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SCANNED NOV 1 2 2015

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. OMB No 1545-0052

Open to Public Inspection

Department of the Treasury Internal Revenue Service ▶ Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf.

For calendar year 2014 or tax year beginning 07/25, 2014, and ending 12/31, 2014 Name of foundation A Employer identification number BERGES FAMILY FOUNDATION 47-1426743 Number and street (or P O box number if mail is not delivered to street address) B Telephone number (see instructions) Room/suite (314) 406-1995255 ISLAND CREEK DRIVE City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here VERO BEACH, FL 32963 G Check all that apply Х Initial return Initial return of a former public charity D 1 Foreign organizations, check here -Final return Amended return 2 Foreign organizations meeting the 85% test, check here and attach Address change Name change computation H Check type of organization | X | Section 501(c)(3) exempt private foundation E If private foundation status was terminated Other taxable private foundation Section 4947(a)(1) nonexempt charitable trust under section 507(b)(1)(A), check here . J Accounting method | X Cash | Accrual I Fair market value of all assets at F If the foundation is in a 60-month termination Other (specify) end of year (from Part II, col (c), line under section 507(b)(1)(B), check here . 10,577,338. (Part I, column (d) must be on cash basis) Part I Analysis of Revenue and Expenses (The (d) Disbursements (a) Revenue and (b) Net investment (c) Adjusted net for charitable total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in éxpenses per purposes income income books column (a) (see instructions)) (cash basis only) 10,886,593 Contributions, gifts, grants etc., received (attach schedule) if the foundation is not required to attach Sch. B. Check ▶ 2 6. ATCH 1 3 Interest on savings and temporary cash investments. 58,260. 58,260. ATCH 2 4 Dividends and interest from securities . . . b Net rental income or (loss) 659,156 Net gain or (loss) from sale of assets not on line 10 Gross sales price for all 1,192,990. assets on line 6a 659,156 Capital gain net income (from Part IV, line 2) . R Net short-term capital gain..... 8 Income modifications : 10 a Gross sales less returns and allowances b Less Cost of goods sold . c Gross profit or (loss) (attach schedule) . . . 4,519. 4,519. 11 Other income (attach schedule) ATCH, 3... Total. Add lines 1 through 11 11,608,534. 721,941. 12 13 Compensation of officers, directors, trustees, etc. Expenses 14 Other employee salaries and wages 15 Pension plans, employee benefits Legal fees (attach schedule) b Accounting fees (attach schedule) Administrative 18,474. 18,474. c Other professional fees (attach schedule). [4] 17 1,799. 1.799. 18 Taxes (attach schedule) (see instructions)[5]. 19 Depreciation (attach schedule) and depletion. 20 21 Due 21 Travel, conferences, and meetings Printing and publications Operating 3 66 66. Other expenses (attach schedule) ATCH . 6. . Total operating and administrative expenses 20,339. 20,339. Add lines 13 through 23. Contributions, gifts, grants paid 20,339. 20,339 Total expenses and disbursements Add lines 24 and 25 Subtract line 26 from line 12 11,588,195 a Excess of revenue over expenses and disbursements . . 701,602. b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-). .

JSA For Paperwork Reduction Act Notice, see instructions. 4E1410 1 000 1304IX H978 8/28/2015 3:26:

-7	art II	Dalanas Shacts	Attached schedules and amounts in the description column should be for end-of-year	Beginning of year	End o	f year
1		Datafice Stieets	amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
\neg	1	Cash - non-interest-bear	ing			
- 1			cash investments		1,090,690.	1,090,690.
- 1		Less allowance for dou	btful accounts ▶			
Ì						
Į	-	less allowance for dou	btful accounts			
ĺ			officers, directors, trustees, and other			
ļ			tach schedule) (see instructions)			
			receivable (attach schedule)			
.,			ibtful accounts			
ssets			se			
ASS			deferred charges		1 447 724	1 447 724
~			te government obligations (attach schedule).		1,447,734.	1,447,734.
			e stock (attach schedule) ATCH 7		7,129,464.	7,129,464.
	11 C	Investments - corporate Investments - land, building and equipment basis Less accumulated depreci	ation b			
		(attach schedule)				
	12	Investments - mortgage	e loans		000 450	000 450
	13 14	Investments - other (att	ach schedule)		909,450.	909,450.
	1.7	equipment basis Less accumulated depreci (attach schedule)	ation			
	15	Other assets (describe	>)			
	16		completed by all filers - see the			
		instructions Also, see	page 1, item I)	0	10,577,338.	10,577,338.
	17	Accounts payable and	accrued expenses			
	18					
Š	19					
₫	20		ors, trustees, and other disqualified persons			
Liabilities	21	Mortgages and other n	otes payable (attach schedule)			
5	22		pe ▶)			
	1					
	23	Total liabilities (add lin	es 17 through 22)	C		o
- S		Foundations that fo	llow SFAS 117, check here . ▶ 24 through 26 and lines 30 and 31.			7
Balances	24	Unrestricted				
<u>3</u>	25					7
						7
or Fund		Foundations that de	o not follow SFAS 117, ▶ X nplete lines 27 through 31.			
ō	27		ncipal, or current funds			
Assets	28		or land, bidg, and equipment fund			┪
SS	29		nulated income, endowment, or other funds	\	10,577,338	1
4	30	-	nd balances (see instructions)		 	-
Net	31		d net assets/fund balances (see		20,011,000	7
	"				10,577,338	
	art		anges in Net Assets or Fund Bal		10,011,000	<u></u>
	_		balances at beginning of year - Par		(must agree with	
			- ·		`	
			ted on prior year's return)		·	11,588,195
		er amount from Part		• • • • • • • • • • • • • • • • • • • •	2	11,300,193
			uded in line 2 (itemize) ▶			11 500 105
-	· Add	a mies i, z, and s	in line 2 (itemize) ▶ ATCH 8	• • • • • • • • • • • • • • • • • • • •	4	11,588,195
						1,010,857
,	101	ai net assets of fund	balances at end of year (line 4 minu	is iirie σ) - Maπ II, column	(b), line 30 6	10,577,338

_	~
Page	-5

	(a) List and 2-story bri	ick warehouse, or common stock, 200	ISTIS MILL CO.)	P - Purchase	acquired (mo, day, yr)	(mo day, yr
 a	SEE PART IV SCHED			D - Donation	(mo, day, yi)	
_	· · · · · · · · · · · · · · · · · · ·					
<u> </u>					<u> </u>	<u> </u>
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo (e) plus (f) mini	
_						
-						
_						
_						
_	Complete only for assets	showing gain in column (h) and own	ed by the foundation on 12/31/69		Comp (Cal. (b) a	
(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		Gains (Col. (h) g (k), but not less Losses (from co	than -0-) or
_						
_						
_						
_	<u></u>					
	Capital gain net income d	ar inat cantal ineel I	If gain, also enter in Part I, line 7			
		()	If (loss), enter -0- in Part I, line 7] 2		659,156
	Net sport-term capital da	iin or (loss) as defined in sections	\$ 1222(5) and (6)			
				.)		
	If gain, also enter in Pa	art I, line 8, column (c) (see in	structions) If (loss), enter -0- in	`}		
יכ	If gain, also enter in Pa Part I, line 8	Art I, line 8, column (c) (see in Jnder Section 4940(e) for R c private foundations subject to t	structions) If (loss), enter -0- in	at Income		
o se	If gain, also enter in Pa Part I, line 8	Jnder Section 4940(e) for R c private foundations subject to t leave this part blank NG the section 4942 tax on the distr	structions) If (loss), enter -0- in educed Tax on Net Investment he section 4940(a) tax on net involution AVAILABLE FOR INITIA inbutable amount of any year in the	nt Income estment income L YEAR I	RETURNS	Yes
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o a 'Y	If gain, also enter in Part I, line 8	Jnder Section 4940(e) for R c private foundations subject to t leave this part blank the section 4942 tax on the distrinct qualify under section 4940(e) nount in each column for each years.	educed Tax on Net Investment he section 4940(a) tax on net investment available. FOR INITIA inbutable amount of any year in the part, see the instructions before many	at Income estment inco L YEAR I	ntries	Yes
3 S S S S S S S S S S S S S S S S S S S	If gain, also enter in Part I, line 8	Jnder Section 4940(e) for R c private foundations subject to t leave this part blank No the section 4942 tax on the district qualify under section 4940(e)	structions) If (loss), enter -0- in educed Tax on Net Investment he section 4940(a) tax on net involution TAVAILABLE FOR INITIA inbutable amount of any year in the Do not complete this part	at Income estment income L YEAR F e base pendaking any er	RETURNS	ratio
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o a 'Y	If gain, also enter in Pare Part I, line 8	Jnder Section 4940(e) for R c private foundations subject to to the section 4942 tax on the distribution of qualify under section 4940(e) for qualify under section 4940(e) found in each column for each years (b) Adjusted qualifying distributions (b) Adjusted qualifying distributions (c) for the 5-year base period - diversity of the foundation has been in existence if the procharitable-use assets for 2014 for the foundation of the foundation of the foundation has been in existence in the procharitable-use assets for 2014 for the foundation of the foundation of the foundation has been in existence in the procharitable-use assets for 2014 for the foundation of the foundation of the foundation has been in existence in the foundation of the foun	educed Tax on Net Investmer the section 4940(a) tax on net investment the s	aking any er 2 he 3 4 5	ntries (d) Distribution	ratio

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Par	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see in	struc	tions)
1a	Exempt operating foundations described in section 4940(d)(2), check here			
	Date of ruling or determination letter (attach copy of letter if necessary - see instructions)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check		<u>14</u> ,03	32.
	here and enter 1% of Part I, line 27b			
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of			
	Part I, line 12, col (b)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 2			
3	Add lines 1 and 2 3		14,0	32.
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		14 <u>,</u> 03	32.
6	Credits/Payments			
a	2014 estimated tax payments and 2013 overpayment credited to 2014 6a			
b	Exempt foreign organizations - tax withheld at source			
C	Tax paid with application for extension of time to file (Form 8868)			
d	Backup withholding erroneously withheld			
7	Total credits and payments Add lines 6a through 6d		15,0	
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8		2	12.
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		7	<u>56.</u>
11	Enter the amount of line 10 to be Credited to 2015 estimated tax ▶ 756. Refunded ▶ 11			
Pai	t VII-A Statements Regarding Activities			
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes	No
	participate or intervene in any political campaign?	1a		<u>X</u>
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see			
	Instructions for the definition)?	1b		X
	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	į	Ì	
С	Did the foundation file Form 1120-POL for this year?	1c		<u>X</u>
đ	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			
	(1) On the foundation \blacktriangleright \$ (2) On foundation managers \blacktriangleright \$	İ		
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on		1	
	foundation managers > \$			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		<u> </u>
	If "Yes," attach a detailed description of the activities			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of	_		.,
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		<u>X</u>
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		- <u>X</u>
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		
_	If "Yes," attach the statement required by General Instruction T			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			
	By language in the governing instrument, or			
	By state legislation that effectively amends the governing instrument so that no mandatory directions that		Х	
_	conflict with the state law remain in the governing instrument?	7	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	- '-		
8a	Enter the states to which the foundation reports or with which it is registered (see instructions) FL,			
ı.		ļ		
b	,	8b	Х	
^	(or designate) of each state as required by General Instruction G ² If "No," attach explanation	40	<u> </u>	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or			
	4942(j)(5) for calendar year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "Yes,"			Х
	complete Part XIV	9_	\vdash	<u>├</u> ^
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their	40	X	
	names and addresses .ATCH. 9	10	0-PF	(2014)
	FC	7m 73	7-FF	(∠∪14)

	990-PF (2014) BERGES FAMILY FOUNDATION 47-1426	743	P	age 5
Par	t VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the		l	
	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions),	11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified		Ì	
	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?	13	X	
	Website address ► N/A	- <i>-</i>		_
14	The books are in care of ▶ JIM BERGES Telephone no ▶ 314-406	-199	5	
	Located at ▶255 ISLAND CREEK DRIVE VERO BEACH, FL ZIP+4 ▶ 32963			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		▶	· 🔲
	and enter the amount of tax-exempt interest received or accrued during the year			
16	At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority	,	Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114, (formerly TD F 90-221) If			
_	"Yes," enter the name of the foreign country	<u>L</u>		
Pa	rt 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.	<u> </u>	Yes	No
1 a	During the year did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No	1		1
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			
	disqualified person? Yes X No			1
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X No			ĺ
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?			
	· · · · · · · · · · · · · · · · · · ·			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the			
	foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days)			ł
,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		1	
,	b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	1b		
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	10	1	+
	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 2014?	1c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private	10	1	
•	operating foundation defined in section 4942(j)(3) or 4942(j)(5))		1	
	a At the end of tax year 2014, did the foundation have any undistributed income (lines 6d and			
	6e, Part XIII) for tax year(s) beginning before 2014?			
	If "Yes," list the years		1	1
	b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)		1	1
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to		1	1
	all years listed, answer "No" and attach statement - see instructions)	2b		X
	c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
	•			
3	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise	1	Ì	}
	at any time during the year?			
	b if "Yes," did it have excess business holdings in 2014 as a result of (1) any purchase by the foundation or			
	disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the	-		
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of			
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the			
	foundation had excess business holdings in 2014)	. 3b	—	
4	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	4	X
	b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its			1

charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2014? Form 990-PF (2014)

orm 9	990-PF (2014) BERGES FAMILY	FOUNDATION			47-14	26743	Page 6
Par	t VII-B Statements Regarding Activities	for Which Form	4720 May Be Req	uired (cont	inued)		
5a	During the year did the foundation pay or incur any amou	unt to					
	(1) Carry on propaganda, or otherwise attempt to influe	nce legislation (section	1 4945(e))?	Yes	X No		
	(2) Influence the outcome of any specific public ele	ction (see section 4	955), or to carry on	,			
	directly or indirectly, any voter registration drive?			Yes	X No	1	
	(3) Provide a grant to an individual for travel, study, or of			F-7	X No		
	(4) Provide a grant to an organization other than a				_		
	section 4945(d)(4)(A)? (see instructions)				X No		
	(5) Provide for any purpose other than religious, ch				_		
	purposes, or for the prevention of cruelty to children	•	**		X No		
b	If any answer is "Yes" to 5a(1)-(5), did any of the				scribed in		
	Regulations section 53 4945 or in a current notice regard					5b	
	Organizations relying on a current notice regarding disas						
c	If the answer is "Yes" to question 5a(4), does the						
•	because it maintained expenditure responsibility for the		· ·	1 1 -	X No		
	If "Yes," attach the statement required by Regulations see	•				1 1	
6a	Did the foundation, during the year, receive any fun	, ,	actly to now promite	••			
ou.	on a personal benefit contract?			Yes	X No		
b	Did the foundation, during the year, pay premiums, dire			. —		6b	X
-	If "Yes" to 6b, file Form 8870	on manectry, on a	personal benefit contre			1	
7 a	At any time during the tax year, was the foundation a pa	arty to a prohibited ta	chalter transaction?	Yes	X No		
b	If "Yes," did the foundation receive any proceeds or have	•				7b	l x
	rt VIII Information About Officers, Directo	rs, Trustees, Fou	ndation Manager	s. Highly P	aid Empl		
1	and Contractors List all officers, directors, trustees, foundation re		_	-	-		
<u> </u>		(b) Title, and average	(c) Compensation	(d) Contribi	utions to	(e) Expens	e account
	(a) Name and address	hours per week	/If not paid				
	<u> </u>	hours per week devoted to position	(If not paid, enter -0-)	employee bei	mpensation	other all	owances
	<u></u>	devoted to position	enter -0-)	and deferred co	ompensation		owances
ATC		devoted to position	enter -0-)	and deferred co	ompensation		owances 0
		devoted to position	enter -0-)	and deferred co	ompensation		
	н 10	devoted to position	enter -0-)	and deferred co	ompensation C		
	н 10	devoted to position	enter -0-)	and deferred co	mpensation C		
	H 10	devoted to position	enter -0-)	and deferred co	mpensation C		
	H 10	devoted to position	enter -0-)	and deferred co	em paris mpensation		
	H 10		C	and deferred co	mpensation C	other all	0
	Compensation of five highest-paid employees		C	and deferred co	mpensation C	other all	0
	H 10	(other than thos	C	e 1 - see	npensation C	other all	0
2	Compensation of five highest-paid employees	(other than those (b) Title, and average hours per week	C	e 1 - see (d) Contrib employee	instructio	ns). If no	one, enter
2	Compensation of five highest-paid employees "NONE."	(other than thos	se included on lin	e 1 - see	instructio utions to benefit deferred	ns). If no	one, enter
2	Compensation of five highest-paid employees "NONE."	(other than those (b) Title, and average hours per week	se included on lin	e 1 - see (d) Contrib employee plans and	instructio utions to benefit deferred	ns). If no	one, enter
2	Compensation of five highest-paid employees "NONE."	(other than those (b) Title, and average hours per week	se included on lin	e 1 - see (d) Contrib employee plans and	instructio utions to benefit deferred	ns). If no	one, enter
2	Compensation of five highest-paid employees "NONE."	(other than those (b) Title, and average hours per week	se included on lin	e 1 - see (d) Contrib employee plans and	instructio utions to benefit deferred	ns). If no	one, enter
2	Compensation of five highest-paid employees "NONE."	(other than those (b) Title, and average hours per week	se included on lin	e 1 - see (d) Contrib employee plans and	instructio utions to benefit deferred	ns). If no	one, enter
2	Compensation of five highest-paid employees "NONE."	(other than those (b) Title, and average hours per week	se included on lin	e 1 - see (d) Contrib employee plans and	instructio utions to benefit deferred	ns). If no	one, enter
2	Compensation of five highest-paid employees "NONE."	(other than those (b) Title, and average hours per week	se included on lin	e 1 - see (d) Contrib employee plans and	instructio utions to benefit deferred	ns). If no	one, enter
2	Compensation of five highest-paid employees "NONE."	(other than those (b) Title, and average hours per week	se included on lin	e 1 - see (d) Contrib employee plans and	instructio utions to benefit deferred	ns). If no	one, enter
2	Compensation of five highest-paid employees "NONE."	(other than those (b) Title, and average hours per week	se included on lin	e 1 - see (d) Contrib employee plans and	instructio utions to benefit deferred	ns). If no	one, enter
2	Compensation of five highest-paid employees "NONE."	(other than those (b) Title, and average hours per week	se included on lin	e 1 - see (d) Contrib employee plans and	instructio utions to benefit deferred	ns). If no	one, enter
2	Compensation of five highest-paid employees "NONE."	(other than those (b) Title, and average hours per week	se included on lin	e 1 - see (d) Contrib employee plans and	instructio utions to benefit deferred	ns). If no	one, enter

Form 990-PF(2014)

Total. Add lines 1 through 3

Form 9	90-PF (2014)		Page 8
Part	Minimum Investment Return (All domestic foundations must complete this part. Foreign see instructions.)	n foun	dations,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes		
а	Average monthly fair market value of securities	1a	3,467,065.
	Average of monthly cash balances	1b	2,751,615.
С	Fair market value of all other assets (see instructions).	1c	471,385.
d	Total (add lines 1a, b, and c)	1d	6,690,065.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)	,	
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	6,690,065.
4	Subtract line 2 from line 1d Cash deemed held for charitable activities Enter 1 1/2 % of line 3 (for greater amount, see		
	instructions)	4	100,351.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	6,589,714.
6	Minimum investment return. Enter 5% of line 5	6	144,432.
Part	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating four and certain foreign organizations check here ▶ and do not complete this part)	dations	
1	Minimum investment return from Part X, line 6	1	144,432.
2 a	Tax on investment income for 2014 from Part VI, line 5		
b	Income tax for 2014 (This does not include the tax from Part VI). 2b	1 1	
c	Add lines 2a and 2b	2c	14,032.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	130,400.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4		130,400.
6	Deduction from distributable amount (see instructions)		
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,		
	line 1	1 1	130,400.
Par	XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
а	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	
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		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4		
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	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	0
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when qualifies for the section 4940(e) reduction of tax in those years	calculat	ing whether the foundation

Form	990-PF (2014)				Page 9
Pa	rt XIII Undistributed Income (see instruc	ctions)			
1	Distributable amount for 2014 from Part XI,	(a) Corpus	(b) Years prior to 2013	(c) 2013	(d) 2014
	line 7				130,400.
2	Undistributed income, if any, as of the end of 2014		· · · · · · · · · · · · · · · · · · ·		
	Enter amount for 2013 only				
	Total for pnor years 20_12_,20_11_,20_10				——————————————————————————————————————
3	Excess distributions carryover, if any, to 2014				
	1				
b	From 2010				
C	From 2011				
d					
	From 2013				
	Total of lines 3a through e				
4	Qualifying distributions for 2014 from Part XII,				
	line 4 🕨 \$				
а	Applied to 2013, but not more than line 2a				
b	Applied to undistributed income of prior years (Election required - see instructions)				
С	Treated as distributions out of corpus (Election required - see instructions)				
d	Applied to 2014 distributable amount				
е	Remaining amount distributed out of corpus , ,				
5	Excess distributions carryover applied to 2014 (If an amount appears in column (d), the same amount must be shown in column (a))				
6	Enter the net total of each column as indicated below:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5				<u> </u>
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 2013 Subtract line 4a from line 2a Taxable amount - see instructions				
f	Undistributed income for 2014 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2015				130,400.
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 2009 not applied on line 5 or line 7 (see instructions)				
9	Excess distributions carryover to 2015.				
3	Subtract lines 7 and 8 from line 6a	C			
10	Analysis of line 9			<u> </u>	
	Excess from 2010		}		
	Excess from 2011				
	Excess from 2012				
	d Excess from 2013	1			
	Excess from 2014				

	990-PF (2014)		MILY FOUNDATION			-1426743 Page 10
			s (see instructions ar			NOT APPLICABLE
1 a	If the foundation has foundation, and the rulin	received a ruling or og is effective for 2014, e	letermination letter that inter the date of the ruling	it is a private oper	ating	
b	Check box to indicate v	whether the foundation	is a private operating f	oundation described in	section 4942	(J)(3) or 4942(J)(5)
		Tax year		Prior 3 years		0/(0/ 0: 10 12()/(0/
2 a	Enter the lesser of the ad- justed net income from Part	(a) 2014	(b) 2013	(c) 2012	(d) 2011	(e) Total
	I or the minimum investment		· · · · · · · · · · · · · · · · · · ·	<u> </u>	(4) 2511	
	return from Part X for each year listed					
h	85% of line 2a	 			 	
				-	 	
L	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				-	<u> </u>
٠	directly for active conduct of					
	exempt activities Subtract line					
3	2d from line 2c Complete 3a, b or c for the				 	
	alternative test relied upon					
а	"Assets' alternative test - enter					
	 Value of all assets Value of assets qualifying 		-	· - · · · · · · · · · · · · · · · · · · ·		ļ
	under section					
_	4942(j)(3)(B)(i)					
D	"Endowment" alternative test- enter 2/3 of minimum invest-		:			
	ment return shown in Part X,					
	line 6 for each year listed			·		
С	"Support" alternative test - enter		ĺ			
	 Total support other than gross investment income 					
	(interest dividends, rents,					
	payments on securities loans (section 512(a)(5)),					
	or royalties)					
	(2) Support from general public and 5 or more					
	exempt organizations as					
	provided in section 4942 (j)(3)(B)(iii)					
	(3) Largest amount of sup- port from an exempt					
	organization					
	(4) Gross investment income		ļ			
Pa	rt XV Suppleme	ntary Information (Complete this part	only if the foun	dation had \$5,000	or more in assets
	<u> </u>	e during the year - s				
'_	Information Regardin					
а	before the close of an	the foundation who vitax year (but only if t	nave contributed mor hey have contributed r	e than 2% of the tol	tal contributions rece See section 507(d)(2)	eived by the foundation
		y tan year (but only if t	ney have contributed i	note than \$5,000) (c	see section 507(d)(2)	,
	JIM BERGES					
b	 List any managers of ownership of a partne 	the foundation who rship or other entity) c	own 10% or more o of which the foundation	f the stock of a cor has a 10% or greate	poration (or an equa er interest	ally large portion of the
				_		
_	N/A					······
2			t, Gift, Loan, Scholarsh	• •		
	Check here ▶ if	the foundation only	makes contributions	to preselected cha	ritable organizations	and does not accep
	unsolicited requests t	for funds. If the found	dation makes gifts, gra	ants, etc (see instru	ctions) to individuals	or organizations under
	other conditions, com	·				
а	The name, address, a	and telephone number	or e-mail address of t	he person to whom a	pplications should be a	addressed
	ATCH 11					
b	The form in which app	olications should be su	ibmitted and information	on and materials they	y should include	
	ATCH 12					
	: Any submission dead	lines				
	,	······································				
		ION DEADLINES				
d	Any restrictions or I	imitations on awards	s, such as by geogra	phical areas, charit	able fields, kinds of	institutions, or other
	tactors					
JSA	NO					5 000 BE (201)

Part XV Supplementary Information (continued)

Page 11

Recipient Name and address (home or business)	If recipient is an individual,	Equiposition	uture Payment	
Name and address (home or husiness)	show any relationship to any foundation manager	status of	Purpose of grant or contribution	Amount
a Paid during the year	or substantial contributor	recipient		
a Faid during the year				
	}			
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Total	 		▶ 3a	
b Approved for future payment				
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		-	1	1
			1	
	1			
Takal	1		<u> </u>	
Total	 	<u></u>	<u> ▶ 31</u>	D

JSA 4E1491 1 000

r gross amounts unless otherwise indicated	Unrela	ated business income	Excluded by	section 512, 513, or 514	(e)
Program service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income
· *		·			(See instructions)
D					
					
, 					
					
Fees and contracts from government agencies			-		
Membership dues and assessments					
nterest on savings and temporary cash investments			14	6.	-
Dividends and interest from securities			14	58,260.	
let rental income or (loss) from real estate					
Debt-financed property					
Not debt-financed property					
let rental income or (loss) from personal property					
Other investment income			18	4,519.	
Gain or (loss) from sales of assets other than inventory			18	659,156.	
let income or (loss) from special events					
Gross profit or (loss) from sales of inventory					
Other revenue a					
)					
·					
					
·					
Subtotal Add columns (b), (d), and (e) Fotal Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculated the columns (b).	ulations) to the Ad	ccomplishment of l	Exempt Pur	ooses	721,9
Subtotal Add columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculated and the columns (b). Relationship of Activities	ulations) to the Ac	ccomplishment of l	Exempt Puri	ooses (e) of Part XVI-A contrib	721, 9
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Subtotal Add columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculated a substitution of activities. Relationship of Activities. Explain below how each activities.	ulations) to the Ac	ccomplishment of l	Exempt Puri	ooses (e) of Part XVI-A contrib	721,9

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

	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							l .	Yes	No			
	organiz												
			porting foundati										.,,
	(1) Cash									X			
			• • • • • • • • •	• • • • • •	• • • • • • •	• • • • • •	• • • • •		• • • •	• • • • •	1a(2)		_^
		ransactions	a noncharitable	o overnt era	onizotion						45.44		X
	(1) Sak	chases of asse	a noncharitable ets from a nonc	baritable eve	mpt organizat		• • • • •			• • • • • •	10(1)		X
	(2) Pur	ital of facilities	, equipment, or	other assets	mpi organizat	юп			• • • •	• • • • • •	10(2)		X
	(4) Rei	mhursement a	rrangements	other assets		• • • • • •				• • • • • •	10(3)		X
	(5) Loa	ins or loan quai	rantees	• • • • • •						• • • • • •	15(5)		X
	(6) Per	formance of se	ervices or mem	bership or fi		citations	• • • • •				15(5)	 	X
С	Sharing	of facilities, e	quipment, maili	ina lists, othe	er assets, or p	aid employe	ees				10		X
d	If the a	answer to any	of the above	ıs "Yes." cor	nolete the fo	llowing sc	nedule Co	olumn (b) si	nould a	wavs show	v the	faır n	
	value o	of the goods, o	ther assets, or	services giv	en by the re	porting fou	ndation I	f the founda	ation re	ceived less	than	fair n	narket
			ion or sharing a										
(a) Li	ne no	(b) Amount involve	ved (c) Na	me of noncharit	able exempt orga	nization	(d) Descr	uption of transfe	rs, transa	ctions, and sha	nng am	angeme	ents
		N/A					N/A						
						"							
				·····						_			
							_						
												_	
										_			
			<u>. </u>						-				
2a			ectly or indirec								П,	. [₹ No
			501(c) of the Co		an section 50	1(c)(3)) or	in section	52/7			י נ	res L	7] No
<u>D</u>	it Yes		e following sche	eaule	(b) Tunn of a				->	otion of relation		_	
(a) Name of organization					(b) Type of o	iganization			c) Descrip	otion of relation	isinp		
							-						
			-		·								-
				-			-	·					
		. , , , , , , , , , , , , , , , , , , ,											
	Unde	r penalties of perjury	declare that I have	ve examined this	return, including a	ccompanying so	hedules and	statements, and t	o the best	of my knowled	dge and	belief,	it is true
O:	1	ct, and complete Deal	ération of preparer (oth	ner than taxpayer) i	s based on all inform	nation of which	oreparer has ar	ny knowledge					
Sig		Val	~		10/30	115					RS disci preparer		
Her	e Sigi	nature of officer or	Trustee		Date	 	Title			(see instruction	` _	XYes	No
		V			^					<u> </u>		=	
		Print/Type prepa	arer's name	P	ep irer Signatur	4.4.4		Date	C	heckif	PTIN		
Pai		REBECCA S	WEAVER	L	(a w		-	10/23/2019	-	elf-employed	P00	9954	83
Pre	parer	Firm's name	▶ PRICEWAT	ERHOUSEC	OOPERS LL	P			Firm's E	IN ▶13-4			
Use	Only	Firm's address	▶ 800 MARK	ET STREE	Γ		٠						-
			ST. LOUI	S, MO			631	.01	Phone n	o 314-2	206-8	3500	
										F	om 90	10-PI	(2014

Schedule B

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

Department of the Treasury
Internal Revenue Service Name of the organization

Schedule of Contributors

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.

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

OMB No 1545-0047

BERGES FAMILY FOUNDATI	Limployer identification number					
	47-1426743					
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 for	undation				
	527 political organization					
Form 990-PF	X 501(c)(3) exempt private foundation					
	4947(a)(1) nonexempt charitable trust treated as a private founda	ition				
	501(c)(3) taxable private foundation					
	vered by the General Rule or a Special Rule . (8), or (10) organization can check boxes for both the General Rule and a	Special Rule See				
General Rule						
or more (in money or	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						
regulations under sec 13, 16a, or 16b, and t	escribed in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 tions 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 that received from any one contributor, during the year, total contribution the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1	or 990-EZ), Part II, line s of the greater of (1)				
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 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						
990-EZ, or 990-PF), but it must	not covered by the General Rule and/or the Special Rules does not file Sanswer "No" on Part IV, line 2, of its Form 990, or check the box on line certify that it does not meet the filing requirements of Schedule B (Form 99).	H of its Form 990-EZ or on its				

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) (2014)

Employer identification number 47-1426743

Part I	Contributors (see instructions) Use duplicate copies of P	art I if additional space is need	ded
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1_	JAMES G BERGES REVOCABLE TRUST 255 ISLAND CREEK DRIVE VERO BEACH, FL 32963	\$3,299,962.	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2_	JAMES G BERGES 255 ISLAND CREEK DRIVE VERO BEACH, FL 32963	- - \$7,145,915.	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3-	BERGES CHARITABLE LEAD ANNUITY TRUST 255 ISLAND CREEK DRIVE VERO BEACH, FL 32963	- \$440,716.	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		- \$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		- \$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)

Name of organization BERGES FAMILY FOUNDATION

Employer identification number 47-1426743

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
1	STOCK		
		\$3,299,962.	_12/08/2014
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		œ.	
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	

Schedule B (Form 990, 990-EZ, or 990-PF) (2014) Page 4 Name of organization BERGES FAMILY FOUNDATION Employer identification number 47-1426743 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 (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (d) Description of how gift is held (c) Use of gift Part I

(e) Transfer of gift

Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee				