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### **Return of Private Foundation** or Section 4947(a)(1) Trust Treated as Private Foundation

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OMB No 1545-0052

2015

Department of the Treasury Internal Revenue Service ► Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf. Open to Rublic Inspection For calendar year 2015, or tax year beginning 2015, and ending Employer identification number THE STEFANY AND SIMON BERGSON FOUNDATION 13-4077237 PO BOX 695 В Telephone number (see instructions) 516 504-4350 PALISADES, NY 10964 C If exemption application is pending, check here Check all that apply: 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 Address change Name change here and attach computation X Section 501(c)(3) exempt private foundation H Check type of organization: Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation If private foundation status was terminated under section 507(b)(1)(A), check here Accounting method: X Cash Fair market value of all assets at end of year (from Part II, column (c), line 16) Other (specify) If the foundation is in a 60-month termination **►** \$ under section 507(b)(1)(B), check here. 34,203. (Part I, column (d) must be on cash basis.) Partil Analysis of Revenue and (a) Revenue and (d) Disbursements (b) Net investment (c) Adjusted net Expenses (The total of amounts in expenses per books income ıncome for charitable columns (b), (c), and (d) may not neces-sarily equal the amounts in column (a) purposes (cash basis only) (see instructions).) 123,458 Contributions, gifts, grants, etc, received (attach schedule). 2 Ck ► if the foundation is not required to attach Sch B Interest on savings and temporary cash investments . . . Dividends and interest from securities. . b Net rental income or (loss) 6 a Net gain or (loss) from sale of assets not on line 10 REVENU **b** Gross sales price for all assets on line 6a. . . Capital gain net income (from Part IV, line 2). Net short-term capital gain. Income modifications 10 a Gross sales less returns and allowances . . . **b** Less. Cost of C Gross profit or (loss) (attach schedule) . Other income (attach schedule) Total. Add lines 1 through 11.... 12 0 13 Compensation of officers, directors, trustees, etc. . Other employee salaries and wages . . . . 14 Pension plans, employee benefits . 16a Legal fees (attach schedule) ... ADM-N-STRAT b Accounting fees (attach sch) . .SEE. .ST . 1 13,887 694 13,193 C Other prof. fees (attach sch) ...... OPERATING 17 Interest 18 Taxes (attach schedule)(see instrs). 19 Depreciation (attach schedule) and depletion 20 Occupancy. Travel, conferences, and meetings . . . 21 Printing and publications 23 Other expenses (attach schedule) SEE STATEMENT 2 200. 200. 24 Total operating and administrative expenses, Add lines 13 through 23 694 14,087 13,393 PART, XV 25 Contributions, gifts, grants paid . 195,011 195,011

209,098

-85,640

C Adjusted net income (if negative, enter -0-). BAA For Paperwork Reduction Act Notice, see instructions.

**b** Net investment income (if negative, enter -0-)

Total expenses and disbursements. 

Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements. . .

26

TEFA0504L 12/04/15

694

0.

Form 990-PF (2015)

208,404.

0

0.



Par	âIII	Balance Sheets	Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	Beginning of year		of year
<u> </u>	ow,		<u></u>	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1		t-bearing			
	2	Savings and tempor	rary cash investments	97,476.	11,836	11,836.
	3	Accounts receivable				
		Less: allowance for	doubtful accounts			
	4	Pledges receivable.		[		
	1	Less: allowance for	doubtful accounts ►			
	5	Grants receivable				
	6	Receivables due from official disqualified persons (atta	cers, directors, trustees, and other ch schedule) (see instructions)			
	7	Other notes and loans rec			The second secon	
A	`	Less: allowance for				
S	8		or use		-	
Ĕ	9		nd deferred charges		<del>-</del> -	
ASSETS	1 -		and state government			<del>-</del>
3	'0'	obligations (attach s	chedule)			
	1	b Investments — corporate	stock (attach schedule)			
		c Investments - corporate	bonds (attach schedule)			
	11	Investments - land, equipment: basis .	buildings, and			, , , , , , , , , , , , , , , , , , ,
		Less: accumulated deprec	viation •			
	12	Investments morte	gage loans	-		
	13		(attach schedule)			
	14		equipment: basis >	. ,		3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3
	'	Less: accumulated deprec (attach schedule)	ration — — — — — — — — — — — — — — — — — — —			
	15	•	be SEE STATEMENT 3	22,367.	22,367	. 22,367.
		Total assets (to be o	completed by all filers =	22,301.	22,301	. 22,307.
		see the instructions.	Also, see page 1, item I)	119,843.	34,203	. 34,203.
Ļ	17		nd accrued expenses			4
Å	18	Grants payable				
A B	19	Deferred revenue				
Ľ	20	Loans from officers, direct	tors, trustees, & other disqualified persons .			4 × § 8 · 8
Ī	21	Mortgages and other notes	s payable (attach schedule)			. , , , , ,
Ī	22	Other liabilities (des	cribe)			
E S	23	Total liabilities (add	lines 17 through 22)	0.	0	
		Foundations that for and complete lines	llow SFAS 117, check here X 24 through 26 and lines 30 and 31.			
<u>N</u> F	24			119,843.	34,203	•
N F E U T N	25	•	ed [			
D	26		ed	I	· —	
A B A L A N		Foundations that do and complete lines 2	not follow SFAS 117, check here > 27 through 31.			
ĚĹ	27	Capital stock, trust p	orincipal, or current funds			
ŚÑ	28	Paid-in or capital surplus,	or land, bldg., and equipment fund			
С	29	Retained earnings, accumi	ulated income, endowment, or other funds			
O Ĕ R S	30	Total net assets or f	und balances (see instructions)	119,843.	34,203	
	31	Total liabilities and	net assets/fund balances	119,843.	34,203	
Para			ges in Net Assets or Fund Balance		21,200	
	Total	net assets or fund ba	alances at beginning of year - Part II, coluing on prior year's return).	mn (a) line 30 (must an	ree with	110.040
•						
		r amount from Part I,				00/0101
		increases not included in li			3	<del></del>
					··· · · · · <u>  4</u>	0.7,200.
5	Decrea	ases not included in line 2 (	alances at end of year (line 4 minus line 5)	- Port II column (h) III	5	
6	ıotal	net assets or fund ba	mances at end of year (line 4 minus line 5)	- rart II, column (b), lir	ne 30 <b>6</b>	34,203.

(a) List and describ	te the kind(s) of property sold (e.g., use; or common stock, 200 shares M	real estate.	(b) How acquired P — Purchase	(C) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )
	se, or common stock, 200 shares w	LC Company)	D — Donation	(ino , day, yr )	(no , day, yr )
1a N/A			<u>-</u>		
<u>b</u>			<del></del>	<del>                                     </del>	
d				<del></del>	-
e				<del> </del>	
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other bas plus expense of sale		(h) Gain oi (e) plus (f) n	
a					
b					
<u>c</u>					
d					
Complete only for accets sho	wing gain in column (h) and owned	by the foundation on 12/21/6	-		<del></del>
(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		<b>(I) G</b> ains (Col gain minus col. (k), l nan -0-) <b>o</b> r Losses (f	out not less
a					
b					
c					
d					
e				·	
2 Capital gain net income or (no	et capital loss) TIf (loss), en	enter in Part I, line 7 ter -0- in Part I, line 7	2		
3 Net short-term capital gain or	(loss) as defined in sections 1222(5	5) and (6):			
If gain, also enter in Part I, lir in Part I, line 8	ne 8, column (c) (see instructions). I	f (loss), enter -0-	3		
Part V Qualification Unde	er Section 4940(e) for Reduce	ed Tax on Net Investme	ent Income		
If 'Yes,' the foundation does not qu	ection 4942 tax on the distributable a alify under section 4940(e). Do not o	complete this part.		Yes	X No
1 Enter the appropriate amount in	each column for each year; see the in	structions before making any e	entries		
Base period years Calendar year (or tax year beginning in)	Adjusted qualifying distributions	Net value of noncharitable-use asse	ets (col	(d) Distribution . (b) divided by	
2014	546,773.	203	,105.		2.692071
2013	345,937.		,007.		0.833569
2012	589, 555.		, 425.		1.562045
2011 2010	370,501.		,291.		0.726058
2010	371,473.	300	,845.	Τ	1.234765
2 Total of line 1, column (d).			. 2	-	7.048508
3 Average distribution ratio for t number of years the foundation	he 5-year base period — divide the in has been in existence if less than	total on line 2 by 5, or by the	e <u>3</u>		1.409702
4 Enter the net value of noncha	ritable-use assets for 2015 from Par	t X, line 5	4		104,535.
5 Multiply line 4 by line 3			5		147,363.
6 Enter 1% of net investment in	come (1% of Part I, line 27b)		6		
7 Add lines 5 and 6			7		147,363.
	rom Part XII, line 4				208,404.
If line 8 is equal to or greater that Part VI instructions.	an line 7, check the box in Part VI, line	1b, and complete that part us	ıng a 1% tax ı	ate. See the	

Pa	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see	instr	uction	s)		
1.	Exempt operating foundations described in section 4940(d)(2), check here .   and enter 'N/A' on line 1.	io ir	» «		<b>∳</b> . ₹	*
	Date of ruling or determination letter: (attach copy of letter if necessary – see instrs)					
I	b Domestic foundations that meet the section 4940(e) requirements in Part V,	1				0.
	check here. ► X and enter 1% of Part I, line 27b	*	7	:		
•	c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b)	, ,	* 8	. *	/ *	
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2_				Ο.
3	Add lines 1 and 2	3				0.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) .	4				0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0	5				0.
6	Credits/Payments:				- /	
i	a 2015 estimated tax pmts and 2014 overpayment credited to 2015	,				
1	Exempt foreign organizations — tax withheld at source			, a i		4 8
•	c Tax paid with application for extension of time to file (Form 8868) 6 c	· · · · · · · · · · · · · · · · · · ·	- 4		\$ <b>%</b>	4
	d Backup withholding erroneously withheld	-s> -8>			* 4	*
7	Total credits and payments. Add lines 6a through 6d	7		•		0.
8	Enter any <b>penalty</b> for underpayment of estimated tax. Check here  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				0.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid.	10				
11	Enter the amount of line 10 to be: Credited to 2016 estimated tax PRefunded P	11				
Pa	Statements Regarding Activities					
1 a	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?			1 a		No_ X
ŀ	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the definition)?	•••		1 b		X
,	Did the foundation file Form 1120-POL for this year?		ľ	1 c		X
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:	• • • • •			ş •>	A
	(1) On the foundation. ►\$ 0. (2) On foundation managers ►\$		0.	~	g 8. 5	-
•	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers . ► \$ 0.			5 S	5 9 A	
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		. [	2		X
	If 'Yes,' attach a detailed description of the activities.					
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, 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?		··· · }	4 a		X
	olf 'Yes,' has it filed a tax return on Form 990-T for this year?	•	· }	4 b	N/A	
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?			5		<u>X</u>
	If 'Yes,' attach the statement required by General Instruction T.	•	ļ	- S		Ë
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:		ŀ	, ,		
•	By language in the governing instrument, or			ν.		
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict					
_	with the state law remain in the governing instrument?		•••••	6		<u>X</u> _
7	Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, col. (c), and Part XV	• •		7	Х	
88	Enter the states to which the foundation reports or with which it is registered (see instructions)  NY		_			
t	of 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			8 b	Х	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or for calendar year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If 'Yes,' complete	4942 e Part	Ώ(5) XIV	9		X
10	Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names and addresses		. [	10		 Х
BAA	<del></del>		For		<b>PF</b> (201	

POH	1 330-FF (2013) THE STEFANY AND SIMON BERGSON FOUNDATION	13-40//	231		age:
Par	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		х
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified per 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 exempted Website address	on application?.	. 13	X	
14	The books are in care of ► THE TAXPAYER Telephor	e no. ► 914	437 9	400	-
_	Located at PO BOX 695 WOODS ROAD PALISADES NY ZIP+4	10964	<u>.</u> ,-		
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	- 15	N/A		U N/A
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority bank, securities, or other financial account in a foreign country?		16	Yes	No X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If 'Yes,' enter the name of the foreign country			6 : * 3	: 4. &
Par	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
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	) <sub>* i</sub>	ndj19.	*
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	Yes X No	1 1	· · · · · · · · · · · · · · · · · · ·	**
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	Yes X No		<b>?</b>	* * *
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	Yes X No	)	* *	
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?	Yes X No	> * *	* *	
	(6) Agree to pay money or property to a government official? (Exception, Check 'No' if the		* §	· 🖠	<b>è</b> 1
	(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.)	Yes X No	)   * *	* *	e s
t	If any answer is 'Yes' to 1a(1)-(6), did <b>any</b> 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	)?	1 b	» ^ N	/A
	Organizations relying on a current notice regarding disaster assistance check here	► 🗍	***		× 4
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts that were not corrected before the first day of the tax year beginning in 2015?	, ,	. 1c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):			<i>λ</i> -	25 (\$ \$ *
а	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?	Yes X No	,		* *
	If 'Yes,' list the years ► 20 _ , 20 _ , 20 _ , 20		; 2	* *	> 4 > 1
b	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4943 (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942 all years listed, answer 'No' and attach statement — see instructions.)	(a)(2) to	. 2b	, N	 /A
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years			1	
	► 20 _ , 20 _ , 20 _ , 20				
3 a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	Yes X No	o		
ь	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 approve 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.)	ı ed			
			3 Б	N	/A
4 a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	••	4a		Х
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				
B 6 6	the tax year beginning in 2015?		4b	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	X
BAA			Form 990	v-rr (2	ZU15)

orm 990-PF (2015) THE STEFANY AND S				<u> </u>	Page (
Partiviles Statements Regarding Activit		n 4720 May Be Req	uired (continued)		
<ol> <li>5 a During the year did the foundation pay or inci.</li> <li>Carry on propaganda, or otherwise attem</li> </ol>	-	on (section 4945(e))?	Tyes X	No 4	
(2) Influence the outcome of any specific put on, directly or indirectly, any voter registry	_				× ;^
on, directly or indirectly, any voter registr  (3) Provide a grant to an individual for travel			<b>⊢</b> ⊢	No No	
•	•	•			
(4) Provide a grant to an organization other t in section 4945(d)(4)(A)? (see instruction			Yes X	No No	
(5) Provide for any purpose other than religion educational purposes, or for the prevention	ous, charitable, scientific on of cruelty to children	c, literary, or or animals?	···· Yes X	No 🏄	
b If any answer is 'Yes' to 5a(1)-(5), did any of described in Regulations section 53.4945 or in (see instructions)?	the transactions fail to a current notice regard			5 b	N/A
Organizations relying on a current notice rega	ırdıng dısaster assıstanı	ce check here	<b>-</b> [		
c if the answer is 'Yes' to question 5a(4), does tax because it maintained expenditure respon	sibility for the grant? .		N/A. Yes	] No	
If 'Yes,' attach the statement required by Reg		• •		* '	y 52
6a Did the foundation, during the year, receive a on a personal benefit contract?				No III	
<b>b</b> Did the foundation, during the year, pay prem If 'Yes' to 6b, file Form 8870.	iums, directly or indirec	tly, on a personal bene	fit contract? .	бь	X
7 a At any time during the tax year, was the found	dation a narty to a prob	ihited tay shelter transs	action? Dves V	No	×*
b If 'Yes,' did the foundation receive any proces				N/A 7b	
Part VIII Information About Officers, D				,	
and Contractors	,		g, g,		,
1 List all officers, directors, trustees, foundation	on managers and their	compensation (see inst	ructions).		
(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 account, owances
STEFANY BERGSON	TRUSTEE	0.	0.	1	0
PO_BOX_695	5.00				
PALISADES, NY 10964					
SIMON BERGSON	TRUSTEE	0.	0.		0
PO_BOX_695	5.00				
PALISADES, NY 10964					
				-	
	<u> </u>				
2 Compensation of five highest-paid employees (or					
(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 other all	e account, owances
IONE					
				<u> </u>	<del> </del>
otal number of other employees paid over \$50,000	) <del></del>			,	0

3 Five highest-paid independent contractors for professional services (see i	instructions) If none enter 'NONE '	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE	(b) Type of Service	(c) compensation
YOUE		
otal number of others receiving over \$50,000 for professional services	<u></u>	_
Part IXA Summary of Direct Charitable Activities		
at the foundation's four largest direct charitable estimates during the tay year. Include relevant statistic	and unformation quality as the number of	_
ist the foundation's four largest direct charitable activities during the tax year. Include relevant statistic rganizations and other beneficiaries served, conferences convened, research papers produced, etc.	cal information such as the number of	Expenses
1 N/A		
27		
2		
3		
		<u> </u>
4		
Summary of Program-Related Investments (see Instru	ıctions)	
		A
Describe the two largest program-related investments made by the foundation during the	ie tax year on lines 1 and 2.	Amount
1		
<u>N/A</u>		
2		
All other program-related investments. See instructions.		
3	ļ	
<b>*</b>		
Total. Add lines 1 through 3		0

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	see instructions.)		
1 a	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc, purposes:  Average monthly fair market value of securities	1 a	
b	Average of monthly cash balances	1 b	83,760.
C	Fair market value of all other assets (see instructions)	1 c	22,367.
ď	Total (add lines 1a, b, and c)	1 d	106,127.
е	Reduction claimed for blockage or other factors reported on lines 1a and 1c	A1 3	
	(attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	106,127.
4	Cash deemed held for charitable activities. Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	1,592.
	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	104,535.
	Minimum investment return. Enter 5% of line 5	6	5,227.
Part	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private opera and certain foreign organizations check here ► ☐ and do not complete this part.)	ting fou	indations
1	Minimum investment return from Part X, line 6	1	5,227.
	Tax on investment income for 2015 from Part VI, line 5	500 X	5,227.
	Income tax for 2015. (This does not include the tax from Part VI.) 2 b		
	Add lines 2a and 2b	2 c	
	Distributable amount before adjustments. Subtract line 2c from line 1	3	5,227.
	Recoveries of amounts treated as qualifying distributions	4	5,221.
	Add lines 3 and 4	5	5,227.
	Deduction from distributable amount (see instructions)	1 - 1	5,221.
	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	7	5,227.
	Qualifying Distributions (see instructions)	<u> </u>	5,221.
1 4	Amounts paid (including administrative expenses) to accomplish charitable, etc, purposes:  Expenses, contributions, gifts, etc — total from Part I, column (d), line 26.		
		1 a	208,404.
	Program-related investments — total from Part IX-B	1 b	
	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc, purposes	2	
3 / a :	Amounts set aside for specific charitable projects that satisfy the: Suitability test (prior IRS approval required)	3 a	
<b>b</b> (	Cash distribution test (attach the required schedule)	3 b	
4 (	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	208,404.
	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	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	208,404.
ا	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the four qualifies for the section 4940(e) reduction of tax in those years.	ndation	
BAA		- 1	Form <b>990-PF</b> (2015)

## Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2014	(c) 2014	<b>(d)</b> 2015
1 Distributable amount for 2015 from Part XI, line 7				F 227
2 Undistributed income, if any, as of the end of 2015:				5,227.
a Enter amount for 2014 only			0.	
<b>b</b> Total for prior years: 20 , 20 , 20		0.	· ·	· · · · · · · · · · · · · · · · · · ·
3 Excess distributions carryover, if any, to 2015:				
a From 2010 . 356, 431.				4
<b>b</b> From 2011 344, 986.				
c From 2012 570, 684.				
<b>d</b> From 2013 325, 187.				*
e From 2014 536, 618.				
f Total of lines 3a through e	2,133,906.			
4 Qualifying distributions for 2015 from Part				
XII, line 4: ► \$ 208, 404.		,		у [
a Applied to 2014, but not more than line 2a .		* *	0.	s *
<b>b</b> Applied to undistributed income of prior years	¢ 3 "		> * *	
(Election required – see instructions).	* , , , ,	0.	* *	*
c Treated as distributions out of corpus (Election required – see instructions).	0	* *	<u> </u>	* ,
d Applied to 2015 distributable amount	0.	*	. ,	F 227
e Remaining amount distributed out of corpus	203,177.		· *	5,227.
5 Excess distributions carryover applied to 2015	203,177.		***************************************	
(If an amount appears in column (d), the	· · · · · · · · · · · · · · · · · · ·			0.
same amount must be shown ın column (a).)	* > ~ *	,		*
	* `	,	, ,	<
6 Enter the net total of each column as indicated below:		4	,	pr 3.
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5 .	2,337,083.	* ~ ,	* *	* * * *
	2,331,003.			<u> </u>
b Prior years' undistributed income. Subtract line 4b from line 2b		0.		,
c Enter the amount of prior years' undistributed			* * * * * * * * * * * * * * * * * * * *	
income for which a notice of deficiency has been issued, or on which the section 4942(a)	* * *		* /	*
tax has been previously assessed	· *· /	0.	*	*
	,			,
d Subtract line 6c from line 6b. Taxable amount — see instructions		0.		
e Undistributed income for 2014. Subtract line 4a from		y		
line 2a. Taxable amount — see instructions			0.	
	<u> </u>			
f Undistributed income for 2015. Subtract lines 4d and 5 from line 1. This amount must be				
distributed in 2016			i	0.
7 Amounts treated as distributions out of			· · · · · · · · · · · · · · · · · · ·	
corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required — see instructions)	0.			
8 Excess distributions carryover from 2010 not				
applied on line 5 or line 7 (see instructions)	356,431.			
9 Excess distributions carryover to 2016.				
Subtract lines 7 and 8 from line 6a	1,980,652.			
10 Analysis of line 9:				
a Excess from 2011				
b Excess from 2012. 570, 684.				
c Excess from 2013 325, 187.				
d Excess from 2014				
e Excess from 2015 203, 177.				

Form 990-PF (2015) THE STEFANY AND S	SIMON BERGSO	N FOUNDATION	1	13-407723	7 Page 10
Part-XIV: Private Operating Foundat					N/A
1 a If the foundation has received a ruling or determined is effective for 2015, enter the date of the	ruling			. <u></u>	
<b>b</b> Check box to indicate whether the foundation	<u>_</u>	erating foundation of		4942(j)(3) or	4942(j)(5)
2a Enter the lesser of the adjusted net income from Part I or the minimum	Tax year		Prior 3 years		
investment return from Part X for each year listed	(a) 2015	<b>(b)</b> 2014	(c) 2013	(d) 2012	(e) Total
<b>b</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		ļ	ļ		<del></del>
(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).					· · · <u>-</u> · · ·
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					
Part XV Supplementary Information ( assets at any time during the	(Complete this e year — see in	part only if the structions.)	foundation had	\$5,000 or more	in
Information Regarding Foundation Manages List any managers of the foundation who have close of any tax year (but only if they have SEE STATEMENT 4	contributed more t	han 2% of the total c than \$5,000). (See	ontributions received section 507(d)(2).)	by the foundation befo	ore the
<b>b</b> List any managers of the foundation who own a partnership or other entity) of which the financial NONE	10% or more of the foundation has a 1	stock of a corporation 0% or greater inter	on (or an equally large rest.	portion of the owners	ship of
2 Information Regarding Contribution, Gran Check here ► X if the foundation only maker requests for funds. If the foundation makes complete items 2a, b, c, and d.	kes contributions to gifts, grants, etc	preselected charitab (see instructions) to	le organizations and o o individuals or orga	nizations under othe	icited er conditions,
a The name, address, and telephone number or	e-mail address of t	he person to whom a	ipplications should be	addressed:	
<b>b</b> The form in which applications should be s	ubmitted and info	rmation and materia	als they should inclu	de:	
c Any submission deadlines:					
d Any restrictions or limitations on awards, so	uch as by geograp	phical areas, charita	able fields, kinds of i	nstitutions, or other	factors:
BAA		EA0310L 10/13/15		F	orm <b>990-PF</b> (2015)

Page 11

Name and address (home or business)  Name and address (home or business)  SCHEDULE ATTACHED  Total  Total  D Approved for future payment  If recognit is an individual production analyze or statistical recognition.  SOI (C) 3 OPERATING EXPENSES  195, 01  Total  D Approved for future payment  Total  D Approved for future payment	3° Grants and Contributions Paid During the Yo	ear or Approved for Fut	ure Paymer	1t	
Total.  501(C)3 OPERATING EXPENSES  195,01	Recipient	If recipient is an individual, show any relationship to any foundation manager or	Foundation status of	Purpose of grant or	Amount
Total.  501(C)3 OPERATING EXPENSES  195,01	Name and address (home or business)	substantial contributor	recipient		
Total	a Paid during the year				
Total. > 3a 195,01 b Approved for future payment			501 (C) 3	OPERATING EXPENSES	195,011.
b Approved for future payment	T-1-1	<u> </u>		L	105.011
b Approved for future payment			• • • • •	<b>- 3a</b>	195,011.
Total ▶ 3b				► ah	

### Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.	Unrelat	ed business income	Exclude	d by section 512, 513, or 514	(e)
Program service revenue:	(a) Business code	(b) Amount	(c) Exclu- sion code	(d) Amount	Related or exempt function income (See instructions.)
a			]		
b					
С			ļ		
d			ļ		
e					
1					
g Fees and contracts from government agencies	ļ		ļ		
2 Membership dues and assessments			ļ		
3 Interest on savings and temporary cash investments 4 Dividends and interest from securities			<u> </u>		
5 Net rental income or (loss) from real estate:	2000 PR 00 10 2		& 807 · 500		SKAR SK V BOOK OKK AKK
a Debt-financed property	**************************************	3.00 \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	1000 X t. A.	\$\text{\$\frac{1}{2}\cdot \text{\$\frac{1}{2}\cdot \text{\$\frac{1}\end{1}\	\$50 B 100 B 10 10 10 10 10 10 10 10 10 10 10 10 10
<b>b</b> Not debt-financed property	<del></del>				
6 Net rental income or (loss) from personal property	· · · · ·				
7 Other investment income.					
8 Gain or (loss) from sales of assets other than inventory		- · · · · · · · · · · · · · · · · · ·			
9 Net income or (loss) from special events .			<del></del>		
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:	300000000000000000000000000000000000000	3.5	£1696	Z*	
a					
b					
С					
d					
					<del> </del>
e	1				
Subtotal. Add columns (b), (d), and (e)			-		
Subtotal. Add columns (b), (d), and (e)			**************************************	. 13	0.
Subtotal. Add columns (b), (d), and (e)			- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	. 13	0.
Subtotal. Add columns (b), (d), and (e)	ons.)				0.
Subtotal. Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e).  See worksheet in line 13 instructions to verify calculate  Part XVI-B Relationship of Activities to the	ons.)	ishment of Exemp	t Purp	oses	
Subtotal. Add columns (b), (d), and (e)	ons.)	ishment of Exemp	t Purp	oses	
Subtotal. Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e).  See worksheet in line 13 instructions to verify calculate  Part XVI-B Relationship of Activities to the	ons.)	ishment of Exemp	t Purp	oses	
Subtotal. Add columns (b), (d), and (e)  13 Total. Add line 12, columns (b), (d), and (e).  See worksheet in line 13 instructions to verify calculate  Part XVI-B Relationship of Activities to the  Line No. Explain below how each activity for which is accomplishment of the foundation's exemption.	ons.)	ishment of Exemp	t Purp	oses	
Subtotal. Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e).  See worksheet in line 13 instructions to verify calculate  Part XVI-B Relationship of Activities to the  Line No. Explain below how each activity for which is accomplishment of the foundation's exemption.	ons.)	ishment of Exemp	t Purp	oses	
Subtotal. Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e).  See worksheet in line 13 instructions to verify calculate  Part XVI-B Relationship of Activities to the  Line No. Explain below how each activity for which is accomplishment of the foundation's exemption.	ons.)	ishment of Exemp	t Purp	oses	
Subtotal. Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e).  See worksheet in line 13 instructions to verify calculate  Part XVI-B Relationship of Activities to the  Line No. Explain below how each activity for which is accomplishment of the foundation's exemption.	ons.)	ishment of Exemp	t Purp	oses	
Subtotal. Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e).  See worksheet in line 13 instructions to verify calculate  Part XVI-B Relationship of Activities to the  Line No. Explain below how each activity for which is accomplishment of the foundation's exemption.	ons.)	ishment of Exemp	t Purp	oses	
Subtotal. Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e).  See worksheet in line 13 instructions to verify calculate  Part XVI-B Relationship of Activities to the  Line No. Explain below how each activity for which is accomplishment of the foundation's exemption.	ons.)	ishment of Exemp	t Purp	oses	
Subtotal. Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e).  See worksheet in line 13 instructions to verify calculate  Part XVI-B Relationship of Activities to the  Line No. Explain below how each activity for which is accomplishment of the foundation's exemption.	ons.)	ishment of Exemp	t Purp	oses	
Subtotal. Add columns (b), (d), and (e)  13 Total. Add line 12, columns (b), (d), and (e).  See worksheet in line 13 instructions to verify calculate  Part XVI-B Relationship of Activities to the  Line No. Explain below how each activity for which is accomplishment of the foundation's exemption.	ons.)	ishment of Exemp	t Purp	oses	
Subtotal. Add columns (b), (d), and (e)  13 Total. Add line 12, columns (b), (d), and (e).  See worksheet in line 13 instructions to verify calculate  Part XVI-B Relationship of Activities to the  Line No. Explain below how each activity for which is accomplishment of the foundation's exemption.	ons.)	ishment of Exemp	t Purp	oses	
Subtotal. Add columns (b), (d), and (e)  13 Total. Add line 12, columns (b), (d), and (e).  See worksheet in line 13 instructions to verify calculate  Part XVI-B Relationship of Activities to the  Line No. Explain below how each activity for which is accomplishment of the foundation's exemption.	ons.)	ishment of Exemp	t Purp	oses	
Subtotal. Add columns (b), (d), and (e)  13 Total. Add line 12, columns (b), (d), and (e).  See worksheet in line 13 instructions to verify calculate  Part XVI-B Relationship of Activities to the  Line No. Explain below how each activity for which is accomplishment of the foundation's exemption.	ons.)	ishment of Exemp	t Purp	oses	
Subtotal. Add columns (b), (d), and (e)  13 Total. Add line 12, columns (b), (d), and (e).  See worksheet in line 13 instructions to verify calculate  Part XVI-B Relationship of Activities to the  Line No. Explain below how each activity for which is accomplishment of the foundation's exemption.	ons.)	ishment of Exemp	t Purp	oses	
Subtotal. Add columns (b), (d), and (e)  13 Total. Add line 12, columns (b), (d), and (e).  See worksheet in line 13 instructions to verify calculate  Part XVI-B Relationship of Activities to the  Line No. Explain below how each activity for which is accomplishment of the foundation's exemption.	ons.)	ishment of Exemp	t Purp	oses	
Subtotal. Add columns (b), (d), and (e)  13 Total. Add line 12, columns (b), (d), and (e).  See worksheet in line 13 instructions to verify calculate  Part XVI-B Relationship of Activities to the  Line No. Explain below how each activity for which is accomplishment of the foundation's exemption.	ons.)	ishment of Exemp	t Purp	oses	
Subtotal. Add columns (b), (d), and (e)  13 Total. Add line 12, columns (b), (d), and (e).  See worksheet in line 13 instructions to verify calculate  Part XVI-B Relationship of Activities to the  Line No. Explain below how each activity for which is accomplishment of the foundation's exemption.	ons.)	ishment of Exemp	t Purp	oses	
Subtotal. Add columns (b), (d), and (e)  13 Total. Add line 12, columns (b), (d), and (e).  See worksheet in line 13 instructions to verify calculate  Part XVI-B Relationship of Activities to the  Line No. Explain below how each activity for which is accomplishment of the foundation's exemption.	ons.)	ishment of Exemp	t Purp	oses	
Subtotal. Add columns (b), (d), and (e)  13 Total. Add line 12, columns (b), (d), and (e).  See worksheet in line 13 instructions to verify calculate  Part XVI-B Relationship of Activities to the  Line No. Explain below how each activity for which is accomplishment of the foundation's exemption.	ons.)	ishment of Exemp	t Purp	oses	
Subtotal. Add columns (b), (d), and (e)  13 Total. Add line 12, columns (b), (d), and (e).  See worksheet in line 13 instructions to verify calculate  Part XVI-B Relationship of Activities to the  Line No. Explain below how each activity for which is accomplishment of the foundation's exemption.	ons.)	ishment of Exemp	t Purp	oses	
Subtotal. Add columns (b), (d), and (e)  13 Total. Add line 12, columns (b), (d), and (e).  See worksheet in line 13 instructions to verify calculate  Part XVI-B Relationship of Activities to the  Line No. Explain below how each activity for which is accomplishment of the foundation's exemption.	ons.)	ishment of Exemp	t Purp	oses	
Subtotal. Add columns (b), (d), and (e)  13 Total. Add line 12, columns (b), (d), and (e).  See worksheet in line 13 instructions to verify calculate  Part XVI-B Relationship of Activities to the  Line No. Explain below how each activity for which is accomplishment of the foundation's exemption.	ons.)	ishment of Exemp	t Purp	oses	

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

descril relatin a Transf (1) Ca (2) Ot b Other (1) Sa (2) Pu (3) Re (4) Re (5) Lo (6) Pe	bed in section 501(c) g to political organizations from the reporting ash transactions: ales of assets to a noi urchases of assets from the facilities, equipment arrange and or loan guaranteer formance of services.	of the Code (cations? g foundation to ncharitable existence a noncharitable prement, or other ements es	engage in any of the followin other than section 501(c)(3) of a noncharitable exempt orgeneration able exempt organization able exempt organization are assets.	anization of:	s) or in section 5	27, 	1a(1) 1a(2)	X X X X X X X X X X
<b>d</b> If the a	answer to any of the a	above is 'Yes,' rvices given by arrangement, s	complete the following sche the reporting foundation. If the show in column (d) the value	dule. Colum foundation re of the goods	n <b>(b)</b> should alwa	ays show the fair fair market value ii	market value of	<u>~</u>
(a) Line no.	(b) Amount involved	(c) Name	of noncharitable exempt organization	(d)	Description of trans	fers, transactions, and	sharing arrangements	
N/A					·	<u> </u>		
		1					<del></del>	
		<del>                                     </del>		<del></del>				
		+		<del></del>				
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		İ		1				
describ <b>b</b> If 'Yes,	oed in section 501(c) of complete the follow	of the Code (o ing schedule.	d with, or related to, one or mo ther than section 501(c)(3)) o	or in section	527?		. Yes XN	lo
(	a) Name of organizat	ion	<b>(b)</b> Type of organiza	tion	(c)	Description of rel	ationship	
N/A	<u> </u>							
•								
	<del></del>							
	<del></del>		<del></del>					—
			<del></del>					
			<u> </u>				_	
Under	penalties of perjury, I declar	re that I have exam	ined this return, including accompanyii than taxpayer) is based on all informa	ng schedules and	d statements, and to t	he best of my knowledg	e and belief, it is true,	
Sign Here	Almey.	) Beca	18N 15/13/	16 <u> </u>	M&S.	uye	May the IRS discus this return with the preparer shown bel (see instructions)?	low I
	nature of officer or trustele	<i>i</i>	Date		10	<del></del>		No
	Print/Type preparer's nai	me	Preparer's signatur	· dem	Date	Check If	PTIN	
Paid	MICHAEL S GU	JARNTERT	CPA CPA	7	5/11/16	self-employed	P00635129	
				<u> </u>				—
Preparer	· -		ASSOCIATES CPAS LLI	<del>-</del>	<u> </u>	Firm's EIN F 11-3	504904	
Use Only	_		ADWAY STE 100					
	l W	HITE PLAT	NS, NY 10605			Phone no (914	)_437-9400	
BAA					· <del></del>		Form <b>990-PF</b> (20	015)

#### 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, 990-PF) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2015

Employer identification number

THE STEFANY AND SIMON BERGSON	FOUNDATION	13-4077237		
Organization type (check one):				
Filers of:	Section:			
Form 990 or 990-EZ	501(c)( ) (enter number) organization			
	4947(a)(1) nonexempt charitable trust not treated as a	private foundation		
	527 political organization			
Form 990-PF	X 501(c)(3) exempt private foundation			
	4947(a)(1) nonexempt charitable trust treated as a priva	ate foundation		
	501(c)(3) taxable private foundation			
Check if your organization is covered by the General	Rule or a Special Rule.			
Note. Only a section 501(c)(7), (8), or (10) orga	nization can check boxes for both the General Rule and a S	pecial Rule. See instructions.		
General Rule				
X For an organization filing Form 990, 990-EZ	, or 990-PF that received, during the year, contributions totale Parts I and II. See instructions for determining a contribu	aling \$5,000 or more (in money or		
— property) from any one contributor. Complet	e Parts I and II. See instructions for determining a contribu	tor's total contributions.		
Special Rules				
•	(-) (2) (1) - Farm 000 - 000 F7 Had and the 22 1000 and	and Applied March 1984		
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.	erary, or educational		
	(c)(7), (8), or (10) filing Form 990 or 990-EZ that received f			
	religious, charitable, etc., purposes, but no such contribution			
	e total contributions that were received during the year for a ny of the parts unless the <b>General Rule</b> applies to this orga			
	le, etc., contributions totaling \$5,000 or more during the year			
	<u> </u>			
Caution. An organization that is not covered by	the General Rule and/or the Special Rules does not file Schee, 2, of its Form 990; or check the box on line H of its Form	nedule B (Form 990, 990-EZ, or		
Part I, line 2, to certify that it does not meet the	filing requirements of Schedule B (Form 990, 990-EZ, or 99	90-PF).		

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

Schedule	В	(Form	990.	990-EZ.	or 990-PF)	(2015)
Concadio	_	V 01111	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	JJU LL,	01 220 1 1 7	(2010

Page

1 of

1 of Part I

Name of organization

THE STEFANY AND SIMON BERGSON FOUNDATION

Employer Identification number 13-4077237

	ELITATION DERODON TOURDITION		011231
	Contributors (see instructions). Use duplicate copies of Part I if additional space	is needed.	•
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	MANHATTAN BEER DISTRIBUTORS LL 400 WALNUT AVENUE BRONX, NY 10454	\$ <u>123,458.</u>	Person X Payroll  Noncash  (Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$ 	Person Payroll Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution

Person Payroll Noncash

(Complete Part II for noncash contributions.)

Page

1 to

of Part II

Name of organization

BAA

THE STEFANY AND SIMON BERGSON FOUNDATION

<del>1 . . . .</del>

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

13-4077237

Employer identification number

Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed. (b)
Description of noncash property given (d) Date received (a) No. from Part I (c) FMV (or estimate) (see instructions) N/A (a) No. from (b) Description of noncash property given (c) FMV (or estimate) (d) Date received Part I (see instructions) (b) Description of noncash property given (a) No. from (c) FMV (or estimate) (see instructions) (d) Date received Part I (a) No. from (b) Description of noncash property given (c) FMV (or estimate) (d) Date received Part I (see instructions) (a) No. from (b)
Description of noncash property given (c) FMV (or estimate) (see instructions) (d) Date received Part I (d) Date received (a) No. from (b) Description of noncash property given (c) FMV (or estimate) (see instructions) Part I

of Part III

Name of organization
THE STEFANY AND STMON BERGSON FOUNDATION

Employer identification number

THE ST	EFANY AND SIMON BERGSON FOUN	DATION		13-4077237		
Rart III	Exclusively religious, charitable, et	tc., contributions to orga	nizations (	described in section 501(c)(7), (8),		
	or (10) that total more than \$1,000 for the	he year from any one contri	butor. Comple	ete columns (a) through (e) and		
	the following line entry. For organizations co					
	contributions of \$1,000 or less for the year.	(Enter this information once. S	See instruction	ns.) ► \$N/A		
	Use duplicate copies of Part III if additional					
(a) No. from	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held		
Part I	Turpose or give	osc or gin		bescription of non-girk is non-		
	N/A					
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		(e) Transfer of gift		<del>-</del>		
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	Transferee's name, addres	s, and ZIP + 4	Relationship of transferor to transferee			
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(a) No. from	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held		
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		(e) Transfer of gift				
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(a) No. from	(b)	(c) Use of gift		(d) Description of how gift is held		
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	Transferee's name, address, and ZIP + 4 Relationship of transferor to transferor					
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(a) No. from	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held		
No. Irom Part I	Purpose of giπ	Use of gift		Description of now girt is neig		
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		(e)		<del></del>		
	(e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee					
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#### THE STEFANY AND SIMON BERGSON FOUNDATION FORM 990PF 13-4077237 DECEMBER 31, 2015

# STATEMENT 6 PART XV LINE 3 - GRANTS PAID

AMERICAN CANCER SOCIETY	500
ANIMAL MEDICAL CENTER	239
ANTARTIC AND SOUTHERN OCEAN COALITION	500
ATLANTIC THEATRE COMPANY	5,000
AUSCHWITZ JEWISH CENTER FOUNDATION	10,000
BDSRA	500
BIDEAWEE INC	180
BIRTHRIGHT ISRAEL FOUNDATION	1.000
BREAST CANCER RESEARCH FUND	15,000
CENTER FOR SAFETY & CHANGE	360
CHILDREN'S SHAKESPEARE THEATRE	180
COLUMBIA COLLEGE ANNUAL FUND	2,200
DOROT	180
ESPIRIT EVENTS	250
FIGURE SKATING IN HARLEM	300
GIFT OF LIFE BONE MARROW FOUNDATION	1,000
HARLEM RBI	500
HARLEM STAGE	10,000
HOLOCAUST MUSEUM	7,588
HORACE MANN SCHOOL	5,000
INTERNATIONAL RESCUE	180
JCC ROCKLAND	5,400
JEWISH FEDERATION OF ROCKLAND	30,360
JEWISH HOME FOUNDATION OF NORTH JERSEY, INC.	594
LYMPHOMA WALK	540
MAZON	100
MS SOCIETY	250
MS WALK	360
MUSEUM OF JEWISH HERITAGE	2,988
NATIONAL YIDDISH THEATRE	5,000
NORTHWESTERN UNIVERSITY	360
NY FOUNDLING	500
NY POLICE ANCHOR CLUB/CHAPLIN UNIT	150
OHIO STATE UNIV FOUNDATION	144
PALISADES FREE LIBRARY	200
PLAYWRIGHTS HORIZON	2,500
PUBLIC THEATRE ROCKLAND JEWISH FAMILY SERVICE	3,040
ROSE ART FOUNDATION	360
	500
SAY (OUR TIME) SECOND STAGE THEATRE	250
	2,100
ST LOUIS HILLEL TEAM FOR KIDS	250
	500
TEMPLE BETH TORAH THE JACOB S ZWEIG FOUNDATION	36,360
· · · · · · · · · · · · · · · · · · ·	250
THE MOTH	500
THE REFORM TAMPLE OF ROCKLAND	5,868
UJA-FEDERATION OF NEW YORK	180
US FRIENDS OF HOEDSPRUIT ENDANGERED	7,500
WASHINGTON UNIVERSITY	25,000
WORLD VALUES	350
WOUNDED WARRIOR PROJECT	100
ZAMIR CHORAL FOUNDATION	1,800

195,011

2015 **FEDERAL STATEMENTS** PAGE 1 THE STEFANY AND SIMON BERGSON FOUNDATION 13-4077237 **STATEMENT 1** FORM 990-PF, PART I, LINE 16B **ACCOUNTING FEES** (C) (A) (B) NET (D) **EXPENSES** INVESTMENT ADJUSTED CHARITABLE PER BOOKS INCOME NET INCOME **PURPOSES** 69<u>4.</u> <u>13,887.</u> \$ 13,193. 13,193. ACCOUNTING & TAX PREPARATION. TOTAL \$ 694. \$ 13,887. **STATEMENT 2** FORM 990-PF, PART I, LINE 23 OTHER EXPENSES (C) ADJUSTED (A) (B) NET (D) **EXPENSES** INVESTMENT CHARITABLE PER BOOKS INCOME <u>NET INCOME</u> PURPOSES FILING FEES 50. \$ \$ 50. FOUNDATION ADVERTISING 150. 150<u>.</u> TOTAL \$ <u> 200.</u> \$ <u>0.</u> \$ 200. **STATEMENT 3** FORM 990-PF, PART II, LINE 15 OTHER ASSETS FAIR MARKET BOOK VALUE VALUE ART WORK... 22,367. \$ 22,367. \$ 22,367. 22,367. TOTAL \$

STATEMENT 4
FORM 990-PF, PART XV, LINE 1A
FOUNDATION MANAGERS - 2% OR MORE CONTRIBUTORS

STEFANY BERGSON SIMON BERGSON