

Form **990-PF**Department of the Treasury
Internal Revenue Service**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.

OMB No. 1545-0052

2015

Open to Public Inspection

For calendar year 2015 or tax year beginning**, 2015, and ending****, 20**

Name of foundation FRED C. & MARY R. KOCH FOUNDATION, INC.		A Employer identification number 48-6113560
Number and street (or P.O. box number if mail is not delivered to street address)	Room/suite	B Telephone number (see instructions) (316) 828-3928
P.O. BOX 2256		
City or town, state or province, country, and ZIP or foreign postal code WICHITA, KS 67201-2256		C If exemption application is pending, check here. <input type="checkbox"/>
G Check all that apply:		D 1. Foreign organizations, check here. . . <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>
<input type="checkbox"/> Initial return	<input type="checkbox"/> Initial return of a former public charity	E If private foundation status was terminated under section 507(b)(1)(A), check here. . <input type="checkbox"/>
<input type="checkbox"/> Final return	<input type="checkbox"/> Amended return	F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here. . <input type="checkbox"/>
<input type="checkbox"/> Address change	<input type="checkbox"/> Name change	
H Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) ▶ \$ 28,702,267.		
J Accounting method: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ (Part I, column (d) must be on cash basis.)		

	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions).)				
Revenue				
1 Contributions, gifts, grants, etc., received (attach schedule)	434,000.			
2 Check <input type="checkbox"/> if the foundation is not required to attach Sch. B.				
3 Interest on savings and temporary cash investments.	185.	185.		
4 Dividends and interest from securities	460,084.	460,084.		
5a Gross rents				
b Net rental income or (loss)				
6a Net gain or (loss) from sale of assets not on line 10	-573,498.			
b Gross sales price for all assets on line 6a				
7 Capital gain net income (from Part IV, line 2)		0.		
8 Net short-term capital gain.				
9 Income modifications				
10a Gross sales less returns and allowances				
b Less: Cost of goods sold				
c Gross profit or (loss) (attach schedule)				
11 Other income (attach schedule) ATCH. 1	168,501.	48,553.		
12 Total. Add lines 1 through 11	489,272.	508,822.		
Operating and Administrative Expenses				
13 Compensation of officers, directors, trustees, etc.	0.			
14 Other employee salaries and wages				
15 Pension plans, employee benefits				
16a Legal fees (attach schedule)				
b Accounting fees (attach schedule) ATCH. 2	3,247.			
c Other professional fees (attach schedule) [3]	89,462.	87,662.		1,800.
17 Interest. ATCH. 4.	30,767.	30,767.		
18 Taxes (attach schedule) (see instructions) [5].	4,700.	1,802.		
19 Depreciation (attach schedule) and depletion				
20 Occupancy				
21 Travel, conferences, and meetings				
22 Printing and publications				
23 Other expenses (attach schedule) ATCH. 6	156,370.	90,861.		514.
24 Total operating and administrative expenses. Add lines 13 through 23.	284,546.	211,092.		2,314.
25 Contributions, gifts, grants paid	3,884,900.			3,884,900.
26 Total expenses and disbursements. Add lines 24 and 25	4,169,446.	211,092.	0.	3,887,214.
27 Subtract line 26 from line 12:				
a Excess of revenue over expenses and disbursements	-3,680,174.			
b Net investment income (if negative, enter -0-)		297,730.		
c Adjusted net income (if negative, enter -0-)				

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only. (See instructions.)		Beginning of year	End of year	
				(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1	Cash - non-interest-bearing				
	2	Savings and temporary cash investments	977,825.	1,385,193.	1,385,203.	
	3	Accounts receivable ▶				
		Less: allowance for doubtful accounts ▶				
	4	Pledges receivable ▶				
		Less: allowance for doubtful accounts ▶				
	5	Grants receivable				
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)				
	7	Other notes and loans receivable (attach schedule) ▶				
		Less: allowance for doubtful accounts ▶				
	8	Inventories for sale or use				
	9	Prepaid expenses and deferred charges	6,361.	18,463.	18,463.	
	10a	Investments - U.S. and state government obligations (attach schedule)				
	b	Investments - corporate stock (attach schedule) ATCH. 7	3,718,851.	3,718,851.	3,744,445.	
	c	Investments - corporate bonds (attach schedule)				
	11	Investments - land, buildings, and equipment: basis ▶				
	Less: accumulated depreciation (attach schedule) ▶					
12	Investments - mortgage loans					
13	Investments - other (attach schedule) ATCH. 8	25,730,129.	21,546,231.	23,554,156.		
14	Land, buildings, and equipment: basis ▶					
	Less: accumulated depreciation (attach schedule) ▶					
15	Other assets (describe ▶)					
16	Total assets (to be completed by all filers - see the instructions. Also, see page 1, item I)	30,433,166.	26,668,738.	28,702,267.		
Liabilities	17	Accounts payable and accrued expenses	6,500.	4,746.		
	18	Grants payable	132,500.	50,000.		
	19	Deferred revenue				
	20	Loans from officers, directors, trustees, and other disqualified persons				
	21	Mortgages and other notes payable (attach schedule)				
	22	Other liabilities (describe ▶)				
	23	Total liabilities (add lines 17 through 22)	139,000.	54,746.		
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 24 through 26 and lines 30 and 31.					
	24	Unrestricted	30,294,166.	26,613,992.		
	25	Temporarily restricted				
	26	Permanently restricted				
	Foundations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 27 through 31.					
	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				
	30	Total net assets or fund balances (see instructions)	30,294,166.	26,613,992.		
	31	Total liabilities and net assets/fund balances (see instructions)	30,433,166.	26,668,738.		

Part III Analysis of Changes in Net Assets or Fund Balances

1	Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	30,294,166.
2	Enter amount from Part I, line 27a	2	-3,680,174.
3	Other increases not included in line 2 (itemize) ▶	3	
4	Add lines 1, 2, and 3	4	26,613,992.
5	Decreases not included in line 2 (itemize) ▶	5	
6	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	26,613,992.

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Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)			(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a SEE PART IV SCHEDULE					
b					
c					
d					
e					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)		
a					
b					
c					
d					
e					
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69					
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))		
a					
b					
c					
d					
e					
2 Capital gain net income or (net capital loss) $\left\{ \begin{array}{l} \text{If gain, also enter in Part I, line 7} \\ \text{If (loss), enter -0- in Part I, line 7} \end{array} \right\}$			2	-573,498.	
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c) (see instructions). If (loss), enter -0- in Part I, line 8			3	0.	

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

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

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

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? ☐ Yes ☒ No

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

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

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col. (b) divided by col. (c))
2014	1,248,740.	31,572,470.	0.039552
2013	1,669,981.	31,378,696.	0.053220
2012	1,988,971.	30,537,459.	0.065132
2011	2,046,698.	31,454,310.	0.065069
2010	1,954,001.	31,460,360.	0.062110
2 Total of line 1, column (d)			2 0.285083
3 Average distribution ratio for the 5-year base period - divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years			3 0.057017
4 Enter the net value of noncharitable-use assets for 2015 from Part X, line 5			4 31,070,981.
5 Multiply line 4 by line 3			5 1,771,574.
6 Enter 1% of net investment income (1% of Part I, line 27b)			6 2,977.
7 Add lines 5 and 6			7 1,774,551.
8 Enter qualifying distributions from Part XII, line 4 If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions.			8 3,887,214.

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

1a Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1. . . . Date of ruling or determination letter: _____ (attach copy of letter if necessary - see instructions)	1	2,977.
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input checked="" type="checkbox"/> and enter 1% of Part I, line 27b.		
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).		
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) . . .	2	
3 Add lines 1 and 2.	3	2,977.
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-	5	2,977.
6 Credits/Payments:		
a 2015 estimated tax payments and 2014 overpayment credited to 2015.	6a	21,361.
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	79.
7 Total credits and payments. Add lines 6a through 6d.	7	21,440.
8 Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached.	8	
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9	
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	18,463.
11 Enter the amount of line 10 to be: Credited to 2016 estimated tax <input checked="" type="checkbox"/> 18,463. Refunded <input type="checkbox"/> 11	11	

Part VII-A Statements Regarding Activities

	Yes	No
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?		X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the definition)? If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.		X
c Did the foundation file Form 1120-POL for this year?		X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. <input checked="" type="checkbox"/> \$ 0. (2) On foundation managers. <input checked="" type="checkbox"/> \$ 0.		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. <input checked="" type="checkbox"/> \$ 0.		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities.		X
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes.		X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		X
b If "Yes," has it filed a tax return on Form 990-T for this year?		
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T.		X
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	X	
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	X	
8a Enter the states to which the foundation reports or with which it is registered (see instructions) <input checked="" type="checkbox"/> KS, _____		
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation.	X	
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes," complete Part XIV.		X
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses.		X

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Part VII-A Statements Regarding Activities (continued)

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions).	11	Yes	No
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions).	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address <u>WWW.FMKFOUNDATION.ORG</u>	13	X	
14	The books are in care of <u>PAM EVERS</u> Telephone no. <u>316-828-3928</u> Located at <u>P.O. BOX 2256 WICHITA, KS</u> ZIP+4 <u>67201</u>			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the year. <u>15</u>			
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country <u></u>	16	Yes	No
				X

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

	Yes	No
1a During the year did the foundation (either directly or indirectly):		
(1) Engage in the sale or exchange, or leasing of property with a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(6) Agree to pay money or property to a government official? (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.) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b 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)? <input type="checkbox"/> Organizations relying on a current notice regarding disaster assistance check here <input type="checkbox"/>	1b	X
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? <input type="checkbox"/>	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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," list the years <u></u>		
b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement - see instructions.) <input type="checkbox"/>	2b	
c 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>		
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b If "Yes," did it have excess business holdings in 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 foundation had excess business holdings in 2015.) <input type="checkbox"/>	3b	
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	X
b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2015? <input type="checkbox"/>	4b	X

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Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)**5a** During the year did the foundation pay or incur any amount to:

- (1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? ☐ Yes ☒ No
- (2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive? ☐ Yes ☒ No
- (3) Provide a grant to an individual for travel, study, or other similar purposes? ☒ Yes ☐ No
- (4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? (see instructions). ☒ Yes ☐ No
- (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? ☐ Yes ☒ No

b If any answer is "Yes" to 5a(1)-(5), did **any** of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)?**5b**

X

Organizations relying on a current notice regarding disaster assistance check here

☐**c** If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the taxbecause it maintained expenditure responsibility for the grant? ATCH 9 ☒ Yes ☐ No

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

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

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

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
ATCH 10		0.	0.	0.

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

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

Total number of other employees paid over \$50,000.Form **990-PF** (2015)

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

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
ATCH 11		87,488.
Total number of others receiving over \$50,000 for professional services ►		

Part IX-A Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1 SCHOLARSHIP AWARDS: 217 INDIVIDUALS ENROLLED IN A COLLEGE OR UNIVERSITY IN THE U.S. OR CANADA WERE AWARDED SCHOLARSHIPS. EACH FULL TIME STUDENT IS WORKING TOWARD AN UNDERGRAD DEGREE	434,000.
2	
3	
4	

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

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

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

1	Fair 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	30,333,149.
b	Average of monthly cash balances	1b	1,210,994.
c	Fair market value of all other assets (see instructions).	1c	
d	Total (add lines 1a, b, and c)	1d	31,544,143.
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	1e	
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	31,544,143.
4	Cash deemed held for charitable activities. Enter 1 1/2 % of line 3 (for greater amount, see instructions)	4	473,162.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	31,070,981.
6	Minimum investment return. Enter 5% of line 5	6	1,553,549.

Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☐ and do not complete this part.)

1	Minimum investment return from Part X, line 6	1	1,553,549.
2a	Tax on investment income for 2015 from Part VI, line 5	2a	2,977.
b	Income tax for 2015. (This does not include the tax from Part VI.)	2b	
c	Add lines 2a and 2b	2c	2,977.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	1,550,572.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	1,550,572.
6	Deduction from distributable amount (see instructions).	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	1,550,572.

Part XII Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26	1a	3,887,214.
b	Program-related investments - total from Part IX-B	1b	
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:		
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	3,887,214.
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 (see instructions)	5	2,977.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	3,884,237.

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

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
1 Distributable amount for 2015 from Part XI, line 7				1,550,572.
2 Undistributed income, if any, as of the end of 2015:				
a 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:				
a From 2010				
b From 2011				
c From 2012 105,939.				
d From 2013 116,756.				
e From 2014				
f Total of lines 3a through e	222,695.			
4 Qualifying distributions for 2015 from Part XII, line 4: ► \$ <u>3,887,214.</u>				
a Applied to 2014, but not more than line 2a				
b Applied to undistributed income of prior years (Election required - see instructions).				
c Treated as distributions out of corpus (Election required - see instructions)				
d Applied to 2015 distributable amount.				1,550,572.
e Remaining amount distributed out of corpus.	2,336,642.			
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:				
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	2,559,337.			
b Prior years' undistributed income. Subtract line 4b from line 2b.				
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				
d Subtract line 6c from line 6b. Taxable amount - see instructions.				
e 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 distributed in 2016.				
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)				
9 Excess distributions carryover to 2016. Subtract lines 7 and 8 from line 6a	2,559,337.			
10 Analysis of line 9:				
a Excess from 2011				
b Excess from 2012 105,939.				
c Excess from 2013 116,756.				
d Excess from 2014				
e Excess from 2015 2,336,642.				

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

NOT APPLICABLE

1 a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2015, enter the date of the ruling

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

	Tax year	Prior 3 years			(e) Total
	(a) 2015	(b) 2014	(c) 2013	(d) 2012	
2 a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed					
b 85% of line 2a					
c Qualifying distributions from Part XII, line 4 for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
e 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)					
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 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 support from an exempt organization					
(4) Gross investment income					

Part XV Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year - see instructions.)**1 Information Regarding Foundation Managers:**

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

NONE

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

NONE

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

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

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

ATCH 12

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

NONE

c Any submission deadlines:

NONE

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

ATCH 13

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a Paid during the year				
ATCH 14				
Total			3a	3,884,900.
b Approved for future payment				
Total			3b	

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.

Enter gross amounts unless otherwise indicated.		Unrelated business income		Excluded by section 512, 513, or 514		(e)
		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions.)
1 Program service revenue:						
a _____						
b _____						
c _____						
d _____						
e _____						
f _____						
g Fees and contracts from government agencies						
2 Membership dues and assessments						
3 Interest on savings and temporary cash investments .				14	185.	
4 Dividends and interest from securities				14	460,084.	
5 Net rental income or (loss) from real estate:						
a Debt-financed property						
b Not debt-financed property						
6 Net rental income or (loss) from personal property. .						
7 Other investment income						
8 Gain or (loss) from sales of assets other than inventory				18	-573,498.	
9 Net income or (loss) from special events						
10 Gross profit or (loss) from sales of inventory. . .						
11 Other revenue: a _____						
b ATCH 15			-64,086.		232,587.	
c _____						
d _____						
e _____						
12 Subtotal. Add columns (b), (d), and (e)			-64,086.		119,358.	
13 Total. Add line 12, columns (b), (d), and (e)						55,272.

(See worksheet in line 13 instructions to verify calculations.)

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

[illegible]

Part XVII

Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

- | 1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? | | Yes | No |
|---|-------|-----|----|
| a Transfers from the reporting foundation to a noncharitable exempt organization of: | | | |
| (1) Cash | 1a(1) | | X |
| (2) Other assets | 1a(2) | | X |
| b Other transactions: | | | |
| (1) Sales of assets to a noncharitable exempt organization | 1b(1) | | X |
| (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 guarantees | 1b(5) | | X |
| (6) Performance of services or membership or fundraising solicitations | 1b(6) | | X |
| c Sharing of facilities, equipment, mailing lists, other assets, or paid employees | 1c | | X |
| 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. | | | |

[illegible]

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

[illegible]

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

Signature of officer or trustee	Date	Title
Gam Evers	11/11/2016	Treasurer

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

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

**Paid
Preparer
Use Only**

Print/Type preparer's name

STEVEN L WEBB

Preparer's signature

Date _____

Check <input type="checkbox"/> If self-employed	PTIN P00
---	-------------

P00235405

Firm's name ► BKD, LLP

Firm's address ► 1551 N WATERFRONT PKWY, STE 300
WICHITA, KS

67206-6601

Phone no. 316-265-2811

Form **990-PF** (2015)

• If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** and check this box. ☒ **X**

Note. Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868.

• If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** (on page 1).

Part II Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed).

Type or print File by the due date for filing your return. See instructions.	Enter filer's identifying number, see instructions	
	Name of exempt organization or other filer, see instructions.	Employer identification number (EIN) or
	FRED C. & MARY R. KOCH FOUNDATION, INC.	48-6113560
	Number, street, and room or suite no. If a P.O. box, see instructions.	Social security number (SSN)
	P.O. BOX 2256	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions.	
	WICHITA, KS 67201-2256	

Enter the Return code for the return that this application is for (file a separate application for each return) **0 4**

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01		
Form 990-BL	02	Form 1041-A	08
Form 4720 (individual)	03	Form 4720 (other than individual)	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.

• The books are in the care of ► DUSTIN PERRY, 4111 E. 37TH ST. N. WICHITA, KS 67220-3298
Telephone No. ► 316 828-4994 Fax No. ► _____

• If the organization does not have an office or place of business in the United States, check this box ☐

• If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____. If this is for the whole group, check this box ☐. If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension is for.

4 I request an additional 3-month extension of time until 11/15, 20 16.

5 For calendar year 2015, or other tax year beginning _____, 20____, and ending _____, 20____.

6 If the tax year entered in line 5 is for less than 12 months, check reason: ☐ Initial return ☐ Final return
☐ Change in accounting period

7 State in detail why you need the extension ADDITIONAL TIME IS REQUIRED TO ACCUMULATE THE INFORMATION NECESSARY TO FILE A COMPLETE AND ACCURATE RETURN.

8a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	8a \$	27,361.
b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868.	8b \$	27,361.
c Balance Due. Subtract line 8b from line 8a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	8c \$	0.

Signature and Verification must be completed for Part II only.

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form.

Signature ►

Title ►

Date ►

Form **8868** (Rev. 1-2014)

FORM 990-PF - PART IV
CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

Kind of Property		Description				P or D	Date acquired	Date sold
Gross sale price less expenses of sale	Depreciation allowed/ allowable	Cost or other basis	FMV as of 12/31/69	Adj. basis as of 12/31/69	Excess of FMV over adj basis		Gain or (loss)	
		EFPRP INVESTMENTS - PASS-THRU ENTITY 562,862.				P	VAR -573,498.	VAR
TOTAL GAIN (LOSS)							<u>-573,498.</u>	

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

OMB No. 1545-0047

2015▶ **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.**Name of the organization**

FRED C. & MARY R. KOCH FOUNDATION, INC.

Employer identification number

48-6113560

Organization type (check one):**Filers of:****Section:**

Form 990 or 990-EZ

☐ 501(c)() (enter number) organization☐ 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation☐ 527 political organization

Form 990-PF

☒ 501(c)(3) exempt private foundation☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation☐ 501(c)(3) taxable private foundationCheck if your organization is covered by the **General Rule** or a **Special Rule**.**Note.** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.**General Rule**

- ☒ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, 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, line 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).

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 FRED C. & MARY R. KOCH FOUNDATION, INC.**Employer identification number**
48-6113560**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	KOCH INDUSTRIES, INC. P.O. BOX 2256 WICHITA, KS 67201-2256	\$ 434,000.	Person <input checked="checked" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization **FRED C. & MARY R. KOCH FOUNDATION, INC.**

Employer identification number

48-6113560

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
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	

Name of organization **FRED C. & MARY R. KOCH FOUNDATION, INC.**Employer identification number
48-6113560

Part III **Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor.** Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc., contributions of **\$1,000 or less** for the year. (Enter this information once. See instructions.) ► \$ _____

Use duplicate copies of Part III if additional space is needed.

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

FORM 990PF, PART I - OTHER INCOME

<u>DESCRIPTION</u>	<u>REVENUE AND EXPENSES PER BOOKS</u>	<u>NET INVESTMENT INCOME</u>
EFPRP INVESTMENTS - OTHER INCOME	232,586.	48,553.
EFPRP INVESTMENTS - TAX EXEMPT INCOME	1.	
EFPRP INVESTMENTS - UNRELATED INCOME	-64,086.	
TOTALS	<u>168,501.</u>	<u>48,553.</u>

FORM 990PF, PART I - ACCOUNTING FEES

<u>DESCRIPTION</u>	<u>REVENUE AND EXPENSES PER BOOKS</u>	<u>NET INVESTMENT INCOME</u>	<u>ADJUSTED NET INCOME</u>	<u>CHARITABLE PURPOSES</u>
ACCOUNTING FEES	3,247.			
TOTALS	<u>3,247.</u>			

FORM 990PF, PART I - OTHER PROFESSIONAL FEES

<u>DESCRIPTION</u>	<u>REVENUE AND EXPENSES PER BOOKS</u>	<u>NET INVESTMENT INCOME</u>	<u>CHARITABLE PURPOSES</u>
INVESTMENT FEES	87,662.	87,662.	
PROFESSIONAL FEES	1,800.		1,800.
TOTALS	<u>89,462.</u>	<u>87,662.</u>	<u>1,800.</u>

FORM 990PF, PART I - INTEREST EXPENSE

<u>DESCRIPTION</u>	<u>REVENUE AND EXPENSES PER BOOKS</u>	<u>NET INVESTMENT INCOME</u>
EFPRP INV - INV INT EXPENSE	30,767.	30,767.
TOTALS	<u>30,767.</u>	<u>30,767.</u>

FORM 990PF, PART I - TAXES

<u>DESCRIPTION</u>	<u>REVENUE AND EXPENSES PER BOOKS</u>	<u>NET INVESTMENT INCOME</u>
EXCISE TAX	2,898.	
EFPRP INV - FOREIGN TAXES	1,802.	1,802.
TOTALS	<u>4,700.</u>	<u>1,802.</u>

FORM 990PF, PART I - OTHER EXPENSES

<u>DESCRIPTION</u>	<u>REVENUE AND EXPENSES PER BOOKS</u>	<u>NET INVESTMENT INCOME</u>	<u>CHARITABLE PURPOSES</u>
CORPORATE FILING FEES	89.		89.
INSURANCE	425.		425.
EFPRP - NON-INV EXPENSE	64,995.		
EFPRP INVESTMENT EXPENSES	90,861.	90,861.	
TOTALS	<u>156,370.</u>	<u>90,861.</u>	<u>514.</u>

FORM 990PF, PART II - CORPORATE STOCK

<u>DESCRIPTION</u>	<u>BEGINNING BOOK VALUE</u>	<u>ENDING BOOK VALUE</u>	<u>ENDING FMV</u>
KOCH INDUSTRIES, INC. PREFERRED STOCK	3,718,851.	3,718,851.	3,744,445.
TOTALS	<u>3,718,851.</u>	<u>3,718,851.</u>	<u>3,744,445.</u>

FORM 990PF, PART II - OTHER INVESTMENTS

<u>DESCRIPTION</u>	<u>BEGINNING BOOK VALUE</u>	<u>ENDING BOOK VALUE</u>	<u>ENDING FMV</u>
GLEACHER DIVERSIFIED FUND	36,660.	23,409.	33,020.
EFPRP	25,693,469.	21,522,822.	23,521,136.
TOTALS	<u>25,730,129.</u>	<u>21,546,231.</u>	<u>23,554,156.</u>

FORM 990PF, PART VII-B, LINE 5C-EXPENDITURE RESPONSIBILITY STATEMENT

GRANTEE'S NAME: KOCH CULTURAL TRUST
GRANTEE'S ADDRESS: 255 N. ROOSEVELT
CITY, STATE & ZIP: WICHITA, KS 67208
GRANT DATE: 02/03/2014
GRANT AMOUNT: 139,000.
GRANT PURPOSE: SUPPORT KCT GRANT PROGRAM FOR THE YEAR 2014
AMOUNT EXPENDED: 17,124.
ANY DIVERSION? NO
DATES OF REPORTS:
VERIFICATION DATE:
RESULTS OF VERIFICATION:
THE GRANTOR HAS NO REASON TO DOUBT THE ACCURACY OR RELIABILITY OF THE
REPORT FROM THE GRANTEE; THEREFORE, NO INDEPENDENT VERIFICATION OF
THE REPORTS WERE MADE.

GRANTEE'S NAME: KOCH CULTURAL TRUST
GRANTEE'S ADDRESS: 255 N. ROOSEVELT
CITY, STATE & ZIP: WICHITA, KS 67208
GRANT DATE: 01/16/2015
GRANT AMOUNT: 145,000.
GRANT PURPOSE: SUPPORT KCT GRANT PROGRAM FOR THE YEAR 2015
AMOUNT EXPENDED: 115,116.
ANY DIVERSION? NO
DATES OF REPORTS:
VERIFICATION DATE:
RESULTS OF VERIFICATION:
THE GRANTOR HAS NO REASON TO DOUBT THE ACCURACY OR RELIABILITY OF THE
REPORT FROM THE GRANTEE; THEREFORE, NO INDEPENDENT VERIFICATION OF
THE REPORTS WERE MADE.

GRANTEE'S NAME: ALLEN HOUSE FOUNDATION
GRANTEE'S ADDRESS: 255 N. ROOSEVELT
CITY, STATE & ZIP: WICHITA, KS 67208
GRANT DATE: 02/03/2014
GRANT AMOUNT: 98,000.
GRANT PURPOSE: SUPPORT THE 2014 ALF OPERATING AND RENOVATION EXPENSES.
AMOUNT EXPENDED: 40,059.
ANY DIVERSION? NO
DATES OF REPORTS:
VERIFICATION DATE:
RESULTS OF VERIFICATION:
THE GRANTOR HAS NO REASON TO DOUBT THE ACCURACY OR RELIABILITY OF THE
REPORT FROM THE GRANTEE; THEREFORE, NO INDEPENDENT VERIFICATION OF
THE REPORTS WERE MADE.

GRANTEE'S NAME: ALLEN HOUSE FOUNDATION
GRANTEE'S ADDRESS: 255 N. ROOSEVELT
CITY, STATE & ZIP: WICHITA, KS 67208
GRANT DATE: 01/06/2015
GRANT AMOUNT: 375,500.

CONT'D ON NEXT PAGE

FORM 990PF, PART VII-B, LINE 5C-EXPENDITURE RESPONSIBILITY STATEMENT

GRANT PURPOSE: SUPPORT THE 2015 ALF OPERATING AND RENOVATION EXPENSES.
AMOUNT EXPENDED: 127,041.
ANY DIVERSION? NO
DATES OF REPORTS:
VERIFICATION DATE:
RESULTS OF VERIFICATION:
THE GRANTOR HAS NO REASON TO DOUBT THE ACCURACY OR RELIABILITY OF THE
REPORT FROM THE GRANTEE; THEREFORE, NO INDEPENDENT VERIFICATION OF
THE REPORTS WERE MADE.

<u>NAME AND ADDRESS</u>	<u>TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION</u>	<u>COMPENSATION</u>	<u>CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS</u>	<u>EXPENSE ACCT AND OTHER ALLOWANCES</u>
ELIZABETH B KOCH PO BOX 2256 WICHITA, KS 67201	PRESIDENT/DIRECTOR 1.00	0.	0.	0.
DUSTIN PERRY PO BOX 2256 WICHITA, KS 67201	TREASURER 1.00	0.	0.	0.
PHILIP ELLENDER PO BOX 2256 WICHITA, KS 67201	VICE PRESIDENT 1.00	0.	0.	0.
CHARLES G KOCH PO BOX 2256 WICHITA, KS 67201	DIRECTOR .25	0.	0.	0.
DAVID H KOCH PO BOX 2256 WICHITA, KS 67201	DIRECTOR .25	0.	0.	0.
RICHARD FINK PO BOX 2256 WICHITA, KS 67201	DIRECTOR .25	0.	0.	0.

<u>NAME AND ADDRESS</u>	<u>TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION</u>	<u>COMPENSATION</u>	<u>CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS</u>	<u>EXPENSE ACCT AND OTHER ALLOWANCES</u>
MEREDITH OLSON PO BOX 2256 WICHITA, KS 67201	SECRETARY/GRANTS ADMINISTRATOR 5.00	0.	0.	0.
	GRAND TOTALS	<u>0.</u>	<u>0.</u>	<u>0.</u>

990PF, PART VIII- COMPENSATION OF THE FIVE HIGHEST PAID PROFESSIONALS

ATTACHMENT 11

<u>NAME AND ADDRESS</u>	<u>TYPE OF SERVICE</u>	<u>COMPENSATION</u>
1888 MANAGEMENT, LLC P.O. BOX 5004 WICHITA, KS 67201	INVESTMENT SERVICES	87,488.
	TOTAL COMPENSATION	<u>87,488.</u>

FORM 990PF, PART XV - NAME, ADDRESS AND PHONE FOR APPLICATIONS

FRED & MARY KOCH FDN, GRANT ADM
P.O. BOX 2256
WICHITA, KS 67201
316-828-6083

990PF, PART XV - RESTRICTIONS OR LIMITATIONS ON AWARDS

NEW SCHOLARSHIPS LIMITED TO DEPENDENTS OF FULL-TIME EMPLOYEES OF KOCH INDUSTRIES, INC. AND ITS SUBSIDIARIES. GRANTS GENERALLY LIMITED TO TAX-EXEMPT PUBLIC CHARITIES IN KANSAS.

RECIPIENT NAME AND ADDRESS	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
ALLEN LAMBE HOUSE FOUNDATION 255 N. ROOSEVELT WICHITA, KS 67208	NONE PF	GENERAL SUPPORT	375,500.
BENEDICTINE COLLEGE 1020 N. 2ND ST. ATCHISON, KS 66002	NONE PC	EDUCATION SUPPORT	14,000.
BILL OF RIGHTS INSTITUTE 200 N. GLEBE RD. #200 ARLINGTON, VA 22203	NONE PC	GENERAL SUPPORT	246,500.
COMMUNITIES IN SCHOOLS 412 S. MAIN ST. WICHITA, KS 67202	NONE PC	GENERAL SUPPORT	24,000.
ELLIS FOUNDATION PO BOX 54 FORT SCOTT, KS 66701	NONE PC	EDUCATION SUPPORT	24,000.
FRIENDS UNIVERSITY 2100 W. UNIVERSITY ST. WICHITA, KS 67213-3397	NONE PC	EDUCATION SUPPORT	39,000.

<u>RECIPIENT NAME AND ADDRESS</u>	<u>RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT</u>	<u>PURPOSE OF GRANT OR CONTRIBUTION</u>	<u>AMOUNT</u>
GREATER WICHITA YMCA 340 S. BROADWAY #200 WICHITA, KS 67202	NONE PC	GENERAL SUPPORT	25,500.
GRIOTS STORYTELLING INSTITUTE PO BOX 20653 WICHITA, KS 67208	NONE PC	GENERAL SUPPORT	10,000.
KANSAS COUNCIL ON ECONOMIC EDUCATION 1845 FAIRMOUNT WICHITA, KS 67260-0203	NONE PC	GENERAL SUPPORT	15,000.
KANSAS STATE UNIVERSITY FOUNDATION 2323 ANDERSON AVE. #500 MANHATTAN, KS 66502-2911	NONE PC	EDUCATION SUPPORT	18,500.
KOCH CULTURAL TRUST 255 N. ROOSEVELT WICHITA, KS 67208	NONE PF	GENERAL SUPPORT	145,000.
MUSIC THEATRE OF WICHITA 225 W. DOUGLAS WICHITA, KS 67202	NONE PC	GENERAL SUPPORT	23,000.

<u>RECIPIENT NAME AND ADDRESS</u>	<u>RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT</u>	<u>PURPOSE OF GRANT OR CONTRIBUTION</u>	<u>AMOUNT</u>
NEWMAN UNIVERSITY 3100 MCCORMICK AVE. WICHITA, KS 67213-2097	NONE PC	EDUCATION SUPPORT	34,000.
PITTSBURG STATE UNIVERSITY FOUNDATION 1701 S. BROADWAY ST. PITTSBURG, KS 66762	NONE PC	EDUCATION SUPPORT	10,600.
SYMPHONY IN THE FLINT HILLS PO BOX 441 COTTONWOOD FALLS, KS 66845	NONE PC	GENERAL SUPPORT	20,000.
THE SALVATION ARMY 350 N. MARKET WICHITA, KS 67202	NONE PC	GENERAL SUPPORT	5,000.
WICHITA CENTER FOR THE ARTS 9112 E. CENTRAL WICHITA, KS 67206	NONE PC	GENERAL SUPPORT	2,064,800.
WICHITA FESTIVALS, INC. 444 E. WILLIAM ST. WICHITA, KS 67202	NONE PC	GENERAL SUPPORT	2,500.

<u>RECIPIENT NAME AND ADDRESS</u>	<u>RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT</u>	<u>PURPOSE OF GRANT OR CONTRIBUTION</u>	<u>AMOUNT</u>
WICHITA STATE UNIVERSITY 1845 FAIRMOUNT WICHITA, KS 67260-0072	NONE PC	EDUCATION SUPPORT	14,000.
WICHITA SYMPHONY 225 W. DOUGLAS WICHITA, KS 67202	NONE PC	GENERAL SUPPORT	40,000.
YOUTH ENTREPRENEURS OF KANSAS 4111 E. 37TH ST N. WICHITA, KS 67220	NONE PC	GENERAL SUPPORT	300,000.
ABIGAIL RENNER 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
ABIGAIL WILSON 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
ADAM RONNEBAUM 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.

<u>RECIPIENT NAME AND ADDRESS</u>	<u>RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT</u>	<u>PURPOSE OF GRANT OR CONTRIBUTION</u>	<u>AMOUNT</u>
ADRIANNTE ETHERIDGE 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
ALEX BRECHBILL 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
ALEXA TURGEON 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
ALICIA COTSORADIS 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
ALLISON MCKINLEY 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
ALYSSA COLE 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.

<u>RECIPIENT NAME AND ADDRESS</u>	<u>RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT</u>	<u>PURPOSE OF GRANT OR CONTRIBUTION</u>	<u>AMOUNT</u>
AMANDA HINNEN 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
AMANDA LUKHARD 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
AMANDA MCKINLEY 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
AMANDA PASS 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
AMBER CARRILLO 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
AMBER JURGENSEN 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.

<u>RECIPIENT NAME AND ADDRESS</u>	<u>RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT</u>	<u>PURPOSE OF GRANT OR CONTRIBUTION</u>	<u>AMOUNT</u>
AMY COOKE 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
ANDIE CUNNINGHAM 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
ANDREW COLE 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
ANDREW MARINO 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
ANDREW MONROE 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
ANDREW TROTTER 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.

<u>RECIPIENT NAME AND ADDRESS</u>	<u>RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT</u>	<u>PURPOSE OF GRANT OR CONTRIBUTION</u>	<u>AMOUNT</u>
ANTHONY LONGORIA 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
ARIANE KUBENA 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
ASHLEY KOLAR 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
AUBREY SMADING 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
AUSTIN ROWLETT 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
BENJAMIN BLIZZARD 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.

<u>RECIPIENT NAME AND ADDRESS</u>	<u>RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT</u>	<u>PURPOSE OF GRANT OR CONTRIBUTION</u>	<u>AMOUNT</u>
BENJAMIN SEILER 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
BENJAMIN WHITE 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
BRANDI BELL 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
BRANDON ALEX 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
BRANDON MCINTOSH 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
BRENDAN MOUSLEY 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.

<u>RECIPIENT NAME AND ADDRESS</u>	<u>RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT</u>	<u>PURPOSE OF GRANT OR CONTRIBUTION</u>	<u>AMOUNT</u>
BRENNA WESTEMEIR 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
BRIDGET RUSH 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
BRITTANY MCEACHERN 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
BROGAN BECKER 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
CALLISTA SENIOR 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
CAMERON JONES 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.

<u>RECIPIENT NAME AND ADDRESS</u>	<u>RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT</u>	<u>PURPOSE OF GRANT OR CONTRIBUTION</u>	<u>AMOUNT</u>
CAROLINE GO 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
CAROLINE MENKES 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
CARTER FRANZ 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
CASEY KOLBECK 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
CATHLEEN EVANS 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
CHARLES HARDEMAN 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.

<u>RECIPIENT NAME AND ADDRESS</u>	<u>RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT</u>	<u>PURPOSE OF GRANT OR CONTRIBUTION</u>	<u>AMOUNT</u>
CHARLES HOLLOWAY 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
CHRISTINA MEYER 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
CHRISTOPHER GIBSON 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
CHRISTOPHER MASON 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
COOPER NICHOLS 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
COURTNEY BAUKAL 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.

<u>RECIPIENT NAME AND ADDRESS</u>	<u>RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT</u>	<u>PURPOSE OF GRANT OR CONTRIBUTION</u>	<u>AMOUNT</u>
DANA VINYARD 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
DANIEL EGGERT 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
DANIEL MORAN 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
DANIELLE MARINO 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
DAVID CASEY 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
DAVID EWERS 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.

<u>RECIPIENT NAME AND ADDRESS</u>	<u>RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT</u>	<u>PURPOSE OF GRANT OR CONTRIBUTION</u>	<u>AMOUNT</u>
DAVID HU 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
DAVID STEINER 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
DAYTON WINTER 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
DEAN MENEZES 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
DEMARIO WEBB 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
DEVANSHI SHAH 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.

<u>RECIPIENT NAME AND ADDRESS</u>	<u>RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT</u>	<u>PURPOSE OF GRANT OR CONTRIBUTION</u>	<u>AMOUNT</u>
DILLON THOMPSON 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
DOROTHY CHEN 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
DYLAN SEVERSON 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
ELIZABETH DWYER 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
ELIZABETH GARDINER 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
ELIZABETH GRAEFF 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.

<u>RECIPIENT NAME AND ADDRESS</u>	<u>RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT</u>	<u>PURPOSE OF GRANT OR CONTRIBUTION</u>	<u>AMOUNT</u>
ELIZABETH MCDERMOTT 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
ELLIOT HUGHES 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
EMELIA ROHL 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
EMILY ROHLEDER 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
EMILY YUNG 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
EMILY ZWICK 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.

<u>RECIPIENT NAME AND ADDRESS</u>	<u>RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT</u>	<u>PURPOSE OF GRANT OR CONTRIBUTION</u>	<u>AMOUNT</u>
ERIC MATTHEWS 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
ERICA EDGERLY 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
ERVIN POLASEK 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
GABRIELLE LENCIONI 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
GABRIELLE PHILLIPS 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
GABRIELLE WIENS 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.

<u>RECIPIENT NAME AND ADDRESS</u>	<u>RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT</u>	<u>PURPOSE OF GRANT OR CONTRIBUTION</u>	<u>AMOUNT</u>
GAVIN OLSON 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
GRACE KOHN 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
GRACE LEMASTER 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
GRACE MUELLER 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
GRAHAM HARMON 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
HALEY CREITZ 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.

<u>RECIPIENT NAME AND ADDRESS</u>	<u>RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT</u>	<u>PURPOSE OF GRANT OR CONTRIBUTION</u>	<u>AMOUNT</u>
HALLE HAYHURST 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
HALLE STAIB 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
HANNAH BOLINE 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
HANNAH JOHNSON 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
HOLLY BERDAN 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
IAN BLANKINSHIP 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.

<u>RECIPIENT NAME AND ADDRESS</u>	<u>RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT</u>	<u>PURPOSE OF GRANT OR CONTRIBUTION</u>	<u>AMOUNT</u>
IVEY DYSON 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
JACOB HIGHFILL 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
JACOB SPITZ 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
JAKE LEBER 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
JAMES FRISBIE 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
JAMES MELTON 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.

<u>RECIPIENT NAME AND ADDRESS</u>	<u>RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT</u>	<u>PURPOSE OF GRANT OR CONTRIBUTION</u>	<u>AMOUNT</u>
JESSICA BAUCOM 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
JESSICA DING 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
JESSICA FRITSCHKE 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
JESSICA KEEVER 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
JESSICA RESNICK 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
JILL Palski 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.

<u>RECIPIENT NAME AND ADDRESS</u>	<u>RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT</u>	<u>PURPOSE OF GRANT OR CONTRIBUTION</u>	<u>AMOUNT</u>
JONATHAN GO 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
JONATHAN GRUNEWALD 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
JORDAN LUND 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
JORDAN LUNDELL 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
JORDAN TAYLOR 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
JOSHUA DUTTON 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.

<u>RECIPIENT NAME AND ADDRESS</u>	<u>RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT</u>	<u>PURPOSE OF GRANT OR CONTRIBUTION</u>	<u>AMOUNT</u>
JOSHUA HOOVER 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
JOSHUA YONKIN 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
JULIA CAMP 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
JULIANNA BLISCHAK 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
JUSTIN BAKER 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
KAILEE STILES 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.

RECIPIENT NAME AND ADDRESS	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
KAITLIN MCCARTER 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
KAITLYN SCHOENBAUER 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
KATHERINE SPITZ 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
KATHRYN HAESKA 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
KATHRYN MCINTOSH 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
KATIE DUNCAN 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.

<u>RECIPIENT NAME AND ADDRESS</u>	<u>RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT</u>	<u>PURPOSE OF GRANT OR CONTRIBUTION</u>	<u>AMOUNT</u>
KATLYN SMITH 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
KAYLA MESH 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
KAYLA SCHROEDER 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
KAYLENE SEURER 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
KAYLEY GEORGE 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
KENNEDY KOLBECK 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.

<u>RECIPIENT NAME AND ADDRESS</u>	<u>RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT</u>	<u>PURPOSE OF GRANT OR CONTRIBUTION</u>	<u>AMOUNT</u>
KEVIN MONACO 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
KEVIN SHECTMAN 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
KIARA ALLISON 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
KIRSTEN ALLEN 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
KRISTEN GRAVES 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
LAUREN COOPER 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.

<u>RECIPIENT NAME AND ADDRESS</u>	<u>RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT</u>	<u>PURPOSE OF GRANT OR CONTRIBUTION</u>	<u>AMOUNT</u>
LAUREN PFEIFER 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
LEAH HENDERSON 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
LEXI ALEXANDER 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
LIA BENES 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
LINCOLN BLIZZARD 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
LINDSEY COLLING 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.

<u>RECIPIENT NAME AND ADDRESS</u>	<u>RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT</u>	<u>PURPOSE OF GRANT OR CONTRIBUTION</u>	<u>AMOUNT</u>
LINDY LEMASTER 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
LUIS PEDRAZA JR. 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
MACKENZIE COLE 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
MACKENZIE PENNY 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
MACY NICOL 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
MADELINE SIMKO 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.

<u>RECIPIENT NAME AND ADDRESS</u>	<u>RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT</u>	<u>PURPOSE OF GRANT OR CONTRIBUTION</u>	<u>AMOUNT</u>
MADELINE SPENCER 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
MADISON MINNICH 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
MAKAYLA MOORHOUSE 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
MARGARET MISKIN 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
MARIA GRANT 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
MARISSA HOUSLEY 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.

<u>RECIPIENT NAME AND ADDRESS</u>	<u>RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT</u>	<u>PURPOSE OF GRANT OR CONTRIBUTION</u>	<u>AMOUNT</u>
MATTHEW ROTUNDO 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
MATTHEW ZEMANICK 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
MCKENZIE CULOTTA 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
MEGAN HILSCHER 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
MICA BROOKS 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
MICHAEL HARDEMAN 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.

<u>RECIPIENT NAME AND ADDRESS</u>	<u>RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT</u>	<u>PURPOSE OF GRANT OR CONTRIBUTION</u>	<u>AMOUNT</u>
MICHAEL HINNEN 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
MICHAEL MORAN 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
MICHELLE DING 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
MIKAILA RUSHING 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
MIKAYLA FISHER 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
MONICA RONNEBAUM 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.

<u>RECIPIENT NAME AND ADDRESS</u>	<u>RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT</u>	<u>PURPOSE OF GRANT OR CONTRIBUTION</u>	<u>AMOUNT</u>
MORGAN CRENSHAW 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
MORGAN KRAUSE 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
NICHOLAS RHYNE 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
NOAH KRUSE 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
PAIGE MAGNIN 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
PARTH KHARE 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.

<u>RECIPIENT NAME AND ADDRESS</u>	<u>RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT</u>	<u>PURPOSE OF GRANT OR CONTRIBUTION</u>	<u>AMOUNT</u>
PATRICK AUPPERLE 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
PATRICK YERKES 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
PETER LOOMIS 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
PHILLIP MASTERSON 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
QUINN MAETZOLD 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
RACHEL KORN 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.

<u>RECIPIENT NAME AND ADDRESS</u>	<u>RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT</u>	<u>PURPOSE OF GRANT OR CONTRIBUTION</u>	<u>AMOUNT</u>
RACHEL MILLER 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
RAYLEA WILLOUGHBY 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
ROBERT SHORT 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
ROBERT SMOCK 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
RYAN CLINTON 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
RYAN MALONE 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.

<u>RECIPIENT NAME AND ADDRESS</u>	<u>RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT</u>	<u>PURPOSE OF GRANT OR CONTRIBUTION</u>	<u>AMOUNT</u>
SARA CLAYTON 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
SARAH FLISIKOWSKI 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
SARAH MAKIN 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
SARAH SWEIGART 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
SCOTT GRAY 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
SELESHA SUBNAIK 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.

<u>RECIPIENT NAME AND ADDRESS</u>	<u>RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT</u>	<u>PURPOSE OF GRANT OR CONTRIBUTION</u>	<u>AMOUNT</u>
SERENE KAGGAL 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
SHALINI RAMGOOLAM 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
SHANNON MAYNES 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
SHANNON WANG 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
SHERICKA BENNETT 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
SIMONE MENEZES 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.

<u>RECIPIENT NAME AND ADDRESS</u>	<u>RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT</u>	<u>PURPOSE OF GRANT OR CONTRIBUTION</u>	<u>AMOUNT</u>
SIOBHAN MOYNIHAN 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
SLOANE TAYLOR 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
SOPHIE BLACKBURN 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
STEPAN DILKES 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
STEPHANIE MUNSON 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
STEPHANY ELMER 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.

<u>RECIPIENT NAME AND ADDRESS</u>	<u>RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT</u>	<u>PURPOSE OF GRANT OR CONTRIBUTION</u>	<u>AMOUNT</u>
STEVEN HARMS 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
SUAD ABDELAZIZ 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
SUNYA FAREED 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
SYDNEY KAUFMAN 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
SYDNEY MORALES 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
TAYLOR ISBELL 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.

<u>RECIPIENT NAME AND ADDRESS</u>	<u>RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT</u>	<u>PURPOSE OF GRANT OR CONTRIBUTION</u>	<u>AMOUNT</u>
THOMAS CLAVELLI 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
TORI BENES 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
TORI MOCK 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
TRENTON EDWARDS 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
TREVOR FLAMINI 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
UTAH COX 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.

RECIPIENT NAME AND ADDRESS	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
WALLIS BELCHER 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
YUE YIN XIA 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
ZACHARY CREEVAN 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
ZOE TAO 4111 E 37TH ST N WICHITA, KS 67220	NONE I	EDUCATION SUPPORT	2,000.
			TOTAL CONTRIBUTIONS PAID
			<u>3,884,900</u>

FORM 990-PF, PART XVI-A - ANALYSIS OF OTHER REVENUE

ATTACHMENT 15

<u>DESCRIPTION</u>	<u>BUSINESS CODE</u>	<u>AMOUNT</u>	<u>EXCLUSION CODE</u>	<u>AMOUNT</u>	<u>RELATED OR EXEMPT FUNCTION INCOME</u>
EFPRP - OTHER INVESTMENT INCOME/(LOSS)			18	232,587.	
EFPRP - UNRELATED BUSINESS INCOME	523000	-64,086.			
TOTALS		<u>-64,086.</u>		<u>232,587.</u>	

Exempt Organization Business Income Tax Return
(and proxy tax under section 6033(e))

EXTENSION GRANTED

OMB No. 1545-0687

2015

Open to Public Inspection for
501(c)(3) Organizations OnlyDepartment of the Treasury
Internal Revenue Service

For calendar year 2015 or other tax year beginning _____, 2015, and ending _____, 20____.

▶ Information about Form 990-T and its instructions is available at www.irs.gov/form990t.
▶ Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).A ☐ Check box if
address changedName of organization (☐ Check box if name changed and see instructions.)D Employer identification number
(Employees' trust, see instructions.)

B Exempt under section

☒ 501(c)(3)
☐ 408(e) ☐ 220(e)
☐ 408A ☐ 530(a)
☐ 529(a)
Print
or
Type

FRED C. & MARY R. KOCH FOUNDATION, INC.

Number, street, and room or suite no. If a P.O. box, see instructions.

P.O. BOX 2256

City or town, state or province, country, and ZIP or foreign postal code

WICHITA, KS 67201-2256

48-6113560

E Unrelated business activity codes
(See instructions.)

523000

C Book value of all assets
at end of year

26,668,738.

F Group exemption number (See instructions.) ▶

G Check organization type ▶ ☒ 501(c) corporation ☐ 501(c) trust ☐ 401(a) trust ☐ Other trust

H Describe the organization's primary unrelated business activity. ▶ PARTNERSHIP INCOME FROM K-1

I During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? ▶ ☐ Yes ☒ No
If "Yes," enter the name and identifying number of the parent corporation. ▶

J The books are in care of ▶ PAM EVERS

Telephone number ▶ 316-828-3928

Part I Unrelated Trade or Business Income

	(A) Income	(B) Expenses	(C) Net
1a Gross receipts or sales			
b Less returns and allowances			
c Balance ▶ 1c			
2 Cost of goods sold (Schedule A, line 7)			
3 Gross profit. Subtract line 2 from line 1c			
4a Capital gain net income (attach Schedule D)			
b Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)			
4b			
c Capital loss deduction for trusts			
4c			
5 Income (loss) from partnerships and S corporations (attach statement)	-64,086.	ATCH 1	-64,086.
6 Rent income (Schedule C)			
7 Unrelated debt-financed income (Schedule E)			
8 Interest, annuities, royalties, and rents from controlled organizations (Schedule F)			
9 Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G)			
10 Exploited exempt activity income (Schedule I)			
11 Advertising income (Schedule J)			
12 Other income (See instructions; attach schedule)			
13 Total. Combine lines 3 through 12	-64,086.		-64,086.

Part II Deductions Not Taken Elsewhere (See instructions for limitations on deductions.) (Except for contributions, deductions must be directly connected with the unrelated business income.)

14 Compensation of officers, directors, and trustees (Schedule K)	14	
15 Salaries and wages	15	
16 Repairs and maintenance	16	
17 Bad debts	17	
18 Interest (attach schedule)	18	
19 Taxes and licenses	19	
20 Charitable contributions (See instructions for limitation rules)	20	
21 Depreciation (attach Form 4562)	21	
22 Less depreciation claimed on Schedule A and elsewhere on return	22a	
23 Depletion	22b	
24 Contributions to deferred compensation plans	23	
25 Employee benefit programs	24	
26 Excess exempt expenses (Schedule I)	25	
27 Excess readership costs (Schedule J)	26	
28 Other deductions (attach schedule)	27	
29 Total deductions. Add lines 14 through 28	28	
30 Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13	29	
31 Net operating loss deduction (limited to the amount on line 30)	30	-64,086.
32 Unrelated business taxable income before specific deduction. Subtract line 31 from line 30	31	
33 Specific deduction (Generally \$1,000, but see line 33 instructions for exceptions)	32	-64,086.
34 Unrelated business taxable income. Subtract line 33 from line 32. If line 33 is greater than line 32, enter the smaller of zero or line 32	33	1,000.
For Paperwork Reduction Act Notice, see instructions.	34	-64,086.

Part III Tax Computation

35 Organizations Taxable as Corporations. See instructions for tax computation. Controlled group members (sections 1561 and 1563) check here ☐ See instructions and:

a Enter your share of the \$50,000, \$25,000, and \$9,925,000 taxable income brackets (in that order):
 (1) \$ (2) \$ (3) \$

b Enter organization's share of: (1) Additional 5% tax (not more than \$11,750) \$
 (2) Additional 3% tax (not more than \$100,000) \$

c Income tax on the amount on line 34, 35c

36 Trusts Taxable at Trust Rates. See instructions for tax computation. Income tax on the amount on line 34 from: ☐ Tax rate schedule or ☐ Schedule D (Form 1041), 36

37 Proxy tax. See instructions 37

38 Alternative minimum tax 38

39 Total. Add lines 37 and 38 to line 35c or 36, whichever applies. 39

Part IV Tax and Payments

40 a Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116), 40a

b Other credits (see instructions), 40b

c General business credit. Attach Form 3800 (see instructions) 40c

d Credit for prior year minimum tax (attach Form 8801 or 8827), 40d

e Total credits. Add lines 40a through 40d 40e

f Subtract line 40e from line 39. 41

42 Other taxes. Check if from: ☐ Form 4255 ☐ Form 8611 ☐ Form 8697 ☐ Form 8866 ☐ Other (attach schedule) 42

43 Total tax. Add lines 41 and 42 43 0.

44 a Payments: A 2014 overpayment credited to 2015 44a

b 2015 estimated tax payments 44b

c Tax deposited with Form 8868. 44c

d Foreign organizations: Tax paid or withheld at source (see instructions) 44d

e Backup withholding (see instructions) 44e

f Credit for small employer health insurance premiums (Attach Form 8941) 44f

g Other credits and payments: ☐ Form 2439 ☐ Form 4136 ☐ Other Total 44g

45 Total payments. Add lines 44a through 44g. 45

46 Estimated tax penalty (see instructions). Check if Form 2220 is attached. 46

47 Tax due. If line 45 is less than the total of lines 43 and 46, enter amount owed 47

48 Overpayment. If line 45 is larger than the total of lines 43 and 46, enter amount overpaid 48

49 Enter the amount of line 48 you want: Credited to 2016 estimated tax Refunded 49

Part V Statements Regarding Certain Activities and Other Information (see instructions)

- 1 At any time during the 2015 calendar year, did the organization have an interest in or a signature or other authority over a financial account (bank, securities, or other) in a foreign country? If YES, the organization may have to file FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If YES, enter the name of the foreign country here Yes No
- 2 During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? If YES, see instructions for other forms the organization may have to file. X
- 3 Enter the amount of tax-exempt interest received or accrued during the tax year \$

Schedule A - Cost of Goods Sold. Enter method of inventory valuation

- 1 Inventory at beginning of year 1
- 2 Purchases 2
- 3 Cost of labor 3
- 4a Additional section 263A costs (attach schedule) 4a
- b Other costs (attach schedule) 4b
- 5 Total. Add lines 1 through 4b 5
- 6 Inventory at end of year 6
- 7 Cost of goods sold. Subtract line 6 from line 5. Enter here and in Part I, line 2. 7
- 8 Do the rules of section 263A (with respect to property produced or acquired for resale) apply to the organization? Yes No X

Sign Here

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

Signature of officer

Date

Title

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

Paid Preparer Use Only

Print/Type preparer's name

STEVEN L WEBB

Preparer's signature

Date

Check ☐ if self-employed

PTIN

P00235405

Firm's name ▶ BKD, LLP

Firm's EIN ▶ 44-0160260

Firm's address ▶ 1551 N WATERFRONT PKWY, STE 300

Phone no. 316-265-2811

WICHITA, KS 67206-6601

Schedule C - Rent Income (From Real Property and Personal Property Leased With Real Property)
(see instructions)**1. Description of property**

(1)
(2)
(3)
(4)

2. Rent received or accrued

(a) From personal property (if the percentage of rent for personal property is more than 10% but not more than 50%)	(b) From real and personal property (if the percentage of rent for personal property exceeds 50% or if the rent is based on profit or income)	3(a) Deductions directly connected with the income in columns 2(a) and 2(b) (attach schedule)
(1)		
(2)		
(3)		
(4)		
Total	Total	

(c) **Total income.** Add totals of columns 2(a) and 2(b). Enter here and on page 1, Part I, line 6, column (A) ▶(b) **Total deductions.** Enter here and on page 1, Part I, line 6, column (B) ▶**Schedule E - Unrelated Debt-Financed Income** (see instructions)

1. Description of debt-financed property		2. Gross income from or allocable to debt-financed property	3. Deductions directly connected with or allocable to debt-financed property	
			(a) Straight line depreciation (attach schedule)	(b) Other deductions (attach schedule)
(1)				
(2)				
(3)				
(4)				
4. Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	5. Average adjusted basis of or allocable to debt-financed property (attach schedule)	6. Column 4 divided by column 5	7. Gross income reportable (column 2 x column 6)	8. Allocable deductions (column 6 x total of columns 3(a) and 3(b))
(1)		%		
(2)		%		
(3)		%		
(4)		%		
			Enter here and on page 1, Part I, line 7, column (A).	Enter here and on page 1, Part I, line 7, column (B).
Totals ▶				

Total dividends-received deductions included in column 8 ▶**Schedule F - Interest, Annuities, Royalties, and Rents From Controlled Organizations** (see instructions)

1. Name of controlled organization	2. Employer identification number	Exempt Controlled Organizations			
		3. Net unrelated income (loss) (see instructions)	4. Total of specified payments made	5. Part of column 4 that is included in the controlling organization's gross income	6. Deductions directly connected with income in column 5
(1)					
(2)					
(3)					
(4)					

Nonexempt Controlled Organizations

7. Taxable income	8. Net unrelated income (loss) (see instructions)	9. Total of specified payments made	10. Part of column 9 that is included in the controlling organization's gross income	11. Deductions directly connected with income in column 10
(1)				
(2)				
(3)				
(4)				
			Add columns 5 and 10. Enter here and on page 1, Part I, line 8, column (A).	Add columns 6 and 11. Enter here and on page 1, Part I, line 8, column (B).
Totals ▶				

JSA

Schedule G - Investment Income of a Section 501(c)(7), (9), or (17) Organization (see instructions)

1. Description of income	2. Amount of income	3. Deductions directly connected (attach schedule)	4. Set-asides (attach schedule)	5. Total deductions and set-asides (col. 3 plus col. 4)
(1)				
(2)				
(3)				
(4)				
Enter here and on page 1, Part I, line 9, column (A).				Enter here and on page 1, Part I, line 9, column (B).
Totals ▶				

Schedule I - Exploited Exempt Activity Income, Other Than Advertising Income (see instructions)

1. Description of exploited activity	2. Gross unrelated business income from trade or business	3. Expenses directly connected with production of unrelated business income	4. Net income (loss) from unrelated trade or business (column 2 minus column 3). If a gain, compute cols. 5 through 7.	5. Gross income from activity that is not unrelated business income	6. Expenses attributable to column 5	7. Excess exempt expenses (column 6 minus column 5, but not more than column 4).
(1)						
(2)						
(3)						
(4)						
Enter here and on page 1, Part I, line 10, col. (A).		Enter here and on page 1, Part I, line 10, col. (B).			Enter here and on page 1, Part II, line 26.	
Totals ▶						

Schedule J - Advertising Income (see instructions)**Part I Income From Periodicals Reported on a Consolidated Basis**

1. Name of periodical	2. Gross advertising income	3. Direct advertising costs	4. Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7.	5. Circulation income	6. Readership costs	7. Excess readership costs (column 6 minus column 5, but not more than column 4).
(1)						
(2)						
(3)						
(4)						
Totals (carry to Part II, line (5)) . . . ▶						

Part II Income From Periodicals Reported on a Separate Basis (For each periodical listed in Part II, fill in columns 2 through 7 on a line-by-line basis.)

1. Name of periodical	2. Gross advertising income	3. Direct advertising costs	4. Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7.	5. Circulation income	6. Readership costs	7. Excess readership costs (column 6 minus column 5, but not more than column 4).
(1)						
(2)						
(3)						
(4)						
Totals from Part I ▶						
Enter here and on page 1, Part I, line 11, col. (A).		Enter here and on page 1, Part I, line 11, col. (B).				Enter here and on page 1, Part II, line 27.
Totals, Part II (lines 1-5) ▶						

Schedule K - Compensation of Officers, Directors, and Trustees (see instructions)

1. Name	2. Title	3. Percent of time devoted to business	4. Compensation attributable to unrelated business
(1) ATCH 2			
(2)		%	
(3)		%	
(4)		%	
Total. Enter here and on page 1, Part II, line 14. ▶		%	

FORM 990T - LINE 5 -INCOME (LOSS) FROM PARTNERSHIPS

NET ORDINARY INCOME - EFPRP INVESTMENTS K-1

-64,086.

INCOME (LOSS) FROM PARTNERSHIPS

-64,086.

SCHD. K, FORM 990-T, COMPENSATION OF OFFICERS, DIRECTORS, & TRUSTEES

<u>NAME AND ADDRESS</u>	<u>TITLE</u>	<u>BUSINESS PERCENT</u>	<u>COMPENSATION</u>
ELIZABETH B KOCH PO BOX 2256 WICHITA, KS 67201	PRESIDENT/DIRECTOR	0	0.
DUSTIN PERRY PO BOX 2256 WICHITA, KS 67201	TREASURER	0	0.
PHILIP ELLENDER PO BOX 2256 WICHITA, KS 67201	VICE PRESIDENT	0	0.
CHARLES G KOCH PO BOX 2256 WICHITA, KS 67201	DIRECTOR	0	0.
DAVID H KOCH PO BOX 2256 WICHITA, KS 67201	DIRECTOR	0	0.
RICHARD FINK PO BOX 2256 WICHITA, KS 67201	DIRECTOR	0	0.
MEREDITH OLSON PO BOX 2256 WICHITA, KS 67201	SECRETARY/GRANTS ADMINISTRATOR	0	0.

TOTAL COMPENSATION

0.