>		

523501 11-24-15 LHA For Paperwork Reduction Act Notice, see instructions.

Form 990-PF (2015) 47-2082155 Kozmetsky Family Foundation Page 2 Beginning of year End of year Part II Balance Sheets Atlached schedules and amounts in the description column should be for end-of-year amounts only (c) Fair Market Value (b) Book Value (a) Book Value 1 Cash - non-interest-bearing 2 Savings and temporary cash investments 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 7 Other notes and loans receivable Less: allowance for doubtful accounts 1 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Investments - U.S. and state government obligations b Investments - corporate stock c Investments - corporate bonds 11 Investments - land buildings and equipment basis Less accumulated depreciation 12 Investments - mortgage loans Stmt 3 85,738. 85,738. 13 Investments - other 14 Land, buildings, and equipment: basis Less accumulated depreciation 15 Other assets (describe ▶ 16 Total assets (to be completed by all filers - see the 85,742. 85,742. instructions. Also, see page 1, item 1) 17 Accounts payable and accrued expenses 2,300. 18 Grants payable 19 Deferred revenue 20 Loans from officers, directors, trustees, and other disqualified persons 21 Mortgages and other notes payable 22 Other liabilities (describe 2,300. 23 Total liabilities (add lines 17 through 22) Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31. Balances 24 Unrestricted 25 Temporarily restricted 26 Permanently restricted Fund Foundations that do not follow SFAS 117, check here $\triangleright X$ and complete lines 27 through 31. Net Assets or 83,442 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 83,442. 30 Total net assets or fund balances 85,742 31 Total liabilities and net assets/fund balances 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) 2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) 6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30 Form 990-PF (2015)

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		sses for Tax on In						47-20	OZIJJ Page 3
(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.)							c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)	
1a Whitebox Tactic				_ _	۲			6/11/15	12/22/15
b Capital Gains D				·	†				
C									
d									
<u>e</u>					Ц,				<u> </u>
(e) Gross sales price	(f) [Depreciation allowed (or allowable)		t or other basis xpense of sale				(h) Gain or (lo (e) plus (f) mini	ıs (g)
a 16,347.				20,00	0.				<3,653.
ь 527.									527.
C									
d			-						
Complete only for assets showing	7210 ID /	Solumn (h) and owned by	he foundation	on 12/21/60	_			Davis (Cal. /h)	
Complete only for assets showing					-			Gains (Col. (h) ga k), but not less t	
(i) F.M.V. as of 12/31/69		j) Adjusted basis as of 12/31/69		cess of col. (1) col. (j), if any				Losses (from co	ol. (h)) ´
a									<3,653.>
b									527.
d					_				
e									
		C. W and a state of the			_				
2 Capital gain net income or (net capi	tal loss)	$\begin{cases} \text{ If gain, also enter} \\ \text{If (loss), enter -0} \end{cases}$	in Part I, line In Part I, line	7 7	}	2			<3,126.
3 Net short-term capital gain or (loss) if gain, also enter in Part I, line 8, co			d (6):		J				
If (loss), enter -0- in Part I, line 8 Part V Qualification Un	-l 0		D. J			3		N/	<u>A</u>
If section 4940(d)(2) applies, leave this Was the foundation liable for the sectio If "Yes," the foundation does not qualify Enter the appropriate amount in ea	n 4942 / under :	tax on the distributable am section 4940(e). Do not co	mplete this pa	rt.					Yes X No
(a) Base period years Calendar year (or tax year beginning		(b) Adjusted qualifying dis	-	Net value of no	(c))	use assets	Dis (col. (b)	tribution ratio divided by col. (c))
2014	,,		0.				0.		.000000
2013							-		
2012									
2011									
2010									
2 Total of line 1, column (d)								2	.000000
3 Average distribution ratio for the 5- the foundation has been in existence			on line 2 by 5,	or by the number	r of ye	ears		3	.000000
4 Enter the net value of noncharitable		-	line 5					4	49,409.
	030 a3	sold for 20 to HUIII I att A,	iiii u						
5 Multiply line 4 by line 3								5	0.
6 Enter 1% of net investment income	(1% of	Part I, line 27b)						6	27.
7 Add lines 5 and 6								7	27.
8 Enter qualifying distributions from								8	4,600.
If line 8 is equal to or greater than I See the Part VI instructions.	ine 7, ch	neck the box in Part VI, line	t 1b, and comp	olete that part us	ng a 1	% tax	rate.		
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Form 990-PF (2015) Kozmetsky Family Foundation	<u> </u>		2082155		Page 4
Part VI Excise Tax Based on Investment Income (Section 494	0(a), 4940(b), 4940(e), or	4948 -	see instru	oitou	าร)
1a Exempt operating foundations described in section 4940(d)(2), check here and e	nter "N/A" on line 1.				
Date of ruling or determination letter (attach copy of letter if nec	cessary-see instructions)	1 1			
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here	► X and enter 1%	1			<u> 27.</u>
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). 丿	1 1			_
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Of	thers enter -0-)	2			<u>0.</u>
3 Add lines 1 and 2		3		_	27.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. O	Others enter -0-)	4			0.
5 Tax based on investment income Subtract line 4 from line 3. If zero or less, enter -0-		5			27.
6 Credits/Payments:		\			
a 2015 estimated tax payments and 2014 overpayment credited to 2015	6a	╛╏			
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			0.
8 Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is atta	ached	8			
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	•	9			27.
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	. •	10			
11 Enter the amount of line 10 to be: Credited to 2016 estimated tax	Refunded ▶	11			
Part VII-A Statements Regarding Activities				1	
1a During the tax year, did the foundation attempt to influence any national, state, or local legis	station or did it participate or interve	ne in	<u> </u>	Yes	
any political campaign?			1a		<u>X</u> _
b Did it spend more than \$100 during the year (either directly or indirectly) for political purpo	ses (see instructions for the definiti	on)?	1b		X
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities an	nd copies of any materials publis	shed or			
distributed by the foundation in connection with the activities					
c Did the foundation file Form 1120-POL for this year?			1c		X_
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the	_				
(1) On the foundation. \blacktriangleright \$ (2) On foundation managers		•			
e Enter the reimbursement (if any) paid by the foundation during the year for political expend	iture tax imposed on foundation				
managers. ► \$ 0 .					
2 Has the foundation engaged in any activities that have not previously been reported to the I	RS?		2	<u> </u>	<u>X</u> _
If "Yes," attach a detailed description of the activities			ŀ		
3 Has the foundation made any changes, not previously reported to the IRS, in its governing	,	i, or			l
bylaws, or other similar instruments? If "Yes," attach a conformed copy of the chang			3		X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year	JL,		4a		X
b If "Yes," has it filed a tax return on Form 990-T for this year?		N,	/A 4b	\vdash	<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					
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied e	uther:		1		
 By language in the governing instrument, or 			1		
 By state legislation that effectively amends the governing instrument so that no mandator 	ry directions that conflict with the st	ate law	1		
remain in the governing instrument?			6	X	
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," con	mplete Part II, col (c), and Part	XV	7	X	<u></u>
8a Enter the states to which the foundation reports or with which it is registered (see instruction	ons) ►	_	<u> </u>		
TX					
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the A	Attorney General (or designate)			١,,	
of each state as required by General Instruction G? If "No," attach explanation			8b	X	<u> </u>
9 Is the foundation claiming status as a private operating foundation within the meaning of se		alendar	_		
year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes," of		ar	4 9	\ ,,	X_
Did any persons become substantial contributors during the tax year? If "Yes," attach a sched	ule listing their names and addresses	Stmt		X	(00:5:
			Form 99	U-PF	(2015)

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Part VIII Information About Officers, Directors, Trustees, Foundation Ma Paid Employees, and Contractors (continued)	nagers, Highly		
3 Five highest-paid independent contractors for professional services. If none, enter "NONE."			
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Comp	ensation
NONE	(6) 1) po el col 100	10,00	
1010		Į.	
Total number of others receiving over \$50,000 for professional services		D	0
Part IX-A Summary of Direct Charitable Activities		<u> </u>	
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information	ation such as the		
number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	INON SUCH AS THE	Expenses	
1 N/A			
1 N/A			
			0.
			<u> </u>
2			
3			
4			
Part IX-B Summary of Program-Related Investments			
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and	2.	Amount	
1 N/A			
			0.
2			
<u></u>			
All other program related investments. Can instructions	 _		
All other program-related investments. See instructions.			
3 N/A			
			^
			<u> </u>
Total, Add lines 1 through 3	▶		0.

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Pa	rt X Minimum Investment Return (All domestic foundations must complete this part Foreign four	ndations, see instructions)	
1 1	air market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
a /	Average monthly fair market value of securities	1a 50	,161.
	Average of monthly cash balances	1b	·
	Fair market value of all other assets	1c	
ď.	Total (add lines 1a, b, and c)	10 50	,161.
	Reduction claimed for blockage or other factors reported on lines 1a and		<u> </u>
	ic (attach detailed explanation) le 0 .		
	Acquisition indebtedness applicable to line 1 assets	2	0.
	Subtract line 2 from line 1d		,161.
	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	752.
	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5 49	,409.
	Minimum investment return. Enter 5% of line 5		,470.
	rt XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations an		<u> </u>
	foreign organizations check here and do not complete this part.)		
1	Minimum investment return from Part X, line 6	1 2	,470.
	Tax on investment income for 2015 from Part VI, line 5		
b	income tax for 2015. (This does not include the tax from Part VI.)		
C .	Add lines 2a and 2b	2c	27.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3 2	,443.
	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5 2	,443.
6	Deduction from distributable amount (see instructions)	6	0.
	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1		,443.
	rt XII Qualifying Distributions (see Instructions)		·
			_
	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes	1 1	
	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a 4	,600.
	Program-related investments - total from Part IX-B		0.
	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
	Amounts set aside for specific charitable projects that satisfy the		
	Suitability test (prior IRS approval required)	3a	
	Cash distribution test (attach the required schedule)	3b	
	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4 4	,600.
	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	27.
	Adjusted qualifying distributions. Subtract line 5 from line 4		,573.
	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	

Part XIII	Undistributed Inc	ome (see instructions)
-----------	-------------------	------------------------

	(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
1 Distributable amount for 2015 from Part XI,	,			20.0
line 7				2,443.
2 Undistributed income, if any, as of the end of 2015				2,110.
a Enter amount for 2014 only			0.	
b Total for prior years:				
, ,		0.		
3 Excess distributions carryover, if any, to 2015				·
a From 2010				
b From 2011				
c From 2012				
d From 2013				
e From 2014				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2015 from			· · · · · · · · · · · · · · · · · · ·	
Part XII, line 4: ▶\$ 4 , 600 .				
a Applied to 2014, but not more than line 2a			0.	
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2015 distributable amount	· · · · · · · · · · · · · · · · · · ·			2,443.
e Remaining amount distributed out of corpus	2,157.			· · · · · · · · · · · · · · · · · · ·
5 Excess distributions carryover applied to 2015	0.			0.
(If an amount appears in column (d) the same amount must be shown in column (a))				
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	2,157.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
c 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		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2014. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2015. Subtract			·	
lines 4d and 5 from line 1. This amount must				
be distributed in 2016		<u> </u>		0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required - see instructions)	0.	· · · · · · · · · · · · · · · · · · ·		· · · · · · · · · · · · · · · · · · ·
8 Excess distributions carryover from 2010				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2016	2 1 5 7			
Subtract lines 7 and 8 from line 6a	2,157.			
10 Analysis of line 9 ⁻ a Excess from 2011			İ	
b Excess from 2012				
c Excess from 2013				
d Excess from 2014				
e Excess from 2015 2,157.				
271374				

	ky Family F				-2082155 Page 10
Part XIV Private Operating Fo			-A, question 9)	N/A	
1 a If the foundation has received a ruling or					
foundation, and the ruling is effective for		_	▶	, , , ,	
b Check box to indicate whether the found		ng foundation described i		4942(j)(3) or L	4942(_I)(5)
2 a Enter the lesser of the adjusted net	Tax year	(11001/	Prior 3 years	(4) 00 40	
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					
b 85% of line 2a	· · · · · · · · · · · · · · · · · · ·	<u> </u>			
c Qualifying distributions from Part XII,					
line 4 for each year listed		 			
d Amounts included in line 2c not				ľ	
used directly for active conduct of					
exempt activities		 			
e Qualifying distributions made directly					
for active conduct of exempt activities.		i			
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)					
b "Endowment" alternative test - enter		-			
2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter:					
(1) Total support other than gross				İ	
investment income (interest,					
dividends, rents, payments on securities loans (section					
512(a)(5)), or royalties)					
(2) Support from general public					
and 5 or more exempt organizations as provided in					
section 4942(j)(3)(B)(iii)		<u> </u>			
(3) Largest amount of support from					
an exempt organization					
(4) Gross investment income		1	<u>_</u>		
Part XV Supplementary Info			if the foundation	n had \$5,000	or more 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	o have contributed more nore than \$5,000). (See	e than 2% of the total conf section 507(d)(2).)	tributions received by th	ne toundation before	the close of any tax
See Statement 5					
b List any managers of the foundation wh other entity) of which the foundation ha			(or an equally large por	tion of the ownership	p of a partnership or
None					
2 Information Regarding Contribut					
Check here ► X if the foundation of	only makes contributions	s to preselected charitable	organizations and does	not accept unsolicit	ted requests for funds. If
the foundation makes gifts, grants, etc.), c, and d.
a The name, address, and telephone num	ber or e-mail address of	the person to whom appl	ications should be addi	essed:	
b The form in which applications should be	ne submitted and inform	ation and materials they s	hould include:		
···					
c Any submission deadlines:					
d Any restrictions or limitations on award	s, such as by geographi	cal areas, charitable fields	, kınds of institutions, o	r other factors:	

Grants and Contributions Paid During the	ne Year or Approved for Future	Payment		
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	dentification .	
a Paid during the year				
merican Red Cross	None	Public Charity	Unrestricted	
025 E Street, NW				
Mashington, DC 20006				2,30
he Salvation Army	None	Public Charity	Unrestricted	
15 Slaters Lane				
lexandria, VA 22314				2,30
			1	
		<u> </u>		
			ļ	
		 		
			:	
Total b Approved for future payment		γ	▶ 3a	4,60
Approved for future payment				
Mana				
None				
Total		<u> </u>	▶ 3b	

Part XVI-A Analysis of Income-Producing Activities

nter gross amounts unless otherwise indicated. 1 Program service revenue:	(a)				(e)
1 Program service revenue:	(a) Business	(b)	(C) Exclu- sion	(d)	Related or exempt
	code	Amount	code	Amount	function income
a	_				
b	_				
c	_		_		
d	_				
e			- 		
g Fees and contracts from government agencies	-		- - -	 +	
Membership dues and assessments	 		- - -		
3 Interest on savings and temporary cash					
investments					
4 Dividends and interest from securities			14	2,676.	
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			18	<11,508.	<u> </u>
8 Gain or (loss) from sales of assets other			1.0	.2 126	
than inventory			18	<3,126.	<u> </u>
Net income or (loss) from special events Gross profit or (loss) from sales of inventory			+		
11 Other revenue:			- - -		
b					
c					
d					
e					
12 Subtotal. Add columns (b), (d), and (e)			0.	<11,958	<u> </u>
13 Total Add line 12, columns (b), (d), and (e)				13	<11,958
(See worksheet in line 13 instructions to verify calculations.	.)				.

N/A		
		
		
<u>_</u>		
		
_ - - -		
		
		
	-	

(6) Performance of services or membership or fundraising solicitations

1b(6)

	note in the sum of the		, 4	igo io
Pá	Information Regarding Transfers To and Transactions and Relationships With Noncha	aritable	•	
_	Exempt Organizations		W	- NI -
1	Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of		Yes	NO
	the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?			1
a	Transfers from the reporting foundation to a noncharitable exempt organization of:			l
	(1) Cash	1a(1)		X
	(2) Other assets	1a(2)		Х
b	Other transactions:			
	(1) Sales of assets to a noncharitable exempt organization	1b(1)		Х
	(2) Purchases of assets from a noncharitable exempt organization	1b(2)		X
	(3) Rental of facilities, equipment, or other assets	1b(3)		X
	(4) Reimbursement arrangements	1b(4)		X
	(5) Loans or loan quarantees	16(5)		X

c Sharing of facilities, equipment, mailing lists, other assets, or paid employees

d 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.

colu	mn (d) the value of the goods,	, other assets, or servi	ices received.				
(a)Line no	(b) Amount involved	(c) Name of	noncharitable	exempt organization	(d) Description	on of transfers, transaction	ns, and sharing arrangements
			N/A				
				-			
ın s	ne foundation directly or indire ection 501(c) of the Code (oth- es," complete the following sc	er than section 501(c) hedule.			izations described		Yes X No
	(a) Name of or	ganization		(b) Type of organization		(c) Description of rel	ationship
	N/A	·					
					ļ		
		<u></u>					
					<u> </u>		
Sign	Under penalties of perjury, I declar and belief, it is true, correct, and co			taxpayer) is based on all infor	mation of which prepai	er has any knowledge	May the IHS discuss this return with the preparer shown below (see instr.)?
Here		1		15-16-2016	- <i>-</i>	dent	_ X Yes No
	Signature of officer or truste		·	Date	Title	· · · · · · · · · · · · · · · · · · ·	
	Print/Type preparer's r		Preparer's si	gnature	Date	. – .	PTIN
D	Jonathan 1	D.	Donatt	(O adenolfi	5/9/16	self- employed	
Paid	Adinolfi	 			3/3/10		P00848630
Prepa		M US, LLP				Firm's EIN ► 4	2-0714325
Use C	· · · · · · · · · · · · · · · · · · ·	400 D	\ . 1= \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	3 0 1 0			
		400 Post C		d., Suite 90	טע		2 625 2506
	ı He	ouston. TX	. //056	- 1009		I Phone no / T	3-625-3500

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.irs.gov/form990 .

OMB No 1545-0047

Name of the organization

Employer identification number

47-2082155

K	ozmetsky Family Foundation	47-2082155						
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	X 501(c)(3) exempt private foundation							
	4947(a)(1) nonexempt charitable trust treated as a private foundation							
	501(c)(3) taxable private foundation							
	us covered by the General Rule or a Special Rule. c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special	Rule See instructions						
General Rule								
	on filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions tota by one contributor. Complete Parts I and II. See instructions for determining a contribu							
Special Rules								
sections 509(a)(1 any one contribu	on described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% supp I) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 1 stor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the am IZ, line 1 Complete Parts I and II	6a, or 16b, and that received from						
year, total contril	on described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received frobutions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or edformelty to children or animals. Complete Parts I, II, and III							
year, contribution is checked, ente purpose Do not	on described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from secclusively for religious, charitable, etc., purposes, but no such contributions totaled refer the total contributions that were received during the year for an exclusively religions complete any of the parts unless the General Rule applies to this organization because ble, etc., contributions totaling \$5,000 or more during the year	d more than \$1,000 If this box ous, charitable, etc ,						
but it must answer "No" o	that is not covered by the General Rule and/or the Special Rules does not file Schedu on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on it set 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

Kozmetsky Family Foundation

47-2082155

Part I	Contributors (see instructions) Use duplicate copies of Part I if a	additional space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	Greg and Cindy Kozmetsky 1301 W. 25th Street, Suite 300 Austin, TX 78705	ss	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
523452 10-	26-15	\$Schedule B (Forn	Person Payroll Noncash (Complete Part II for noncash contributions)

Employer identification number

Kozmetsky Family Foundation

47-2082155

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
		s	
(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
523453 10-2		\$\$	990 990-F7 or 990-PF\/2015

Relationship of transferor to transferee

Transferee's name, address, and ZIP + 4

Form 990-PF	Dividends	and Int	erest	from Se	cur	ities	Sta	tement	1
Source	Gross Amount	Capit Gain Divide	ıs	(a) Revenu Per Boo	. –	(b) Net Inves ment Inco		(c) Adjust Net Inc	
Bonds and Treasuries	3,203.		527.	2,6	76.	2,67	6.		
To Part I, line 4	3,203.		527.	2,6	76.	2,67	6.		
Form 990-PF		Other	Inco	me			Sta	tement	2
Description			Re	(a) venue Books		(b) et Invest- ent Income		(c) Adjuste Iet Inco	
Unrealized Gain (Lo	ess) on			<11,508	 !.>	0			
Total to Form 990-P	F, Part I,	line 11		<11,508	 !.> == =	C			
Form 990-PF		Other 1	nvest	ments	<u>-</u>		Sta	atement	3
Description			Valua Meth		Bool	k Value	Fai	r Marke Value	t
Marketable Securiti	.es		FMV			85,738.		85,7	38.
Total to Form 990-F	F, Part II,	line 13	3		,	85,738.		85,7	38.

Form 990-PF		Substantial Contributors	Statement
Name of Contributo	r —	Address	
Greg and Cindy Koz	metsky	1301 W. 25th Street, Suit Austin, TX 78705	e 300
Form 990-PF		rt XV - Line 1a Foundation Managers	Statement

Name of Manager

Gregory A. Kozmetsky Cynthia H. Kozmetsky