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Form 990-PF

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.

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OMB No 1545-0052

Department of the Treasury Internal Revenue Service

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

F	or ca	lendar year 2015 or tax year beginning		12	2/10 , 2015	, and endin	g		12/31, 2015
_		of foundation			-			Employer identif	ication number
	STE	PHEN AND CAROL CASSIANI FAMIL	Y FOU	NDATION				81-077685	7
-	Numbe	er and street (or P O box number if mail is not delivered	address)		Room/suite	В	Telephone numb	er (see instructions)	
	870	3 CRESCENT GATE LANE						(713) 29	90-0965
7	City or	town, state or province, country, and ZIP or foreign pos	tal code						
							C	If exemption application pending, check here	ation is
	HOU	STON, TX 77024						pending, check here	
G	Che	eck all that apply X Initial return		Initial return	of a former p	oublic charit	у р	1 Foreign organiza	tions check here ►
		Final return		Amended re	turn		1	2 Foreign organiza	
		Address change		Name chang	е		-	85% test check l	here and attach
Н	Che	eck type of organization X Section 501(c)(3) e	xempt private	foundation		\neg _	·	
ſ	S	Section 4947(a)(1) nonexempt charitable trust	\bigcap c	ther taxable pr	ıvate founda	tion	-		on status was terminated
ī				method X C		crual			in a 60-month termination
	end		-	pecify)			- '		a)(1)(B), check here
				d) must be on ca	sh basis)		_		
		Analysis of Revenue and Expenses (The	(2)	Payanya and	1				(d) Disbursements
		total of amounts in columns (b), (c), and (d)		Revenue and openses per	(b) Net inv	1	(c)	Adjusted net	for charitable
		may not necessarily equal the amounts in column (a) (see instructions))		books	incor	ne		income	purposes (cash basis only)
_	1	Contributions gifts grants etc received (attach schedule) .		301,242					
	2	Chock I if the foundation is not required to		· • • • · · · · · · · · · · · · · · · ·					
	3	attach Sch B							
	1 .	Dividends and interest from securities							
	4								
	5a								
a	b	(,			-				
Revenue	ba b	Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a							
Š	7	Capital gain net income (from Part IV, line 2) .				0.			
œ	8	Net short-term capital gain							
	9	Income modifications							
	10 a	Gross sales less returns and allowances							
	Ь	Less Cost of goods sold .							
	С	Gross profit or (loss) (attach schedule)							
	11	Other income (attach schedule)							
	12	Total Add lines 1 through 11		301,242.		0.			<u></u>
	13	Compensation of officers, directors, trustees, etc		0.					
ses	14	Other employee salaries and wages							
Suc	15	Pension plans, employee benefits							
ă	16 a	Legal fees (attach schedule)							
ш	Ь	Pension plans, employee benefits Legal fees (attach schedule) Accounting fees (attach schedule) Other professional fees (attach schedule) Interest Taxes (attach schedule) (
<u>v</u>	c	Accounting fees (attach schedule) Other professional fees (attach schedule)	EU.	30					
rat	17	Interest	ł	700					
st	18	Taxes (attach schedule) (see institutions).	016	8					
i	19	Depreciation (attach schedule) and depletion.		<u> </u>					
H	20	Occupancy	117						· · · · · · · · · · · · · · · · · · ·
4	21	Occupancy	UI						
anc	21	Printing and publications							
0	23	Other expenses (attach schedule)							
Hir	23 24 25	Total operating and administrative expenses							
er		Add lines 13 through 23	<u></u>	0.					
o	25	Contributions, gifts, grants paid							
	26	Total expenses and disbursements Add lines 24 and 25		0.					0
Operating and	27	Subtract line 26 from line 12		-				·	
		Excess of revenue over expenses and disbursements		301,242.					
		Net investment income (if negative, enter -0-)				0.			
	1	Adjusted net income (if negative, enter -0-).							

JSA For Paperwork Reduction Act Notice, see instructions 5E1410 1 000 63 0 3 KO M 2 0 A

Form **990-PF** (2015)

Dar	Attached schedules and amounts in the description column should be for end-of-year	Beginning of year	End of	
Part II	amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
1	Cash - non-interest-bearing		301,242.	301,242.
2				····
3				
	Less allowance for doubtful accounts ▶			
4	Pledges receivable ▶			
	Less allowance for doubtful accounts ▶			
5	Grants receivable			<u>.</u>
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 ▶			
ets ets	Inventories for sale or use			
SS	Prepaid expenses and deferred charges			
₹ 10	a Investments - U.S. and state government obligations (attach schedule).			
	b Investments - corporate stock (attach schedule)			
	c Investments - corporate bonds (attach schedule)			
11	and equipment basis			
1	Less accumulated depreciation (attach schedule)			
12				
13	Investments - other (attach schedule)			
14				
	equipment basis Less accumulated depreciation (attach schedule)			
15				.
16				
	instructions Also, see page 1, item I)	0.	301,242.	301,242.
17	• • • • • • • • • • • • • • • • • • • •			
18	Grants payable			
<u>8</u> 19	Deferred revenue			
<u>=</u> 20	Loans from officers, directors, trustees, and other disqualified persons			
21	Mortgages and other notes payable (attach schedule)			
22	Proof of the Proo			
		_	0	
23		0.	0.	
,,	Foundations that follow SFAS 117, check here			
ances	and complete lines 24 through 26 and lines 30 and 31.			
E 24				
24 BB 24				
ᄝ	Permanently restricted			
Net Assets or Fund	Foundations that do not follow SFAS 117,			
ב	check here and complete lines 27 through 31.			
χ 27	Capital stock, trust principal, or current funds			
5 2	B Paid-in or capital surplus, or land, bldg, and equipment fund		301,242.	
Š 29	Retained earnings, accumulated income, endowment, or other funds	0.	301,242.	
30	Total net assets or fund balances (see instructions)	0.	301,242.	
Z 3		0.	301,242.	
	instructions)		301,242.	
	Analysis of Changes in Net Assets or Fund Balar		wet agree with	
	Total net assets or fund balances at beginning of year - Part I			0.
	end-of-year figure reported on prior year's return)			301,242.
	Enter amount from Part I, line 27a			JU1, 242.
	Other increases not included in line 2 (itemize)		1	301,242.
	Add lines 1, 2, and 3		4	301,242.
	Decreases not included in line 2 (itemize) ►	line 5) - Part II, column (h		301,242.
ь	lotal net assets or fund balances at end of year (line 4 minus	iiile 5) - Part II, column (b	y, iiile 30 6	501,242.

Pag	e	3

Pa	rt IV Capital Gains	and Losses for Tax on Inv	restment Income			
	` .	describe the kind(s) of property sold	, -	(b) How acquired	(c) Date acquired	(d) Date sold
	2-story br	P - Purchase D - Donation	(mo , day, yr)	(mo , day, yr)		
1 a						
b						
С						
d						
<u>e</u>				1		
(e) Gross sales price (f) Depreciation allowed (g) Cost or other basis plus expense of sale					(h) Gain or (lo (e) plus (f) minu	
а						
b						
С					 .	
<u>d</u>						
<u>e</u>						
	Complete only for assets	showing gain in column (h) and owne	ed by the foundation on 12/31/69		Gains (Col (h) g	
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	col	(k), but not less t Losses (from co	
а					 	
b						
С_						
d						
е						
2	Capital gain net income of		f gain, also enter in Part I, line 7 f (loss), enter -0- in Part I, line 7	2		
3	Net short-term capital ga	in or (loss) as defined in sections	1222(5) and (6)			
	If gain, also enter in Pa	art I, line 8, column (c) (see ins	structions) If (loss), enter -0- in $ig\}$			
	Part I, line 8	<u> </u>	<u></u>	3		
Pa	rt V Qualification L	Jnder Section 4940(e) for Re	educed Tax on Net Investment I	ncome		
Was		the section 4942 tax on the distri	T AVAILABLE FOR INITIAL butable amount of any year in the b			Yes No
If "Y		not qualify under section 4940(e)				
1		iount in each column for each yea	ar, see the instructions before makii	ng any ent		
	(a) Base period years	(b)	(c)		(d) Distribution ra	atio
Cal	endar year (or tax year beginning in)	Adjusted qualifying distributions	Net value of noncharitable-use assets		(col (b) divided by	col (c))
	2014					
	2013					
	2012					
	2011					
	2010		<u> </u>			
2				2		
3	· ·	·	de the total on line 2 by 5, or by the ess than 5 years	3		
4	Enter the net value of no	ncharitable-use assets for 2015 f	from Part X, line 5	4		
5 Multiply line 4 by line 3						
6	Enter 1% of net investme	ent income (1% of Part I, line 27b)		6		
7	Add lines 5 and 6			7		
8	Enter qualifying distributi If line 8 is equal to or g Part VI instructions	ons from Part XII, line 4 reater than line 7, check the box	x in Part VI, line 1b, and complete	8 that part	using a 1% ta	x rate See the
						000 DE

Form	990-PF (2015) . STEPHEN AND CAROL CASSIANI FAMILY FOUNDATION 81-077			Page 4
Par	tVI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see	nstru	ction	s)
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			0.
	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-) 2			
3	Add lines 1 and 2			0.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 4			0.
5	Tax based on investment income Subtract line 4 from line 3 If zero or less, enter -0			0.
6	Credits/Payments			
а	2015 estimated tax payments and 2014 overpayment credited to 2015 6a			
b	Exempt foreign organizations - tax withheld at source			
С	Tax paid with application for extension of time to file (Form 8868)			
d	Backup withholding erroneously withheld			
7	Total credits and payments Add lines 6a through 6d			0.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached			
9	Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed			0.
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 2016 estimated tax ▶ Refunded ▶ 11			
Pai	t 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		Yes	No
	participate or intervene in any political campaign?	1a		Х
ь	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see			
	Instructions for the definition)?	1b		Х
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials			
	published or distributed by the foundation in connection with the activities			
С	Did the foundation file Form 1120-POL for this year?	1c		Х
	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 ▶ \$			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		Х
-	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			
ŭ	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		Х
42	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		Х
	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X
Ŭ	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 either			
Ū	By language in the governing instrument, or			
	By state legislation that effectively amends the governing instrument so that no mandatory directions that			
	conflict with the state law remain in the governing instrument?	6	Х	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	7	X	
7	Enter the states to which the foundation reports or with which it is registered (see instructions)			
8a	TX			
.	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General			
b	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8b	Х	
0	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or			
9	4942(j)(5) for calendar year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes,"			
	W. /	9		х
4-	complete Part XIV			
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses . ATCH. 1	10	х	1
				1

Pai	t 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		Yes	No			
	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		Х			
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		Х			
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х				
	Website address ► N/A						
14	The books are in care of ▶ STEPHEN M. CASSIANI Telephone no ▶ 713-290	-096	5				
	Located at ▶8703 CRESCENT GATE LANE HOUSTON, TX ZIP+4 ▶ 77024						
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		▶				
	and enter the amount of tax-exempt interest received or accrued during the year						
16	At any time during calendar year 2015, 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		Х			
	See the instructions for exceptions and filing requirements for FinCEN Form 114 If "Yes," enter the name of						
	the foreign country ▶						
Pa	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required						
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No			
1a	During the year did the foundation (either directly or indirectly)						
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No						
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a						
	disqualified person? Yes X No						
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No						
	(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)						
t	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations						
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b		<u> </u>			
	Organizations relying on a current notice regarding disaster assistance check here						
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that						
	were not corrected before the first day of the tax year beginning in 2015?	1c		X			
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private						
	operating foundation defined in section 4942(j)(3) or 4942(j)(5))						
a	At the end of tax year 2015, did the foundation have any undistributed income (lines 6d and						
	6e, Part XIII) for tax year(s) beginning before 2015?			Ì			
	If "Yes," list the years						
ŧ	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			1			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to	0.5		v			
	all years listed, answer "No" and attach statement - see instructions)	2b		X			
(If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here						
	<u> </u>	İ					
3	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise						
	at any time during the year?						
ı	o If "Yes," did it have excess business holdings in 2015 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	2 h					
	foundation had excess business holdings in 2015)	3b		x			
	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	-	+ ^			
ı	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	4b		x			
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2015?	QQ	O DE				

Pai	t VII-B Statements Regarding Activities	for Which Form	4720 May Be Req	uired (continued)				
5a	During the year did the foundation pay or incur any amou							
	(1) Carry on propaganda, or otherwise attempt to influe	nce legislation (section	n 4945(e))?	. Yes X No	,			
	(2) Influence the outcome of any specific public ele							
	directly or indirectly, any voter registration drive?			Yes X No	,			
	(3) Provide a grant to an individual for travel, study, or of				,			
	(4) Provide a grant to an organization other than a	• •						
	section 4945(d)(4)(A)? (see instructions)				,			
	(5) Provide for any purpose other than religious, ch							
	purposes, or for the prevention of cruelty to children				,			
b	If any answer is "Yes" to 5a(1)-(5), did any of the							
b	Regulations section 53 4945 or in a current notice regarding disaster assistance (see instructions)?							
	Organizations relying on a current notice regarding disas			_	5b			
С	If the answer is "Yes" to question 5a(4), does the			, , , , ,				
	because it maintained expenditure responsibility for the g			res No	'			
	If "Yes," attach the statement required by Regulations sec							
6 a	Did the foundation, during the year, receive any fun			v		1		
	on a personal benefit contract?				- 1			
b	Did the foundation, during the year, pay premiums, dire	ectly or indirectly, on a	personal benefit contra	act?	6b	X		
	If "Yes" to 6b, file Form 8870			<u> </u>				
7a	At any time during the tax year, was the foundation a pa							
b	If "Yes," did the foundation receive any proceeds or have							
Pa	Information About Officers, Director	rs, Trustees, Fou	ndation Manager	s, Hignly Paid Emp	oloyees,			
1	List all officers, directors, trustees, foundation n	nanagers and their	compensation (see	instructions).				
	(a) Name and address	(b) Title, and average hours per week	(c) Compensation (If not paid,	(d) Contributions to employee benefit plans		se account,		
	(a) Name and address	devoted to position	enter -0-)	and deferred compensation	other ai	lowances		
						_		
ATC	H 2		0.	0.		0		
	· · · · · · · · · · · · · · · · · · ·							
2	Compensation of five highest-paid employees	(other than thos	e included on lin	e 1 - see instructi	ons). If n	one, ente		
	"NONE "	_		(d) Contributions to				
la	Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	`employee benefit		se account, lowances		
,	Traine and addition of sach employee pare more man project	devoted to position		plans and deferred compensation	other at	iowances		
	NONE							
					-			
		-						
	I number of other employees paid over \$50,000.		l					
Tata								

orm 990-PF (2015) Part VIII Information About Officers, Directors, Trustees, Founda	tion Managers, Highly Paid Emplo	yees,
and Contractors (continued)	(a.a. itti) If	IE II
3 Five highest-paid independent contractors for professional services	(b) Type of service	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
NONE		
otal number of others receiving over \$50,000 for professional services	<u>.,</u>	
art IX-A Summary of Direct Charitable Activities		
dittion A duminary of Bridge Charles Activities		т
List the foundation's four largest direct charitable activities during the tax year. Include relevar organizations and other beneficiaries served, conferences convened, research papers produced, e		Expenses
1 THE FOUNDATION HAS NO DIRECT CHARITABLE ACTIVITIE		
DISBURSES CHARITABLE FUNDS TO OTHER TAX-EXEMPT OR		
DISBORSES CHARITABLE FONDS TO OTHER TAX EXEMIT OR	GAVIZATIONS	
2		
	·-	
3		
4		
Part IX-B Summary of Program-Related Investments (see instruct		Amount
Describe the two largest program-related investments made by the foundation during the tax yea 1 THE FOUNDATION DOES NOT HAVE ANY PROGRAM-RELATED	r on lines 1 and 2	Amount
INVESTMENTS.		
TIV EDITIENTS.		
2		
		1
All other program-related investments. See instructions		
2 NONE		1

Form **990-PF** (2015)

Total. Add lines 1 through 3.

Form 990-PF (2015) Page 8 Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, Part X see instructions) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., 1a а 12,552. Fair market value of all other assets (see instructions) 12,552 Reduction claimed for blockage or other factors reported on lines 1a and Acquisition indebtedness applicable to line 1 assets 3 12,552. Subtract line 2 from line 1d Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see 188. instructions) 12,364. Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4. 5 37. Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations Part XI and certain foreign organizations check here ▶ and do not complete this part) 37. 1 2a Tax on investment income for 2015 from Part VI, line 5 | 2a Income tax for 2015 (This does not include the tax from Part VI). . 2b 20 37. Distributable amount before adjustments Subtract line 2c from line 1 3 3 4 37. 5 5 6 6 Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, 37. Part XII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes a Expenses, contributions, gifts, etc - total from Part I, column (d), line 26 1a **b** Program-related investments - total from Part IX-B Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., 2 purposes _______ Amounts set aside for specific charitable projects that satisfy the 3 a Suitability test (prior IRS approval required) 3a **b** 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

Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income

Enter 1% of Part I, line 27b (see instructions) Adjusted qualifying distributions. Subtract line 5 from line 4

qualifies for the section 4940(e) reduction of tax in those years

Form **990-PF** (2015)

6

0.

0.

Form 990-PF (2015)

Pag	e	9

Рa	rt XIII Undistributed Income (see instr	uctions)			
4	Distributable amount for 2015 from Part XI,	(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
'	` [37.
	line 7				
	Undistributed income, if any, as of the end of 2015				
	Enter amount for 2014 only	· · · · · · · · · · · · · · · · · · ·			
b	Total for prior years 20 <u>13</u> ,20 <u>12</u> ,20 <u>11</u>			,	
3	Excess distributions carryover, if any, to 2015				
а	From 2010				
b	From 2011				
С	From 2012				
d	From 2013				
	From 2014				
	Total of lines 3a through e				
	Qualifying distributions for 2015 from Part XII,				
	line 4 🕨 \$				
-	Applied to 2014, but not more than line 2a				
b	Applied to undistributed income of prior years				
	(Election required - see instructions)				
С	Treated as distributions out of corpus (Election				
	required - see instructions)				
d	Applied to 2015 distributable amount				
е	Remaining amount distributed out of corpus				
5	Excess distributions carryover applied to 2015.				
	(If an amount appears in column (d), the same amount must be shown in column (a))				
6	Enter the net total of each column as				
	indicated below:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5				
ь	Prior years' undistributed income Subtract				
	line 4b from line 2b				
С	Enter the amount of prior years' undistributed				
	income for which a notice of deficiency has				
	been issued, or on which the section 4942(a) tax has been previously assessed				
	, ,				
C	Subtract line 6c from line 6b Taxable amount - see instructions				
е	Undistributed income for 2014 Subtract line				
-	4a from line 2a Taxable amount - see				
	instructions				
f	Undistributed income for 2015 Subtract lines				
	4d and 5 from line 1 This amount must be				37.
	distributed in 2016				37.
7	Amounts treated as distributions out of corpus				
	to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (Election may be				
	required - see instructions)				
8	Excess distributions carryover from 2010 not				
	applied on line 5 or line 7 (see instructions)	. =		····	<u> </u>
9	Excess distributions carryover to 2016.				
	Subtract lines 7 and 8 from line 6a	0.			
10	Analysis of line 9				
	Excess from 2011				
	Excess from 2012				
	Excess from 2013				
	Excess from 2014				
	Excess from 2015				
:			·		- 000 DE

Form	990-PF (2015) . '	STEPHEN A	ND CAROL CASSI	ANI FAMILY FOU	NDATION	81-0776857 Page 10
Pa	rt XIV Private Ope	erating Foundations	(see instructions	and Part VII-A, ques	tion 9)	NOT APPLICABL
1 a	If the foundation has r	eceived a ruling or de	etermination letter th	at it is a private ope	rating	
	foundation, and the ruling	g is effective for 2015, ea	nter the date of the rulin	g	▶∟	
b	Check box to indicate w	whether the foundation	is a private operating	foundation described	in section	4942(j)(3) or 4942(j)(5)
2 a	Enter the lesser of the ad-	Tax year		Prior 3 years		(e) Total
	justed net income from Part	(a) 2015	(b) 2014	(c) 2013	(d) 2012	
	I or the minimum investment return from Part X for each					
	year listed					
ь	85% of line 2a					
	Qualifying distributions from Part					
٠	XII, line 4 for each year listed .					
d	Amounts included in line 2c not					
	used directly for active conduct					
6	of exempt activities			1		
٠	directly for active conduct of					
	exempt activities Subtract line					
3	2d from line 2c Complete 3a, b, or c for the					
_	alternative test relied upon					
а	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 invest-					
	ment return shown in Part X,					
	tine 6 for each year listed					
С	"Support' alternative test - enter					
	(1) Total support other than					
	gross investment income (interest dividends rents					
	payments on securities					
	loans (section 512(a)(5)) or royalties)					
	(2) Support from general					
	public and 5 or more exempt organizations as					
	provided in section 4942 (j)(3)(B)(iii)					
	(3) Largest amount of sup-					
	port from an exempt organization.					
	(4) Gross investment income					
Ρa		ntary Information (Complete this par	t only if the found	ation had \$5,0	000 or more in assets a
		uring the year - see		•		
1	Information Regarding	g Foundation Manage	rs:			
а	List any managers of	the foundation who h	nave contributed mo	ore than 2% of the to	tal contributions	s received by the foundation
	before the close of any	tax year (but only if th	ney have contributed	more than \$5,000) (See section 507	(d)(2))
	ATTACHME	NT 3				
b	List any managers of	the foundation who	own 10% or more	of the stock of a cor	rporation (or an	equally large portion of the
	ownership of a partner	ship or other entity) of	f which the foundation	on has a 10% or greate	er interest	
	N/A					
2	Information Regardin	g Contribution, Grant	, Gift, Loan, Scholars	ship, etc., Programs:		
	Check here ► X if t	he foundation only	makes contributions	s to preselected cha	aritable organiza	ations and does not accep
						duals or organizations unde
	other conditions, comp	olete items 2a, b, c, an	d d			
a	The name, address, a	nd telephone number	or e-mail address o	f the person to whom a	applications shoul	d be addressed
		•		•		
b	The form in which app	lications should be su	bmitted and informa	tion and materials the	y should include	
C	: Any submission deadli	nes				
	I Any contrations as 1	mitations on assert-	such so his sees	tranhical areas shar	itable fiolds les	nds of institutions, or othe
C	i Any restrictions or ii factors	miniations on awards	, such as by geog	grapilicai aleas, char	itable lielus, Kii	ids of matitudons, of othe

Page **11**

3 Grants and Contributions Paid Duri	ng the Year or Appr	oved for F	uture Payment	
3 Grants and Contributions Paid Duri Recipient Name and address (home or business)	If recipient is an individual show any relationship to	Foundation	Purpose of grant or	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	Purpose of grant or contribution	Amount
a Paid during the year				
		:		
		<u> </u>		
Total	 		▶ 3a	
b Approved for future payment				
		,		
		<u> </u>	<u> </u>	
Total		, .	▶ 3b	1

:

Page **12**

Part XVI-	-A Analysis of Income-Prod	ucing Acti	ivities			
Enter gross	amounts unless otherwise indicated	(a)	ated business income (b)	(c)	y section 512, 513, or 514 (d)	(e) Related or exempt function income
1 Program	service revenue	Business code	Amount	Exclusion code	Amount	(See instructions)
a						
ь						
с						
d						
			<u>. </u>			
J	and contracts from government agencies					
	ship dues and assessments					
	on savings and temporary cash investments .					
	ds and interest from securities					····
	al income or (loss) from real estate		<u> </u>			
	-financed property					· - · · · · · · · · · · · · · · · · · ·
	debt-financed property					
	Il income or (loss) from personal property.					,
	vestment income					· · · · · · · · · · · · · · · · · · ·
	loss) from sales of assets other than inventory	-				
	ome or (loss) from special events · · · rofit or (loss) from sales of inventory					
•	evenue a					
_						
е						
Part XVI- Line No ▼	B Relationship of Activitie Explain below how each activity accomplishment of the foundation	ty for whic	h income is reported	ın column (e) of Part XVI-A contrib	
•						
					·····	
						<u> </u>
		 .				
•		****				
						
·						
					 	
			-			
						
					· ·· · · · · · · · · · · · · · · · · ·	
					•	

Page 13

Part	XVII	Informati Exempt (ransfer	s To and	Transact	ion	s and	Rela	ation	ships	s W	ith Nor	nchar	itable	•
ır	sect	organization on 501(c) of t														Yes	No
a Transfers from the reporting foundation to a noncharitable exempt organization of.																	
1.1 4.1										X							
		ransactions.	• • • •			<i>.</i>		• •	• • • •				• • •		. 1a(2)	 	
		es of assets to	o a non	charitable e	xempt org	anization.									. 1b(1)		х
(2	2) Pur	chases of ass	ets fro	m a nonchai	ritable exe	empt organi	zation								. 1b(2)		Х
		ntal of facilities															X
(4) Reimbursement arrangements											X						
		formance of s															X
		of facilities,														<u>'</u>	Х
d If v: v:	the a alue o alue ii	answer to any of the goods, on any transact (b) Amount invo	of the other a tion or	e above is " ssets, or se sharing arra	Yes," cor ervices giv angement	nplete the en by the	following so reporting fo column (d) t	chec und he v	lule Cation.	olumi If the of the	found	should lation s, othe	alv rece er as	vays sho eived les	w the s than service	fair m	arket eived
(a) Line	110	N/A	lived	(c) Name (or nonchant	able exempt c	organization	+	I/A	ription	or transi	iers, trai	isacu	ions, and si	anng am	angeme	nts
	_	 		·				1	·						_		
			-					-									
	+	<u> </u>					·	-									<u>-</u>
	+							1			-						
	-								-		-						
															_		
												_					
	-+							-									
	+							+									
	-							-								.	
_	\neg												-				
d	escrit	foundation dir ed in section to complete the	501(c)	of the Code	(other tha						exemp	t orga	nıza	ations	Y	es X] No
		(a) Name of org	anization			(b) Type o	f organization				((c) Desc	riptio	on of relatio	nship		
									_								
					+				-					· · · · · ·			<u> </u>
							·										
 Sign	Under	penalties of perjury and complete Decl				based on all in	formation of which					to the bo	est of				
Here	Sign	nature of officer or	rustee	us'ui		Date	-2016	Title	>4R	ETA	oy		-	May the li with the (see instruction	preparer		
	<u></u>	Print/Type prepa	arer's nan	ne	Pre	parer's signati	ure			Date		7	<u>-</u>		PTIN		
Paid			KES,			D	Ž11. ~				/14/2	2016	Che self-	ck ıf employed	P001	8805	0
Prepa	arer	Firm's name		USA, LI	LP U		ay wa			1	,/-	Firm's		▶ 13-5			
Use C	Only	Firm's address		29 ALLEN		Y 20TH	FLOOR										
	_		НОТ	JSTON, 7					770	19-7	100	Phone	no	713-9	60-1	706	

Schedule B

(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service

Name of the organization

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

2015

Employer identification number

STEPHEN AND CAROL C	81-0776857							
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 priva	te foundation						
	501(c)(3) taxable private foundation							
Note. Only a section 501(c) instructions General Rule X For an organization	on filing Form 990, 990-EZ, or 990-PF that received, during the year	r, contributions totaling \$5,000						
or more (in mone contributor's tota	ey or property) from any one contributor. Complete Parts I and II. See I contributions	e instructions for determining a						
Special Rules								
regulations under 13, 16a, or 16b, a	on described in section 501(c)(3) filing Form 990 or 990-EZ that met resections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Fand that received from any one contributor, during the year, total cores of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ	Form 990 or 990-EZ), Part II, line ntributions of the greater of (1)						
contributor, durin	on described in section 501(c)(7), (8), or (10) filing Form 990 or 990 ig the year, total contributions of more than \$1,000 exclusively for relational purposes, or for the prevention of cruelty to children or animals	ligious, charitable, scientific,						
contributor, durin contributions tota during the year fo General Rule app	on described in section 501(c)(7), (8), or (10) filing Form 990 or 990 ig the year, contributions exclusively for religious, charitable, etc., pur illed more than \$1,000. If this box is checked, enter here the total corpor an exclusively religious, charitable, etc., purpose. Do not complete to this organization because it received nonexclusively religious, for more during the year	rposes, but no such ntributions that were received any of the parts unless the charitable, etc, contributions						
Caution. An organization th	nat is not covered by the General Rule and/or the Special Rules does	s 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)

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)

Employer identification number 81-0776857

Part I	Contributors (see instructions) Use duplicate copies of Part I if additional space is needed									
(a) No	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution							
1	STEPHEN M. AND CAROL ANN CASSIANI 8703 CRESCENT GATE LANE HOUSTON, TX 77024	\$\$.	Person Payroll Noncash (Complete Part II for noncash contributions)							
(a) No	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution							
2	STEPHEN M CASSIANI 2009 CLAT 1750 TYSONS BLVD, SUITE 1000 MCLEAN, VA 22102	\$\$	Person Payroll Noncash (Complete Part II for noncash contributions)							
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution							
3	CAROL ANN CASSIANI 2009 CLAT 1750 TYSONS BLVD, SUITE 1000 MCLEAN, VA 22102	\$ 148,121.	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							
		\$	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)							

Schedule B (Form 990, 990-EZ, or 990-PF) (2015)

Name of organization STEPHEN AND CAROL CASSIANI FAMILY FOUNDATION

Employer identification number

81-0776857

		1-1	
(a) No.	(b)	(c) FMV (or estimate)	(d)
from Part I	Description of noncash property given	(see instructions)	Date received
-art i		(see instructions)	
		\$	
a) No.	(b)	(c)	(d)
from	Description of noncash property given	FMV (or estimate)	Date received
Part I		(see instructions)	
		\$	
a) No.		(c)	
from	(b)	FMV (or estimate)	(d)
Part I	Description of noncash property given	(see instructions)	Date received
		\$	
		Ψ	
a) No.	(5)	(c)	(4)
from	(b) Description of noncash property given	FMV (or estimate)	(d) Date received
Part I		(see instructions)	
		\$	
/-> NI-		(2)	
(a) No. from	(b)	(c) FMV (or estimate)	(d)
Part I	Description of noncash property given	(see instructions)	Date received
		 _©	
		\$	
(a) No	/L\	(c)	(4)
from	(b) Description of noncash property given	FMV (or estimate)	(d) Date received
Part I	Description of noncasti property given	(see instructions)	Date received

Name of organization STEPHEN AND CAROL CASSIANI FAMILY FOUNDATION

Employer identification number

81-0776857

Part III		the year from any ons completing Par e year (Enter this in	one contributor t III, enter the tota formation once	. Complete columns (a) through (e) and all of exclusively religious, charitable, etc.,						
(a) No. from Part I	(b) Purpose of gift	(c) Use		(d) Description of how gift is held						
Parti										
				-						
	(e) Transfer of gift									
	Transferee's name, address, an	d ZIP + 4	Relat	cionship of transferor to transferee						
(a) No from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held						
										
	(e) Transfer of gift									
	Transferee's name, address, an		Relationship of transferor to transferee							
(a) No from Part I	(b) Purpose of gift	(c) Use of gıft		(d) Description of how gift is held						
	(e) Transfer of gift									
	Transferee's name, address, an	d ZiP + 4	Relationship of transferor to transferee							
	-									
(a) No from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held						
			-							
	(e) Transfer of gift									
	Transferee's name, address, an	d ZIP + 4	Relationship of transferor to transferee							
			1							

ATTACHMENT

,

FORM 990PF,

PART VII-A, LINE 10 - NEW SUBSTANTIAL CONTRIBUTORS

NAME AND ADDRESS

STEPHEN M CASSIANI 2009 CLAT 1750 TYSONS BLVD, SUITE 1000 MCLEAN, VA 22102

CAROL ANN CASSIANI 2009 CLAT 1750 TYSONS BLVD, SUITE 1000 MCLEAN, VA 22102

NAME AND ADDRESS

TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION

STEPHEN M. CASSIANI

8703 CRESCENT GATE LANE HOUSTON, TX 77024

SECRETARY/TREASURER 1.00

> CAROL A. CASSIANI 8703 CRESCENT GATE LANE HOUSTON, TX 77024

VICE PRESIDENT 1.00

> 3521 COLGATE AVENUE LISA C. MACARAEG

PRESIDENT

DALLAS, TX 75225

1.00

3521 COLGATE AVENUE DALLAS, TX 75225 E. BIEGEL MACARAEG

VICE PRESIDENT 1.00

> C/O GREENBERG TRAURIG, LLP 1750 TYSONS BLVD, SUITE 1000 MCLEAN, VA 22102 JONATHAN M. FORSTER

VICE PRESIDENT 1.00 ATTACHMENT 2

ATTACHMENT 3

FORM 990PF, PART XV - INFORMATION REGARDING FOUNDATION MANAGERS

STEPHEN M. CASSIANI CAROL A. CASSIANI