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Form **990-PF**

Department of the Treasury Internal Revenue Service

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

▶ Do not enter social security numbers on this form as it may be made public. ▶ Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf. OMB No 1545-0052

For cale	ndar year 2015 or tax year beginning		, and ending		
Name o	of foundation			A Employer identificati	on number
STE	NSTROM FOUNDATION			36-335109	9
	and street (or P O box number if mail is not delivered to street	address)	Room/suite	B Telephone number	
	BOX 5866			815-398-2	. \Box
-	town, state or province, country, and ZIP or foreign p LKFORD,IL 61125	ostal code		C If exemption application is	s pending, check here
	k all that apply: Initial return	Initial return of a fo	rmer public charity	D 1. Foreign organizatio	ns, check here
	Final return	Amended return	,		
	Address change	Name change		2. Foreign organizations a check here and attach	computation
	k type of organization: X Section 501(c)(3) ex			E If private foundation s	
		Other taxable private founda		under section 507(b)(
		ng method: X Cash her (specify)	Accrual	F If the foundation is in under section 507(b)(
(<i>Irom</i>	Part II, col. (c), line 16) 0t		pasis.)	under section 507(b)(T)(D), CHECK Here
Part	Analysis of Revenue and Expenses	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements
	(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	expenses per books	income	income	for charitable purposes (cash basis only)
1	Contributions, gifts, grants, etc., received	250,000.		N/A	
2	Check If the foundation is not required to attach Sch. B.				QM2 M22222 4
3	cash investments	2.	2.		STATEMENT 1 STATEMENT 2
4	Dividends and interest from securities Gross rents	13,254.	13,254.		STATEMENT 2
	Net rental income or (loss)		-		
6:	Net gain or (loss) from sale of assets not on line 10	6,984.	***************************************		
- lug	Gross sales price for all assets on line 6a 236, 225.				
Revenue	Capital gain net income (from Part IV, line 2)		6,984.		
8	Net short-term capital gain				
9	Income modifications Gross sales less returns				
10:					
	D Less Cost of goods sold				
11					
12	Total, Add lines 1 through 11	270,240.	20,240.		
13	Compensation of process was trustees, etc Other employee salaries and wages D	0.	0.		0.
14					
ທ 15 ຜູ້ 16:	Pensidroplans, employee benefits MAY 0.5 a. STIME	400.	0.	· · · · · · · · · · · · · · · · · · ·	0.
ens.	Legal RES MAY 25 20 STMT B Accounting fees	690.	0.		0.
ă j	Other professional fees STMD 5	2,525.	2,525.		0.
<u>9</u> 17	Interest UT				
Operating and Administrative Expense 7 5 7 5 7 5 7 5 7 6 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Taxes STMT 6	710.	117.		0.
is 19	Depreciation and depletion				
E 20	Occupancy				
전 21 달 22	Travel, conferences, and meetings Printing and publications				
b 23	Other expenses STMT 7	70.	0.		0.
ii 24	Total operating and administrative	:. =			
per	expenses. Add lines 13 through 23	4,395.	2,642.		0.
25	Contributions, gifts, grants paid	62,926.			62,926.
26	Total expenses and disbursements.	CT 201	0 (40		62.026
-	Add lines 24 and 25	67,321.	2,642.		62,926.
l	Subtract line 26 from line 12: 1 Excess of revenue over expenses and disbursements	202,919.			
	Net investment income (if negative, enter -0-)	202,313.	17,598.		
i	Adjusted net income (if negative, enter -0-)			N/A	

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5 Decreases not included in line 2 (itemize)

6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30

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Part I\	/ C	apital Gains a	and Lo	sses for Tax on Ir	nvestment	Income						
,				nd(s) of property sold (e.g or common stock, 200 sh			P -	ow acc Purch Donat	ase	(c) Date a (mo., da		(d) Date sold (mo., day, yr.)
1a												
<u>b</u> 5	SEE	ATTACHED	STA:	rements								
C		<u>. </u>										
d							-					
_e		1					<u> </u>					
(e)) Gross	sales price	(f) [Depreciation allowed (or allowable)		st or other basis expense of sale					ain or (loss) (f) minus (
a												
b												
C												
d												
е		236,225.				229,24	1.					6,984.
Comp	lete on	ly for assets showin	g gain in	column (h) and owned by	the foundation	on 12/31/69					ol. (h) gaın	
(i) F.	.M.V. a	s of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col. (1) col. (j), if any			COI.	(K), but n Losses (ot less thar (from col. (l	1 -U-) or h))
a				· ·								
b												
C						<u> </u>						•
ď								-				
е						•						6,984.
				∫ If gain, also enter	r in Part I line		7					
2 Capital	gain ne	et income or (net ca	pital loss)		- ın Part I, line	7	1	2				6,984.
2 Notebe	art-tarm	a constal gasa or /loc	c) ac dafu	ned in sections 1222(5) ar								
		nter in Part I, line 8,	•	· ·	iu (0).		1					
If (loss), enter	-0- in Part I, line 8	·				J.	3			N/A	
Part V	Q	ualification U	nder S	ection 4940(e) for	Reduced	Tax on Net	Inve	estm	ent Inc	ome		
(For option	nal use	by domestic private	foundation	ons subject to the section	4940(a) tax on	net investment ir	ncome.	.)				•
•					, ,							
If section 4	1940(d)(2) applies, leave th	us part bla	ank.								
Was the fo	undatio	on liable for the sect	ion 4942	tax on the distributable an	nount of any ye	ear in the base pe	rıod?					Yes X No
If "Yes," the	e found	lation does not quali	fy under :	section 4940(e). <u>Do not co</u>	mplete this pa	rt.						
1 Enter t	he app	ropriate amount in e	ach colur	nn for each year; see the I	nstructions be	fore making any e	ntries.					
	Doo	(a)		(b)			(c)				Distrib	(d) ution ratio
Calenda		e periód years (or tax year beginnir	ng in)	Adjusted qualifying dis	tributions	Net value of no	nchári	table-u	ise assets	(ided by col. (c))
	•	2014		3	0,250.			218	3,152	•		.138665
		2013			1,156.		-		1,180			.578082
		2012			8,014.				L,752			.164571
		2011			0,203.				L,996			.096806
		2010			3,197.		_		3,616			.102581
					- /							
2 Total o	f line 1	, column (d)								2		1.080705
			i-vear has	se period - divide the total	on line 2 by 5.	or by the number	of vea	ıгs				
		n has been in exister			••.	,	,			3		.216141
110 100	noution	That book in existor	100 11 1000	than o youro								
A Enter th	ne net v	value of noncharitah	وود موريها	sets for 2015 from Part X,	line 5					4		381,778.
T LINCI II	IC HCL V	ratio of frontificial flab	ic use asc	sets for 2010 from r tire A,	iii o							
5 Multiply	u lina 4	hy line 2								5		82,518.
a www.uprj	y 1116 4	by line 3										02/310:
C Enter 1	9/ of p	ot invoctment incom	o (10/ of	Dort L line 27h)						6		176.
o ciilei i	/0 UI (1)	et investment incom	10 01 J	raiti, mie ZID)						"		± / U •
- A 1		٦,٥								,		82,694.
7 Add lin	es 5 an	αb								7		04,034.
8 Enter q	ualıfyın	g distributions from	Part XII,	line 4						8		62,926.
		al to or greater than Tinstructions.	lıne 7, ch	eck the box in Part VI, line	1b, and comp	lete that part usin	ıg a 1%	6 tax ra	ite.			

	m 990-PF (2015) STENSTROM FOUNDATION		<u>3351(</u>			Page 4
Pa	art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or	4948	- see in	stru	ctio	<u>1S)</u>
1:	a Exempt operating foundations described in section 4940(d)(2), check here ▶ 🔲 and enter "N/A" on line 1.		1			
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)		1			
- 1	b Domestic foundations that meet the section 4940(e) requirements in Part V, check here 🕨 🔲 and enter 1%	1			3	<u>52.</u>
	of Part I, line 27b		[
(c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).					
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2				0.
3		3			3	52.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4				0.
5		5			3	52.
6	Credits/Payments:					
	a 2015 estimated tax payments and 2014 overpayment credited to 2015 6a 600	•				
	b Exempt foreign organizations - tax withheld at source 6b					
	c Tax paid with application for extension of time to file (Form 8868)					
	d Backup withholding erroneously withheld					
7		7			6	00.
8		8				
9	- · · · · · · · · · · · · · · · · · · ·	9				
10		10			2	48.
	Enter the amount of line 10 to be: Credited to 2016 estimated tax	11				0.
	art VII-A Statements Regarding Activities					
_	a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or interver	 1e in			Yes	No
	any political campaign?			1a		X
	b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition	n)?		1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials publish		Ī			
	distributed by the foundation in connection with the activities.					
	c Did the foundation file Form 1120-POL for this year?			1c		Х
	d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:		ŀ			
• '	(1) On the foundation. > \$ 0. (2) On foundation managers. > \$ 0.	_				
	e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation	<u>-</u>				
•	managers. > \$ 0.					
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?			2		Х
-	If "Yes," attach a detailed description of the activities.		F			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation,	or				
Ü	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	0.		3		Х
4:	a Did the foundation have unrelated business gross income of \$1,000 or more during the year?			4a		X
	b If "Yes," has it filed a tax return on Form 990-T for this year?	N	/A	4b		
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		′	5		X
Ü	If "Yes," attach the statement required by General Instruction T.					
6						
Ů	By language in the governing instrument, or					
	 By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state. 	ite law				
	remain in the governing instrument?	10 1211		6	Х	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part X	av.		7	X	
,	Did the foundation have at least \$5,000 in assets at any time during the year. It is res, complete it are in, con. (c), and it are in	•	-	_ 		
Ω.	a Enter the states to which the foundation reports or with which it is registered (see instructions)					
06	IL					
	b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)					
	of each state as required by General Instruction G? If "No," attach explanation			8b	Х	
n		lendar		70		
9	year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes," complete Part XIV	ivilual		9		X
10			-	10		X
10	DID any persons become substantial continuators during the tax year. It "yes," attach a schedule listing their names and addresses			.,		

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Pa	int VII-A Statements Regarding Activities (continued)	,		
	·		Yes	No
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		_X_
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?			
	If "Yes," attach statement (see instructions)	12		_X_
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
	Website address ► N/A			
14	The books are in care of ► ROBERT W. STENSTROM Telephone no. ►815-39	8-2	420	
	Located at ► 2420 20TH STREET, ROCKFORD, IL ZIP+4 ►61		•	
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	N	/A	
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
	securities, or other financial account in a foreign country?	16		Х
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the	1		
	foreign country			
Pa	art VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
		T	Yes	No
4.	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.			
ıa	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 disgualified person? Yes X No			
	· · · · · · · · · · · · · · · · · · ·			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	1		
	(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	1		
	termination of government service, if terminating within 90 days.)			
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b		
	Organizations relying on a current notice regarding disaster assistance check here			
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected			
	before the first day of the tax year beginning in 2015?	1c		<u>X</u>
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation			
	defined in section 4942(j)(3) or 4942(j)(5)):			
a	At the end of tax year 2015, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning			
	before 2015?			
	If "Yes," list the years			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect			
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach			
	statement - see instructions.) N/A	2b		
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	:		
	, <u> </u>	:		
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
	during the year?			
b	If "Yes," did it have excess business holdings in 2015 as a result of (1) any purchase by the foundation or disqualified persons after			
	May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose			
	of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,			
	Form 4720, to determine if the foundation had excess business holdings in 2015) N/A	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that			
_	had not been removed from jeopardy before the first day of the tax year beginning in 2015?	4b		_X_
		rm 990	-PF	

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Total number of other employees paid over \$50,000

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Part VIII Information About Officers, Directors, Trustees, F Paid Employees, and Contractors (continued)	oundation Managers, Highly		
3 Five highest-paid independent contractors for professional services. If no	ne, enter "NONE."		
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Com	pensation
NONE			
Total number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities		•	(
List the foundation's four largest direct charitable activities during the tax year. Include relevant the foundation of organizations and other beneficiaries served, conferences convened, research particles.	rant statistical information such as the apers produced, etc.	Expenses	3
1 <u>N/A</u>			
2			
3			
4			
Part IX-B Summary of Program-Related Investments			
Describe the two largest program-related investments made by the foundation during the ta	x year on lines 1 and 2.	Amount	
1 <u>N/A</u>			
2			
All other program-related investments. See instructions.			
3			

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Total, Add lines 1 through 3

a Suitability test (prior IRS approval required) 3a b Cash distribution test (attach the required schedule) 3Ь

Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b

Adjusted qualifying distributions. Subtract line 5 from line 4

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

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62,926

4

5

6

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
1 Distributable amount for 2015 from Part XI, line 7				18,737.
2 Undistributed income, if any, as of the end of 2015				
a Enter amount for 2014 only	** 1		0.	
b Total for prior years:		· ·		
3 Excess distributions carryover, if any, to 2015:		0.		
a From 2010 17,129. b From 2011 14,674.				
c From 2012 33,506.				
d From 2013 129,887.				
e From 2014 19,909.				
f Total of lines 3a through e	215,105.			
4 Qualifying distributions for 2015 from				·h · · · · · · · · · · · · · · · · · ·
Part XII, line 4: ►\$ 62,926.	}			
a Applied to 2014, but not more than line 2a			0.	
b Applied to undistributed income of prior	****			
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2015 distributable amount				18,737.
e Remaining amount distributed out of corpus	44,189.			
5 Excess distributions carryover applied to 2015 (If an amount appears in column (d), the same amount	0.			0.
must be shown in column (a))				
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	259,294.			
b Prior years' undistributed income. Subtract		Ì		
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				
d Subtract line 6c from line 6b. Taxable		0.		
amount - see instructions		0.		
e Undistributed income for 2014. Subtract line		0.		
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2015. Subtract				<u></u>
lines 4d and 5 from line 1. This amount must				
be distributed in 2016				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by		1		
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	17,129.			
9 Excess distributions carryover to 2016.				
Subtract lines 7 and 8 from line 6a	242,165.			
0 Analysis of line 9:				
a Excess from 2011 14,674.				
b Excess from 2012 33,506.				
c Excess from 2013 129,887.				
d Excess from 2014 19,909.				
<u>e Excess from 2015</u> 44,189.		<u>.</u>		

	<u>OM FOUNDATI</u>			36-33	351099 Page 1
Part XIV Private Operating F	oundations (see in	structions and Part V	/II-A, question 9)	N/A	
1 a If the foundation has received a ruling or	r determination letter tha	it it is a private operating)		
foundation, and the ruling is effective for	r 2015, enter the date of	the ruling	>		
b Check box to indicate whether the found	lation is a private operati	ing foundation described	d in section	4942(j)(3) or 4	942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years	M. I. /	
income from Part I or the minimum	(a) 2015	(b) 2014	(c) 2013	(d) 2012	(e) Total
investment return from Part X for					
each year listed					
b 85% of line 2a					
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	l				
exempt activities	l				
e Qualifying distributions made directly	- 				
for active conduct of exempt activities.					
			Ì		
Subtract line 2d from line 2c 3 Complete 3a, b, or c for the		ļ			
alternative test relied upon:					
a "Assets" alternative test - enter:					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter					
2/3 of minimum investment return					
shown in Part X, line 6 for each year					
					
c "Support" alternative test - enter:					
(1) Total support other than gross investment income (interest,					
dividends, rents, payments on					
securities loans (section					
512(a)(5)), or royalties)					
(2) Support from general public					
and 5 or more exempt organizations as provided in					
section 4942(j)(3)(B)(III)					
(3) Largest amount of support from					
an exempt organization					
(4) Gross investment income			-		
Part XV Supplementary Infor	mation (Comple	te this part only	if the foundatio	n had \$5,000 or me	ore in assets
at any time during th	ne year-see instr	ructions.)			
1 Information Regarding Foundation	Managers:				
a List any managers of the foundation who	•	than 2% of the total con	tributions received by th	e foundation before the clo	se of any tay
year (but only if they have contributed me	ore than \$5,000). (See s	ection 507(d)(2).)	induiting received by in		oo or any tax
NONE	, , ,	. , , , ,			
b List any managers of the foundation who	own 10% or more of th	a stack of a corporation	/or an equally large port	tion of the ownership of a p	ortnorohin or
other entity) of which the foundation has			(or all equally large por	tion of the ownership of a p	arthership of
NONE					
	on Crant Citt I can	C-b-lbis -t- D			
Check here Lifthe foundation on the foundation makes gifts, grants, etc. (s					
			·		i u.
a The name, address, and telephone numb		he person to whom app	lications should be addre	essed:	
ROBERT STENSTROM, 815					
P.O. BOX 5866, ROCKFO					
b The form in which applications should be	submitted and informat	ion and materials they s	hould include:		
NO SPECIFIC FORM					
c Any submission deadlines:					
NONE					
d Any restrictions or limitations on awards,	such as by geographica	ıl areas, charitable fields	, kınds of ınstitutions, or	other factors:	
NONE					

Part XV Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Foundation Purpose of grant or show any relationship to Amount any foundation manager status of contribution Name and address (home or business) or substantial contributor recipient a Paid during the year AMERICAN RED CROSS NONE PUBLIC CHARITABLE 727 N CHURCH STREET ROCKFORD, IL 61103 10,211. DISCOVERY CENTER MUSEUM NONE PUBLIC CHARITABLE 711 N MAIN STREET ROCKFORD IL 61103 500. GOLDEN APPLE NONE PUBLIC CHARITABLE 5050 EAST STATE STREET ROCKFORD, IL 61108 5,000. ILLINOIS EXECUTIVE MANSION NONE PUBLIC CHARITABLE ASSOCIATION 410 E JACKSON STREET SPRINGFIELD, IL 62701 10,000. NORTHERN IL FOOD BANK NONE PUBLIC CHARITABLE 273 DEARBORN COURT GENEVA, IL 60134 3,000. SEE CONTINUATION SHEET(S) Total ▶ 3a 62,926, b Approved for future payment NONE Total **▶** 3b

Part XVI-A Analysis of Income-Producing Activities
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Enter gross amounts unless otherwise indicated.	Unrelated	business income		section 512, 513, or 514	(e)
1 Program service revenue:	(a) Business code	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income
a					
b					
C					
d				_	
e					
f		<u>-</u>			
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash			1 1		
investments			14	2.	
4 Dividends and interest from securities			14	13,254.	
5 Net rental income or (loss) from real estate:					
a Debt-financed property					
b Not debt-financed property		<u>.</u>			
6 Net rental income or (loss) from personal					
property					
7 Other investment income					
8 Gain or (loss) from sales of assets other					
than inventory			14	6,984.	
9 Net income or (loss) from special events		<u>.</u>			
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:			1 1	1	
a	_				
b	_				
C	_				
d	_				······································
e	_	- 			
12 Subtotal. Add columns (b), (d), and (e)	L	0	<u> </u>	20,240.	0.
13 Total. Add line 12, columns (b), (d), and (e)				13	20,240.
(See worksheet in line 13 instructions to verify calculations.					
Part XVI-B Relationship of Activities	s to the Accor	nplishment of E	Exempt Pu	rposes	
Line No. Explain below how each activity for which in	ncome is reported in	column (e) of Part XVI	-A contributed	mportantly to the accomp	olishment of
▼ the foundation's exempt purposes (other the					
				- , , , 	

Information Regarding Transfers To and Transactions and Relationships With Noncharitable	Form 990-PF (TROM FOU	NDATION	<u> </u>		<u> 36-</u> 335	1099	Pa	ige 13
The time segmentation describly or indirectity empire in any of the following with any other organization described in section 501(c) of the Dode (other than section 501(c)) organizations or in section 501(c) organizations or in the segment organizations? 1 Tractices from the reporting foundation to a noncharidable exempt organization of: (1) Cash (2) Other seeds (1) Sales of cases from a noncharidable exempt organization (2) Purchases of assests from a noncharidable exempt organization (3) Purchases of seasets from a noncharidable exempt organization (4) Reministration or other seeds (4) Reministration of the seeds (4) Reministration of the seeds (5) Loses or form guarantees (6) Loses or form guarantees (7) Sales of anno guarantees (8) Performance of services or membership or fundrasing solicitations (8) Performance of services or membership or fundrasing solicitations (9) Furformance of services or membership or fundrasing solicitations (9) Furformance of services or membership or fundrasing solicitations (10) X (11) The service of the propring fundation line fundrasing solicitations or services or membership or fundrasing solicitations (10) X (10)				insfers To	and Transactions	and Relations	hips With Noncha	ritable	•	
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Sign Under pensites of perjury, I declare that I base examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief it is frue, correct, and complete the claration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge and belief it is frue, correct, and complete the claration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge shown below (see inst.)? Print/Type preparer's name			-		, -			Yes	X] No
N/A Sign Here	b If "Yes," c	omplete the following sch	edule.							
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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

Employer identification number

2015

	ENSTROM FOUNDATION	36-3351099_							
Organization type (check one)									
Filers of:	Section:								
Form 990 or 990-EZ	Form 990 or 990-EZ								
4947(a)(1) nonexempt charitable trust not treated as a private foundation									
	527 political organization								
Form 990-PF	X 501(c)(3) exempt private foundation								
	4947(a)(1) nonexempt charitable trust treated as a private foundation								
	501(c)(3) taxable private foundation								
	s covered by the General Rule or a Special Rule. (7), (8), or (10) organization can check boxes for both the General Rule and a Special Rul	le. See instructions.							
General Rule									
	n filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling one contributor. Complete Parts I and II. See instructions for determining a contributor's								
Special Rules									
sections 509(a)(1) any one contributo	n described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amoun line 1 Complete Parts I and II.	or 16b, and that received from							
year, total contribu	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								
year, contributions is checked, enter hourpose. Do not co	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year.								
Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990 PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)									

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2015)

Name of organization

Employer identification number

STENSTROM FOUNDATION

36-3351099

Part I	Contributors (see instructions) Use duplicate copies of Part I if additional	Il space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	STENSTROM COMPANIES LTD & SUBSIDIARIES 2420 20TH STREET ROCKFORD, IL 61125	\$ 250,000.	Person X Payroll
(a)	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)

Employer identification number

STENSTROM FOUNDATION

36-3351099

Part II	Noncash Property (see instructions) Use duplicate copies of P	art II if additional space is needed	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	y given (c) FMV (or estimate) (d) Date received (c) FMV (or estimate) (see instructions) (d) Date received (e) FMV (or estimate) (see instructions) (f) FMV (or estimate) (see instructions) (g) FMV (or estimate) (see instructions) (h) Date received (c) FMV (or estimate) (see instructions) (d) Date received (e) FMV (or estimate) (d) Date received (f) FMV (or estimate) (d) Date received	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	FMV (or estimate)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	FMV (or estimate)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	FMV (or estimate)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
23453 10-26-	15	Schedule B (Form 9	90. 990-EZ. or 990-PF) (2015)

Name of org	ganization		Employer identification number				
STENS	TROM FOUNDATION		36-3351099				
Part III	Exclusively religious, charitable, etc., conthe year from any one contributor. Complete completing Part III, enter the total of exclusively religious duplicate copies of Part III if addition	us, chantable, etc., contributions of \$1,000 o	36-3351099 In section 501(c)(7), (8), or (10) that total more than \$1,000 for wing line entry. For organizations r less for the year (Enter this info once) \$\Bigsir \frac{1}{2} \\ \fr				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
ļ		(e) Transfer of gif	it				
-	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee				
(a) No							
(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, a	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				
1		(e) Transfer of gif	t				
	Transferee's name, address, a	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 gif	t				
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee				
	-						

If gain, also enter in Part I, line 7

(If (loss), enter "-0-" in Part I, line 7

2

2 Capital gain net income or (net capital loss)

If gain, also enter in Part I, line 8, column (c). If (loss), enter "-0-" in Part I, line 8

Net short-term capital gain or (loss) as defined in sections 1222(5) and (6):

1. 2.2. L'oabitai daine and Ed	13369 IOL LAX ON INVESTINCILL INCOME				
(a) List and 2-story b	d describe the kind(s) of property sol crick warehouse; or common stock, 2	ld, e.g., real estate, 200 shs. MLC Co.	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
	TEGIC VAL		P		06/09/15
b FRANKLIN INC F			P		03/16/15
c HOTCHKIS & WIL			P	10/22/14	10/26/15
d IVY HIGH INC F			P		06/12/15
e PRUDENTIAL SHO			P		03/16/15
f TEMPLETON FORE			P		03/16/15
g THORNBURG INV			P		03/16/15
	DIVIDENDS			03/12/10	03/10/13
i citi i i i i i i i i i i i i i i i i i	DIVIDHADO				
<u> </u>					
k					
<u> </u>					
m	·				
n				· · · · · · · · · · · · · · · · · · ·	
0				-	
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		Gain or (loss) lus (f) minus (g)	
a 17,410.	l	14,269.			3,141.
b 17,410.		16,144.	 -		895.
$\frac{17,039}{c}$ 5,679.		6,246.			-567 .
d 11,928.		12,876.			-948·
e 11,014.		11,505.			-491.
<u>11,614.</u> <u>15,601.</u>		15,422.			179.
g 11,659.		10,000.			1,659.
h 4,915.		10,000.			4,915.
1					=,515.
·		-		 	
k					
1					
<u> </u>					
n					
0			 -		
	ng gain in column (h) and owned by	the foundation on 12/31/69	(I) Los	ses (from col. (h))	
(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 (excess o	of col. (h) gain over ot less than "-0-")	r col. (k),
a					3,141.
b					895.
C			_ 		-567.
d				 .	-948.
e					-491.
f			·		179.
9					1,659.
h					4,915.
I					
k					
1				<u> </u>	
m					
n					
0					
	Hanna also est	un Dort I has 7			
2 Capital gain net income or (net ca	apital loss) { If gain, also enter 1-0	in Part I, line /)-" in Part I, line 7	2		6,984.
3 Net short-term capital gain or (los	ss) as defined in sections 1222(5) an	, I			
If gain, also enter in Part I, line 8,		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \			
If (loce), anter "-0-" in Part I, line !		1	_ 1	3T / 3	

STENSTROM FOUNDATION

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient show any relationship to Foundation Purpose of grant or any foundation manager or substantial contributor Amount status of contribution Name and address (home or business) recipient REMEDIES NONE PUBLIC CHARITABLE 220 EASTON PKWY ROCKFORD, IL 61108 5,000. NONE PUBLIC CHARITABLE ROCK VALLEY COLLEGE FOUNDATION 3301 NORTH MULFORD ROAD ROCKFORD IL 61114 5,465. ROCKFORD BOYS & GIRLS CLUB NONE PUBLIC CHARITABLE 1040 NORTH SECOND STREET 10,000. ROCKFORD, IL 61107 ROCKFORD MEMORIAL DEVELOPMENT NONE PUBLIC CHARTTABLE 2400 NORTH ROCKTON AVENUE ROCKFORD IL 61103 5,000. ROCKFORD PARK DISTRICT NONE PUBLIC CHARITABLE 401 SOUTH MAIN STREET 500. ROCKFORD IL 61101 ROCKFORD SYMPHONY ORCHESTRA NONE PUBLIC CHARITABLE 711 N MAIN STREET STE 6 ROCKFORD, IL 61103 2,500. NONE CHARITABLE ROSECRANCE FOUNDATION PUBLIC 1021 NORTH MULFORD ROAD ROCKFORD, IL 61107 3,000. NONE PUBLIC CHARITABLE VARIOUS VARIOUS ROCKFORD, IL 61108 500. NONE PUBLIC CHARITABLE WALTER LAWSON CHARITABLE FUND 1820 WALTER LAWSON DR LOVES PARK, IL 61111 750. WINNEBAGO COUNTY 9/11 EMERGENCY NONE PUBLIC CHARITABLE RESPONDERS MEMORIAL 2601 REID FARM RD STE B 1,500. ROCKFORD, IL 61114 Total from continuation sheets 34 215.

FORM 990-PF INTER	EST ON SAVI	NGS AND TEM	IPORARY CA	ASH IN	VESTMENTS	STATEMENT 1
SOURCE	(A REVE PER B	NUE 1	(B) NET INVESTMENT INCOME		(C) ADJUSTED NET INCOME	
NORTHWEST MONEY MA	RKET		2.		2.	
TOTAL TO PART I, L		2.		2.		
FORM 990-PF	DIVIDEND	S AND INTER	EST FROM	SECUR	ITIES	STATEMENT 2
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDEND	(/ REVE S PER E	ENUE	(B) NET INVES MENT INCO	
ALPINE BANK RBC	17,628 541		5. 12 0.	2,713. 541.		
TO PART I, LINE 4	18,169	4,91	5. 13	3,254.	13,25	4.
FORM 990-PF		LEGAL	FEES			STATEMENT 3
DESCRIPTION		(A) EXPENSES PER BOOKS	(B) NET INVE MENT INC	EST-	(C) ADJUSTED NET INCOM	
LEGAL		400.	·	0.		0.
TO FM 990-PF, PG 1	, LN 16A ==	400.		0.		0.
FORM 990-PF		ACCOUNTI	NG FEES			STATEMENT 4
DESCRIPTION		(A) EXPENSES PER BOOKS	(B) NET INVE MENT INC		(C) ADJUSTED NET INCOM	
ACCOUNTING	-	690.		0.		0.
TO FORM 990-PF, PG	1, LN 16B	690.		0.		0.
	_			=======================================		

FORM 990-PF (OTHER PROFES	SIONAL FE	EES		STATEMENT	5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVE MENT INC		(C) ADJUSTEI NET INCOM		
INVESTMENT FEES	2,525.	2,	525.			0.
TO FORM 990-PF, PG 1, LN 16C	2,525.	2,	525.			0.
FORM 990-PF	TAX	ES			STATEMENT	6
DESCRIPTION	(A) EXPENSES PER BOOKS			(C) ADJUSTED NET INCOM		
TAXES FOREIGN TAX - RBC FOREIGN TAX - ALPINE	593. 3. 114.		0. 3. 114.			0. 0. 0.
TO FORM 990-PF, PG 1, LN 18 =	710.		117.			0.
FORM 990-PF	OTHER E	XPENSES			STATEMENT	7
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVE MENT INC		(C) ADJUSTED NET INCOM		
MISC ADMINISTRATIVE BANK CHARGES	10.		0.			0.
TO FORM 990-PF, PG 1, LN 23	70.		0.			0.
FORM 990-PF	OTHER INV	ESTMENTS			STATEMENT	8
	VA	LUATION	DOG	OK VALUE	FAIR MARKE	T
DESCRIPTION		ETHOD	BOC	M VADOL	*******	
DESCRIPTION MUTUAL FUNDS	M	ETHOD COST		546,296.	543,4	58.