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Form 990-PF

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

Do not enter social security numbers on this form as it may be made public.

OMB No. 1545-0052

2015

Department of the Treasury Internal Revenue Service

THE AUG 29

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

		lendar year 2015 or tax year beginning of foundation BERGSTROM INC CHAP		2015, and ending	A Employer identifi	04/30,2016	
		DERODIKON INC CHA	TABLE FOUNDATION				
-		2012810 R64692008 er and street (or P.O box number if mail is not deliver	ed to street address)	Room/suite	B Telephone number	6692339 er (see instructions)	
	10 S DEARBORN IL1-0117					6-888-5157	
		town, state or province, country, and ZIP or foreign p	ostal code		- 00	0-000-3131	
	•	•			C If exemption application pending, check here		
		CAGO, IL 60603				_	
G	Che	ck all that apply: Initial return Final return	Initial return of a for Amended return	mer public charity	D 1 Foreign organizat 2 Foreign organizat	ons meeting the	
		Address change	Name change		85% test, check h		
H	Che	ck type of organization: X Section 50	I(c)(3) exempt private foundat	ion] '		
1	s	ection 4947(a)(1) nonexempt charitable trust	Other taxable private for	undation	E If private foundation under section 507(b	- I	
ı	Fair	market value of all assets at JAco	ounting method: X Cash	Accrual	F If the foundation is it	a 60-month termination	
	end	of year (from Part II, col. (c), line	Other (specify)		under section 507(b	(1)(B), check here	
_	16)	▶ \$ 2,386,097. (Part	, column (d) must be on cash basis	:)			
J	art	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d)	e (a) Revenue and (b) N	let investment	(c) Adjusted net	(d) Disbursements for charitable	
		may not necessarily equal the amounts in	expenses per books	income	income	purposes	
_		column (a) (see instructions))				(cash basis only)	
	1	Check if the foundation is not required to	354,000.		$\overline{}$		
	2	attach Sch B			-/~\		
	3	Interest on savings and temporary cash investments		50 001	<u> </u>	<u> </u>	
	4	Dividends and interest from securities	59,662.	59,391.	18 / 5/2		
	5a	Gross rents			19 SEX		
		Net rental income or (loss)	600		100	5/1/2	
ı a	6a b	Net gain or (loss) from sale of assets not on line 10 Gross sales price for all	602			~ 16 B	
Revenue	_	assets on line 6a		<u> </u>		A (3)	
ě	7	Capital gain net income (from Part IV, line 2)	" " " " "	602.		K (12 Nich	
~	8	Net short-term capital gain				$\longrightarrow \longleftarrow$	
	9 10a	Income modifications					
	ь	Less Cost of goods sold .					
	c	Gross profit or (loss) (attach schedule)			··		
	11	Other income (attach schedule)				STMT 1	
; –	12	Total. Add lines 1 through 11		59,993.			
	13	Compensation of officers, directors, trustees, etc .		11,964.	77077	7,976	
ses		Other employee salaries and wages		NONE	NONE		
en	15	Pension plans, employee benefits		NONE	NONE		
Administrative Exp	16a	Legal fees (attach schedule)					
9	Ь	Accounting fees (attach schedule)					
aţį	, c	Other professional fees (attach schedule)		•		-	
str	17	Interest		695.			
Ξ:	18 19	Depreciation (attach schedule) and depletion		0,5,			
퉏	20	Occupancy					
Ă	21	Travel, conferences, and meetings		NONE	NONE		
and	22	Printing and publications		NONE	NONE		
<u> </u>	23	Other expenses (attach schedule) STMT. 3				15	
Operating	24	Total operating and administrative expenses					
era		Add lines 13 through 23	^	12,659.	NONE	7,991	
Ö	25	Contributions, gifts, grants paid				545,743	
_	26	Total expenses and disbursements Add lines 24 and 25	566 000	12,659.	NONE	553,734	
_	27	Subtract line 26 from line 12					
	а	Excess of revenue over expenses and disbursements .	-149,582.				
	ь	Net investment income (if negative, enter -0-)		47,334.			
_	С	Adjusted net income (if negative, enter -0-).					

JSA For Paperwork Reduction Act Notice, see instructions.
5E1410 1 000 DBC228 501G 08/25/2016 09:24:05

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Page 2

For	m 990	-PF (2015)	36-6692339				
В	art II	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year	Beginning of year	of year			
	a1 L II	amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value		
	1	Cash - non-interest-bearing		3,899.			
	2	Savings and temporary cash investments	114,647.	61,321.	61,321.		
	3	Accounts receivable ▶	***				
		Less allowance for doubtful accounts ▶					
	4	Pledges receivable ▶	20 X420 21 1003	7377374			
		Less allowance for doubtful accounts ▶					
	5	Grants receivable					
	6	Receivables due from officers, directors, trustees, and other					
		Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions) Other notes and loans receivable (attach schedule)					
	7	Other notes and loans receivable (attach schedule)		<u> Addisonal Addi</u>	Maria de la compansión de		
		Less allowance for doubtful accounts ▶NONE					
ts	8	Inventories for sale or use					
Assets	9	Prepaid expenses and deferred charges					
۷	10a	Investments - U S $$ and state government obligations (attach schedule). $$.					
	b	Investments - corporate stock (attach schedule)			1,391,627.		
	11	Investments - corporate bonds (attach schedule)	448,283.				
	. 1	Investments - land, buildings, and equipment basis		A Commence of the Commence of			
		Less accumulated depreciation (attach schedule)					
	12	Investments - mortgage loans					
	13 14	Investments - other (attach schedule)		525,194.	513,193.		
	14	equipment basis Less accumulated depreciation					
		(attach schedule)					
	15	Other assets (describe >)					
	16	Total assets (to be completed by all filers - see the		0 440 510	2 225 227		
-		instructions. Also, see page 1, item I)	2,5//,/3/.	2,440,518.	2,386,097.		
	17	Accounts payable and accrued expenses					
	18	Grants payable					
Liabilities	19	Deferred revenue					
Ę	20	Loans from officers, directors, trustees, and other disqualified persons					
iat	21	Mortgages and other notes payable (attach schedule)					
-	22	Other liabilities (describe					
	23	Total liabilities (add lines 17 through 22)		NONE			
_	23			I NOME			
S		Foundations that follow SFAS 117, check here . Land complete lines 24 through 26 and lines 30 and 31.					
ances		-					
_	24	Unrestricted					
Ва	25	Temporarily restricted					
nd	26	Tomanomy rosanska i i i i i i i i i i i i i i i i i i i					
Net Assets or Fund Ba		Foundations that do not follow SFAS 117, check here and complete lines 27 through 31.			145		
o	27	Capital stock, trust principal, or current funds	2,577,737.	2,440,518.			
ts	27 28	Paid-in or capital surplus, or land, bldg, and equipment fund	2,377,737.	2,440,510.			
Se	29	Retained earnings, accumulated income, endowment, or other funds					
Ä	30	Total net assets or fund balances (see instructions)	2,577,737.	2,440,518.	T		
Vet	31	Total liabilities and net assets/fund balances (see	2,3,1,131.	2,110,310.			
_		instructions)	2,577,737.	2,440,518.			
P	art II				A COUNTY OF THE		
		al net assets or fund balances at beginning of year - Part		must agree with			
•		of-year figure reported on prior year's return)		l l	2,577,737.		
2		er amount from Part I, line 27a			-149,582.		
		er increases not included in line 2 (itemize) ► RECOVERY OF			12,500.		
		lines 1, 2, and 3			2,440,655.		
		reases not included in line 2 (itemize) ►COST BASIS ADJUSTM		5	137.		
		al net assets or fund balances at end of year (line 4 minus		b), line 30 6	2,440,518.		
					Form 990-PF (2015)		

Pa	rt IV Capital Gains	and Losses for Tax on Inve	estment Income			
	(a) List and	(b) How acquired P - Purchase	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)		
 1а	PUBLICLY TRADED	rick warehouse; or common stock, 200		D - Donation	(mo., uay, yr.)	
<u>la</u>	FODDICHI IMADED	BECORTITES				
c						
d						
e e						
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo (e) plus (f) mini	
<u> </u>	976,682.		976,080.			602.
ь						
C						
d						
е						
	Complete only for assets s	showing gain in column (h) and owned	by the foundation on 12/31/69	(1)	Gains (Col. (h) ga	ain minus
	(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	col.	(k), but not less t Losses (from co	
а						602.
ь						
С						
d						
е				ļ,		
2	Capital gain net income of	or (not capital loss)	gain, also enter in Part I, line 7			
-	_	l u	(loss), enter -0- in Part I, line 7	2		602.
3		in or (loss) as defined in sections 1				
	- '	art I, line 8, column (c) (see inst	4			
				3		
		Inder Section 4940(e) for Reduce private foundations subject to the				
Wa		leave this part blank. the section 4942 tax on the distribnot qualify under section 4940(e). I		ase perio	d?	Yes X No
				a any ant	rioc	
	(a)	nount in each column for each year		g any enu I	(d)	
•	Base period years	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets		Distribution ra	
	lendar year (or tax year beginning in) 2014	698,057.	2,456,691.		(cor (b) divided by	0.284145
	2013	282,644.	1,867,161.			0.151376
	2012	355,988.	1,323,224.			0.269031
	2011	444,716.	382,636.			1.162243
	2010	130,070.	83,990.			1.548637
			03,730.			2,01000.
2	Total of line 1, column (c	d)		2		3.415432
		o for the 5-year base period - divide				
	<u> </u>	ndation has been in existence if less	-	3		0.683086
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
4	Enter the net value of no	ncharitable-use assets for 2015 fro	om Part X, line 5	4	2	,597,197.
5	Multiply line 4 by line 3			5	1	,774,109.
•	manapiy iiio 1 by iiio 0					
6	Enter 1% of net investme	ent income (1% of Part I, line 27b)		6		473.
-	,	(1,221.211,1110.270)				<u> </u>
7	Add lines 5 and 6			7	1	,774,582.
				[
8		ions from Part XII, line 4				553,734.
		reater than line 7, check the box	in Part VI, line 1b, and complete	that part	using a 1% ta	x rate. See the
	Part VI Instructions.				 	000 DE

Par	VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see i	nstru	ctions	s)
1a	Exempt operating foundations described in section 4940(d)(2), check here			
	Date of ruling or determination letter (attach copy of letter if necessary - see instructions)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check		9	47.
	here and enter 1% of Part I, line 27b			
c	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of			
	Part I, line 12, col. (b).			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 2			
3	Add lines 1 and 2		9	147.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 4		N	ONE
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0		9	47.
6	Credits/Payments			
а	2015 estimated tax payments and 2014 overpayment credited to 2015 6a 3,792.			
b	Exempt foreign organizations - tax withheld at source			
С	Tax paid with application for extension of time to file (Form 8868) 6c NONE			
d	Backup withholding erroneously withheld			
7	Total credits and payments. Add lines 6a through 6d		3,7	92.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		2,8	345.
11	Enter the amount of line 10 to be: Credited to 2016 estimated tax ▶ 948. Refunded ▶ 11		1,8	97.
Par	t VII-A Statements Regarding Activities			
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes	No
	participate or intervene in any political campaign?	1a		X
ь	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see			
	Instructions for the definition)?	1b		<u> </u>
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials			
	published or distributed by the foundation in connection with the activities.			
С	Did the foundation file Form 1120-POL for this year?	1c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			
	(1) On the foundation. ▶ \$ (2) On foundation managers ▶ \$			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on			
	foundation managers. > \$			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		<u> </u>
	If "Yes," attach a detailed description of the activities.			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of			
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		<u> </u>
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X
	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X
	If "Yes," attach the statement required by General Instruction T.			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:			
	By language in the governing instrument, or	3		
	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	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	7	X	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)			
	IL			
ь	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	X	<u> </u>
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or			
-	4942(j)(5) for calendar year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes,"			
	complete Part XIV	9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their			
10	names and addresses	10		x
			0.PF	(2015)

Par	t VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the		Yes	No
	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		Х
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified			
	person had advisory privileges? If "Yes," attach statement (see instructions)	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address ► N/A			
14	The books are in care of ▶ JP MORGAN CHASE BANK, N.A. Telephone no. ▶ (866) 888	<u>-515</u>	7	
	Located at ► 10 S DEARBORN ST;MC; IL1-0117, CHICAGO, IL ZIP+4 ► 60603			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		▶	· []
	and enter the amount of tax-exempt interest received or accrued during the year			
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority		Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		<u> </u>
	See the instructions for exceptions and filing requirements for FinCEN Form 114 If "Yes," enter the name of	į		
	the foreign country	V;		S
Par	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			
	disqualified person?		100	
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			244 A.
	(5) Transfer any income or assets to a disqualified person (or make any of either available for			
	the benefit or use of a disqualified person)?		*	
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the			
	foundation agreed to make a grant to or to employ the official for a period after	}		
	termination of government service, if terminating within 90 days.) Yes X No		3.2	
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			v
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b	alecaria.	X
	Organizations relying on a current notice regarding disaster assistance check here		100	
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that	1c		Х
•	were not corrected before the first day of the tax year beginning in 2015?	10		
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)) At the end of tax year 2015, did the foundation have any undistributed income (lines 6d and		10.00	
a	6e, Part XIII) for tax year(s) beginning before 2015?			1
				4 (%)
	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		- 12	
	all years listed, answer "No" and attach statement - see instructions)	2b		Х
	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.		26.5 % *	
·	b			Sugar.
За	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			8
•	at any time during the year? Yes X No			
b	If "Yes," did it have excess business holdings in 2015 as a result of (1) any purchase by the foundation or			
-	disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the			
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of		2.5	
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the		1.42 m	
	foundation had excess business holdings in 2015)	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		Х
	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		Х
	F	orm 99	0-PF	(2015

Par	Statements Regarding Activities f	or Which Form	1720 May Re Poo	uired (continued)			-50
5a	During the year did the foundation pay or incur any amo		TIZO IMAY DE NEQ	uneu (continueu)	<u> </u>		
Ja	(1) Carry on propaganda, or otherwise attempt to influe		n 4945(a)\2	. Yes X No	,		
		•			'		
	(2) Influence the outcome of any specific public election (see section 4955); or to carry on,						
	directly or indirectly, any voter registration drive?					ł	
	(3) Provide a grant to an individual for travel, study, or o			• — —	'		
	(4) Provide a grant to an organization other than a						
	section 4945(d)(4)(A)? (see instructions)			• — —	'		
	(5) Provide for any purpose other than religious, cl purposes, or for the prevention of cruelty to children		• •		. '		
ь							
						ŀ	
	Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)?						
					Ш		
С	c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax						
	because it maintained expenditure responsibility for the	_		Yes No	'		
	If "Yes," attach the statement required by Regulations sec						
6a	Did the foundation, during the year, receive any fur	•					
	on a personal benefit contract?)		
Ь	Did the foundation, during the year, pay premiums, direc	tly or indirectly, on a	personal benefit contra	ict?	. <u>6b</u>		X
	If "Yes" to 6b, file Form 8870						
7a	At any time during the tax year, was the foundation a pa				-		
	If "Yes," did the foundation receive any proceeds or have						
	Information About Officers, Directo and Contractors		_		pioyees,		
1	List all officers, directors, trustees, foundation ma						
	(a) Name and address	(b) Title, and average hours per week	(c) Compensation (if not paid,	(d) Contributions to employee benefit plans	(e) Expens	e accou	nt,
TD 1/0	DANY ATTAON DANIE AT A	devoted to position	enter -0-)	and deferred compensation	Other an		•
	RGAN CHASE BANK, N.A.	TRUSTEE	10.040	_			
	DEARBORN ST;MC; IL1-0117, CHICAGO, IL 60603	2	19,940.	-0-		•	-0-
	RYDELL	CO-TRUSTEE					_
2390	BLACKHAWK ROAD, ROCKFORD, IL 61109	2	-0-	-0-			-0-
	Compensation of five highest-paid employees	/athor than the	a included on the	4 !	16		
2	"NONE."	totner than thos	se included on line	e i - see instruction	ons). IT no	one, e	enter
		(b) Title, and average		(d) Contributions to	(a) Comana		
(a)	Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	employee benefit plans and deferred	(e) Expens other all	owances	111, 3
NONE				compensation			
NONE			•	ا م			^
			-0-	-0-			-0-
	<u></u>						
Total	number of other employees paid over \$50,000	<u> </u>	<u> </u>	.		ONE	
					Form 996	0-PF /	20151

NONE	Five highest-paid independent contractors for professional services (see instructions). If none, enter "NON	E."
ONE	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
ONE		
		NONE
otal	number of others receiving over \$50,000 for professional services	NONE
Part	IX-A Summary of Direct Charitable Activities	
	the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of inizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1 <u>N</u> /	A	
_		
_		
2		
_		
3		
_		II.
4		
_		
	IV.D. Cummany of Bragger Bolated Investments (see instructions)	
		A
	ribe the two largest program-related investments made by the foundation during the tay year on lines 1 and 2	Amount
Desc	cribe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
		Amount
Desc		Amount
Desc		Amount
1 N /		Amount
1 <u>N/</u>	'A	Amount
1 <u>N/</u>	other program-related investments. See instructions	Amount
1 <u>N/</u>	other program-related investments. See instructions	Amount
1 <u>N</u> /	other program-related investments. See instructions	Amount

Part	X Minimum Investment Return (All domestic foundations must complete this part. Foreignee instructions.)	gn foundations,	·
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes:		
а	Average monthly fair market value of securities	1a 2	2,524,569.
b	Average of monthly cash balances	1b	112,179.
С	Fair market value of all other assets (see instructions)	1c	NONE
d	Total (add lines 1a, b, and c)	1d 2	2,636,748.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	NONE
3	Subtract line 2 from line 1d	3 2	2,636,748.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see		
	instructions)	4	39,551.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5 2	2,597,197.
6	Minimum investment return. Enter 5% of line 5	6	129,860.
Part	XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating found	dations	
	and certain foreign organizations check here ▶ and do not complete this part.)		
1	Minimum investment return from Part X, line 6	1	129,860.
2a	Tax on investment income for 2015 from Part VI, line 5		
b	Income tax for 2015. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	947.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	128,913.
4	Recoveries of amounts treated as qualifying distributions	4	12,500.
5	Add lines 3 and 4	5	141,413.
6	Deduction from distributable amount (see instructions)	6	NONE
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1	7	141,413.
Part	XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а		1a	553,734.
b	Program-related investments - total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	NONE
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	NONE
b	Cash distribution test (attach the required schedule)	3b	NONE
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	553,734.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.		
	Enter 1% of Part I, line 27b (see instructions)	5 N,	/A
6	Adjusted qualifying distributions. Subtract line 5 from line 4		553,734.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when ca		the foundation

Form **990-PF** (2015)

	t XIII Undistributed Income (see instru	uctions)			Page 3
		(a)	(b)	(c)	(d)
1	Distributable amount for 2015 from Part XI,	Corpus	Years prior to 2014	2014	2015
	fine 7			i	141,413.
_	Undistributed income, if any, as of the end of 2015			NONTH	
	Enter amount for 2014 only.		монт	NONE	
	Total for prior years 20_13_,20,20		NONE		
	Excess distributions carryover, if any, to 2015				
	From 2010				
	From 2011				
	From 2012				
	From 2013				
	From 2014 NONE	004 000			
	Total of lines 3a through e	984,082.			
	Qualifying distributions for 2015 from Part XII, line 4: ► \$ 553,734.			27027	
а	Applied to 2014, but not more than line 2a			NONE	
b	Applied to undistributed income of prior years (Election required - see instructions)		NONE		
c	Treated as distributions out of corpus (Election				
	required - see instructions)	NONB			
d	Applied to 2015 distributable amount				141,413.
е	Remaining amount distributed out of corpus	412,321.			
5	Excess distributions carryover applied to 2015 .	NONE			NONE
6	(If an amount appears in column (d), the same amount must be shown in column (a)) Enter the net total of each column as				
	indicated below:				
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	1,396,403.			
b	Prior years' undistributed income. Subtract		NONE		
_	line 4b from line 2b		NONE		
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)		MONTE		
	tax has been previously assessed		NONE		
d	Subtract line 6c from line 6b Taxable		NONE		
	amount - see instructions		NOINE		
Ŭ	4a from line 2a. Taxable amount - see instructions			NONE	
		, , ,			· · · · · · · · · · · · · · · · · · ·
1	Undistributed income for 2015. Subtract lines 4d and 5 from line 1. This amount must be			1	
	distributed in 2016				NONE
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)	NONE			
8	Excess distributions carryover from 2010 not applied on line 5 or line 7 (see instructions)	65,638.			
9	Excess distributions carryover to 2016.				
-	Subtract lines 7 and 8 from line 6a	1,330,765.			
10	Analysis of line 9:				
	Excess from 2011 425,584.				
ь	Excess from 2012 303,515.				
c	Excess from 2013 189, 345.				
	Excess from 2014 NONE				
d	110112	1		•	

Par	t XIV Private Ope	erating Foundations	(see instructions ar	nd Part VII-A, question	on 9)	NOT APPLICABLE
1 a	If the foundation has	received a ruling or d	etermination letter that	t it is a private opera	ating	_
	foundation, and the ruling	is effective for 2015, ent	ter the date of the ruling		▶	
b	Check box to indicate v	whether the foundation	is a private operating	foundation described in	section 4942(j)(3) or 4942(j)(5)
2.	Enter the lesser of the ad-	Tax year		Prior 3 years	•	(a) Tatal
2 a	justed net income from Part	(a) 2015	(b) 2014	(c) 2013	(d) 2012	(e) Total
	I or the minimum investment					
	return from Part X for each year listed					
h	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					
۵	of exempt activities					
٠	directly for active conduct of					
	exempt activities Subtract line					
3	2d from line 2c					
	alternative test relied upon					
а	"Assets" alternative test - enter					
	(1) Value of all assets (2) Value of assets qualifying					
	under section					
h	4942(j)(3)(B)(i) "Endowment" alternative test-					
_	enter 2/3 of minimum invest-					
	ment 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)					
	public and 5 or more					
	exempt organizations as provided in section 4942					
	(j)(3)(B)(m)			_		
	(3) Largest amount of sup- port from an exempt					
	organization					<u> </u>
	(4) Gross investment income	1. 1.6			b 65 000 -	
Par		itary information (Curing the year - see		only if the foundar	tion nad \$5,000 o	r more in assets at
1	Information Regarding					
	List any managers of	•		e than 2% of the tota	al contributions recei	ved by the foundation
	before the close of any	tax year (but only if th	ey have contributed n	nore than \$5,000). (Se	ee section 507(d)(2).)	vod by the loundation
	N/A					
		the foundation who	own 10% or more of	f the stock of a corp	oration (or an equal	ly large portion of the
-	ownership of a partner					,
		·		-		
	N/A					
2	Information Regarding	Contribution, Grant,	Gift, Loan, Scholarshi	p, etc., Programs:		
	Check here ▶ if t	he foundation only	makes contributions	to preselected chari	table organizations	and does not accept
						or organizations under
	other conditions, comp	olete items 2a, b, c, and	d d.			
a	The name, address, an	d telephone number o	r e-mail address of the	person to whom app	lications should be ac	ldressed.
	SEE STATEMENT	1				
b	The form in which app		omitted and information	on and materials they s	should include [.]	
	SEE ATTACHED ST					
С	Any submission deadli	nes:				
	SEE ATTACHED ST	TATEMENT FOR LI	NE 2			
						
đ	Any restrictions or li factors:	mitations on awards,	, such as by geogra	aphical areas, charita	ble fields, kinds of	institutions, or other
			TNT 0			
	SEE ATTACHED S.	FATEMENT FOR LI	.NL 4			

Page **11**

Part XV Supplementary Information (continued)								
3 Grants and Contributions Paid Durin	g the Year or Appro							
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount				
Name and address (home or business)	any foundation manager or substantial contributor	recipient	contribution	, and an				
a Paid during the year								
SEE STATEMENT 23				545,743.				
Total	<u> </u>			545,743.				
b Approved for future payment	<u> </u>		Sa	343,743.				
a Approved for future payment								
		l	<u>L.</u>					
Total								

JSA 5E1491 1 000

Form **990-PF** (2015)

Part XVI-	A Analysis of Income-Production	ucing Act	ivities			
	amounts unless otherwise indicated.	Unrela	ated business income	Excluded by	section 512, 513, or 514	(e) Related or exempt
		(a)	(b)	(c)	(d)	function income
1 Program	service revenue	Business code	Amount	Exclusion code	Amount	(See instructions)
a						
ь				-		
c						
d						
	·			···		
f						
g Fees	and contracts from government agencies				-	
2 Members	ship dues and assessments			-		
	n savings and temporary cash investments			14	59,662.	
	s and interest from securities			+ +	35,002.	
	al income or (loss) from real estate					
	financed property				-	
	lebt-financed property					
	income or (loss) from personal property.	1		 		
	vestment income	Į.		18	602.	
	oss) from sales of assets other than inventory					
	me or (loss) from special events · · · ofit or (loss) from sales of inventory					
11 Other rev	· · · · ·					
	X REFUND			14	2,547.	
					•	
е						
	. Add columns (b), (d), and (e)				62,811.	
	dd line 12, columns (b), (d), and (e)				13	62,811.
	eet in line 13 instructions to verify calci					
Part XVI-	B Relationship of Activities	s to the A	ccomplishment of E	Exempt Pur	poses	
Line No.	Explain below how each activit	v for which	h income is reported	in column (e) of Part XVI-A contrib	uted importantly to the
▼	accomplishment of the foundation					
<u> </u>	•	<u> </u>				
			NOW ADDITION			·
	-		NOT APPLICAB	<u>LE</u>		
				-		
				_		
			-			·
						
						
***			** · ****			

orm 990-PF Part XV	I Informa		egarding Tr	ansfers To and	l Transacti		-6692339 Relationships With	Nonch		_{age} 13 le
1 Did				engage in any of	the following	with any o	other organization desci	ribed	Yes	No
							tion 527, relating to pol			
orga	nizations?				-					
a Tran	sfers from the	reporting	foundation to	a noncharitable e	xempt organi	zation of:				
(1) (Cash					<i>.</i>		<u>1a</u>	(1)	X
									(2)	X
	er transactions:									
(1) \$	Sales of assets	to a none	charitable exen	npt organization.				16	(1)	X
(2) F	Purchases of as	sets fron	n a noncharitat	le exempt organi	zation			16	(2)	X
										X
								1		X
										Х
(6) F	Performance of	f services	or membershi	p or fundraising s	olicitations .		· · · · · · · · · · · · · · · · · · ·	1b	(6)	X
							· · · · · · · · · · · · · · · · · · ·		С	Х
							lumn (b) should always		ne fair	market
							the foundation received			
valu	e in any transa	action or	sharing arrang	gement, show in	column (d) tl	ne value of	the goods, other assets	s, or serv	ices re	ceived.
(a) Line no	(b) Amount ii	nvolved	(c) Name of	noncharitable exempt o	rganization	(d) Descrip	tion of transfers, transactions,	and sharing	arranger	nents
				•						
					•					
										•
					•					
						<u> </u>				
	 									
2a le th	e foundation	directly (or indirectly af	filiated with or re	elated to on	or more t	tax-exempt organization	15		
							27?		Yes	X No
	es," complete 1			ther than section	00 1(0)(0)/ 01	5001.011 0		· · · · <u> </u>	,	
<u> </u>	(a) Name of			(b) Type o	f organization		(c) Description of	relationship		
	(4)	ga <u>-</u>		(=, , , , , , ,			(4) 2 2 2 2 3 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4			
			•							
						<u> </u>				
						<u> </u>				
l ui	nder penalties of per	rjury, I decla	re that I have exam	ned this return, including	accompanying so	hedules and stat	tements, and to the best of my	knowledge a	nd belief.	ıt ıs true
C0				axpayer) is based on all in						
Sign	A. K.			08/25/	2016			the IRS d		
Here 🛛 🖁	Signature of officer		PRESIDEN.	00/25/ Date	2010	Title	with	the prepar	er show	$\overline{}$

Form **990-PF** (2015)

Paid

Preparer

Use Only

Print/Type preparer's name

CHRISTOPHER CHIZMAR

▶ DELOITTE TAX LLP

OH

Firm's address ▶ 127 PUBLIC SQUARE CLEVELAND

44114

Date

Check

08/25/2016 self-employed P01220103

Firm's EIN ▶ 86-1065772

216-589-5461

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.

Employer identification number

OMB No. 1545-0047

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

36-6692339 BERGSTROM INC CHARITABLE FOUNDATION Organization type (check one). Section: Filers of: 501(c)() (enter number) organization Form 990 or 990-EZ 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private 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) organization can check boxes for both the General Rule and a Special Rule. See instructions General Rule X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. **Special Rules** For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3 % support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (1) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions 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

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)

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).

Name of organization
BERGSTROM INC CHARITABLE FOUNDATION

Employer identification number 36-6692339

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.					
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
1	BERGSTROM INC. 2390 BLACKHAWK ROAD ROCKFORD, IL 61109	\$354,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
			Person Payroll Noncash (Complete Part II for noncash contributions.)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)			
(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.)			

FORM 990PF, PART I - OTHER INCOME ______

> REVENUE AND **EXPENSES** PER BOOKS

DESCRIPTION -----

2,547.

TAX REFUND

2,547.

TOTALS

==========

BERGSTROM INC CHARITABLE FOUNDATION

36-6692339

FORM 990PF, PART I - TAXES

	=========	============
TOTALS	695.	695.
FOREIGN TAXES ON NONQUALIFIED	129.	129.
FOREIGN TAXES ON QUALIFIED FOR	566.	566.
DESCRIPTION	PER BOOKS	INCOME
	EXPENSES	INVESTMENT
	AND	NET
	REVENUE	

BERGSTROM INC CHARITABLE FOUNDATION

36-6692339

FORM 990PF, PART I - OTHER EXPENSES

DESCRIPTION	EX	REVENUE AND PENSES R BOOKS	CHARITABLE PURPOSES	
ATTORNEY GENERAL FEE		15.	15.	
	TOTALS	15.	15.	

BERGSTROM INC CHARITABLE FOUNDATION FORM 990PF, PART XV - LINES 2a - 2d

RECIPIENT NAME:

DAVE RYDELL BERGSTROM INC

ADDRESS:

2390 BLACKHAWK ROAD

ROCKFORD, IL 61109

RECIPIENT'S PHONE NUMBER: 815-394-4655

FORM, INFORMATION AND MATERIALS:

OUTLINE PURPOSE OF PROPOSED GRANTS OR FUNDS INCLUDE COPY OF 501(C)(3) LETTER

SUBMISSION DEADLINES:

N/A

RESTRICTIONS OR LIMITATIONS ON AWARDS:

PREFERENCE TO IL RESIDENTS AND CHARITABLE ORGANIZATIONS OTHERS CONSIDERED FOR RELIGIOUS, CHARITABLE OR EDUCATIONAL PURPOSE

BERGSTROM INC CHARITABLE FOUNDATION 36-6692339 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID ______ RECIPIENT NAME: ROCKFORD MEMORIAL HOSPITAL ADDRESS: 2400 N ROCKTON AVE ROCKFORD, IL 61103 **RELATIONSHIP:** NONE PURPOSE OF GRANT: GENERAL FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID 3,750. RECIPIENT NAME: REGIONAL ACCESS MOBILIZATION PROJECT INC ADDRESS: 202 MARKET ST ROCKFORD, IL 61107 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID 2,500. RECIPIENT NAME: DISCOVERY CENTER MUSEUM OF ROCKFORD INC ADDRESS: 711 N MAIN STREET ROCKFORD, IL 61103 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID 5,000. BERGSTROM INC CHARITABLE FOUNDATION 36-6692339 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID _____ RECIPIENT NAME: ROCKFORD COLLEGE ADDRESS: 5050 E STATE STREET ROCKFORD, IL 61108 **RELATIONSHIP:** NONE PURPOSE OF GRANT: GENERAL FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID 50,000. RECIPIENT NAME: ROCKFORD SYMPHONY ORCHESTRA ADDRESS: 711 N MAIN STREET ROCKFORD, IL 61103 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL FOUNDATION STATUS OF RECIPIENT: PC RECIPIENT NAME: ROCKFORD RESCUE MISSION MINISTRIES ADDRESS: PO BOX 4083 ROCKFORD, IL 61110 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL

AMOUNT OF GRANT PAID

FOUNDATION STATUS OF RECIPIENT:

36-6692339 BERGSTROM INC CHARITABLE FOUNDATION FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID _____ RECIPIENT NAME: ROCKFORD AREA ARTS COUNCIL ADDRESS: 713 E STATE STREET ROCKFORD, IL 61104 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL FOUNDATION STATUS OF RECIPIENT: PC AMOUNT OF GRANT PAID 3,500. RECIPIENT NAME: ROCKFORD PARK DISTRICT ADDRESS: 401 S MAIN ST ROCKFORD, IL 61101 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL FOUNDATION STATUS OF RECIPIENT: PC AMOUNT OF GRANT PAID 10,000. RECIPIENT NAME: ROSECRANCE FOUNDATION ADDRESS: 3815 HARRISON AVENUE ROCKFORD, IL 61108 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID 10,000.

RECIPIENT NAME: BOY SCOUTS OF AMERICA - BLACKHAWK AREA COUNCIL ADDRESS: PO BOX 4085 ROCKFORD, IL 61110 RELATIONSHIP:

NONE

PURPOSE OF GRANT:

GENERAL

FOUNDATION STATUS OF RECIPIENT:

AMOUNT OF GRANT PAID 1,000.

RECIPIENT NAME: MILESTONE, INC

ADDRESS:

4060 MCFARLAND ROAD ROCKFORD, IL 61111

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

GENERAL

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID 5,000.

RECIPIENT NAME:

AUGUSTANA COLLEGE

ADDRESS:

639 - 39TH STREET

ROCK ISLAND, IL 61201

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

GENERAL

FOUNDATION STATUS OF RECIPIENT:

AMOUNT OF GRANT PAID 25,000. BERGSTROM INC CHARITABLE FOUNDATION 36-6692339 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID ______ RECIPIENT NAME: NORTHERN ILLINOIS FOOD BANK ADDRESS: 320 S AVON STREET ROCKFORD, IL 61102 **RELATIONSHIP:** NONE PURPOSE OF GRANT: **GENERAL** FOUNDATION STATUS OF RECIPIENT: PC AMOUNT OF GRANT PAID 3,500. RECIPIENT NAME: MOSAIC ADDRESS: 225 S THIRD STREET ROCKFORD, IL 61104 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL FOUNDATION STATUS OF RECIPIENT: PC AMOUNT OF GRANT PAID 30,000. RECIPIENT NAME: LUTHERAN SOCIAL SERVICE OF ILLIONOIS ADDRESS: 1001 E TOUHY DES PLAINES, IL 60018 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL FOUNDATION STATUS OF RECIPIENT: PC

AMOUNT OF GRANT PAID

BERGSTROM INC CHARITABLE FOUNDATION 36-6692339 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID _____ RECIPIENT NAME: THE LITERACY COUNCIL ADDRESS: 982 N MAIN STREET ROCKFORD, IL 61103 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL FOUNDATION STATUS OF RECIPIENT: PC AMOUNT OF GRANT PAID 2,500. RECIPIENT NAME: ROCKFORD ROTARY CHARITABLE FOUNDATION ADDRESS: N 401 WEST STATE STREET ROCKFORD, IL 61101 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL FOUNDATION STATUS OF RECIPIENT: PC 3,000. AMOUNT OF GRANT PAID RECIPIENT NAME: MIDWAY VILLAGE AND MUSEUM CENTER ADDRESS: 6799 GUILFORD ROAD ROCKFORD, IL 61107 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL FOUNDATION STATUS OF RECIPIENT: PC

AMOUNT OF GRANT PAID

RECIPIENT NAME:
ILLINOIS GROWTH ENTERPRISES

ILLINOIS GROWTH ENTERPRISES
ADDRESS:
6151 MONTAGUE ROAD
ROCKFORD, IL 61102
RELATIONSHIP:
NONE
PURPOSE OF GRANT:
GENERAL

NONE

PURPOSE OF GRANT:

RECIPIENT NAME:
CRUSADER HEALTH FOUNDATION
ADDRESS:
1200 W STATE ST
ROCKFORD, IL 61102
RELATIONSHIP:
NONE
PURPOSE OF GRANT:

12,500.

BERGSTROM INC CHARITABLE FOUNDATION 36-6692339 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID ______ RECIPIENT NAME: ALIGNMENT ROCKFORD ADDRESS: 815 N. CHURCH STREET ROCKFORD, IL 61101 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL FOUNDATION STATUS OF RECIPIENT: PC AMOUNT OF GRANT PAID 5,000. RECIPIENT NAME: BARBARA OLSON CENTER OF HOPE ADDRESS: 3206 N CENTRAL AVENUE ROCKFORD, IL 61101 **RELATIONSHIP:** NONE PURPOSE OF GRANT: GENERAL FOUNDATION STATUS OF RECIPIENT: PC AMOUNT OF GRANT PAID 5,000. RECIPIENT NAME: GOLDIE FLOBERG CENTER FOR CHILDREN ADDRESS: 58 W ROCKTON ROAD ROCKFORD, IL 61072 RELATIONSHIP: NONE PURPOSE OF GRANT: **GENERAL**

AMOUNT OF GRANT PAID

STATEMENT 12

PC

FOUNDATION STATUS OF RECIPIENT:

BERGSTROM INC CHARITABLE FOUNDATION 36-6692339 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID ______ RECIPIENT NAME: YMCA OF ROCK RIVER VALLEY ADDRESS: 200 Y BOULEVARD ROCKFORD, IL 61107 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID 25,000. RECIPIENT NAME: ALZHEIMERS ASSOCIATION ADDRESS: 4777 E STATE ST ROCKFORD, IL 61108 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID 2,500. RECIPIENT NAME: BOYS AND GIRLS CLUB OF HARRISON COUNTY INCORPORATED ADDRESS: PO BOX 1716 ROCKFORD, IL 61110 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL FOUNDATION STATUS OF RECIPIENT: PC

AMOUNT OF GRANT PAID

RECIPIENT NAME:

KEEP NORTHERN ILLINOIS BEAUTIFUL, INC.

ADDRESS:

5417 N 2ND ST.

LOVES PARK, IL 61111

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

GENERAL

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID

RECIPIENT NAME:
CARPENTERS PLACE
ADDRESS:
1149 RAILROAD AVE
ROCKFORD, IL 61104
RELATIONSHIP:
NONE
PURPOSE OF GRANT:
GENERAL

FOUNDATION STATUS OF RECIPIENT:
PC

RECIPIENT NAME:
CENTER FOR SIGHT AND HEARING
ADDRESS:
8038 MACINTOSH LANE
ROCKFORD, IL 61103
RELATIONSHIP:
NONE
PURPOSE OF GRANT:

GENERAL
FOUNDATION STATUS OF RECIPIENT:
PC

 BERGSTROM INC CHARITABLE FOUNDATION 36-6692339 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID ______ RECIPIENT NAME: COMMUNITY FOUNDATION OF NORTHERN ILLINOIS ADDRESS: 946 NORTH SECOND STREET ROCKFORD, IL 61107 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL FOUNDATION STATUS OF RECIPIENT: PC 5,000. AMOUNT OF GRANT PAID RECIPIENT NAME: CHILDRENS HOME AND AID SOCIETY ADDRESS: 910 2ND AVE 103 ROCKFORD, IL 61104 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL FOUNDATION STATUS OF RECIPIENT:

RECIPIENT NAME:

PHANTOM REGIMENT DRUM & BUGLE

CORPS

ADDRESS:

PC

5050 E STATE STREET

ROCKFORD, IL 61108

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

GENERAL

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID

BERGSTROM INC CHARITABLE FOUNDATION 36-6692339 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID ______ RECIPIENT NAME: ROCKFORD UNIVERSITY ADDRESS: 5050 E STATE ST. ROCKFORD, IL 61108 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL FOUNDATION STATUS OF RECIPIENT: PC RECIPIENT NAME: SWEDISH AMERICAN MEDICAL FOUNDATION ADDRESS: 1415 E STATE ST STE 100 ROCKFORD, IL 61104 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID 10,000. RECIPIENT NAME: ROCKFORD DANCE CO. SPECIAL GIFT FOR STUDIO PROJECT ADDRESS: 711 N MAIN ST Rockford, IL 61103 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL FOUNDATION STATUS OF RECIPIENT:

AMOUNT OF GRANT PAID

24,500.

BERGSTROM INC CHARITABLE FOUNDATION 36-6692339 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID ______ RECIPIENT NAME: VETERANS FOUNDATION OF ILLINOIS, INC. ADDRESS: 12914 WESTERN AVE, Blue Island, IL 60406 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL FOUNDATION STATUS OF RECIPIENT: PC AMOUNT OF GRANT PAID 2,500. RECIPIENT NAME: TRANSFORM ROCKFORD ADDRESS: 303 N MAIN, SUITE 110 ROCKFORD, IL 61101 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL FOUNDATION STATUS OF RECIPIENT: PC AMOUNT OF GRANT PAID 50,000. RECIPIENT NAME: PRESBYTERY OF BLACKHAWK, PRESBYTERIAN CHURCH ADDRESS: 1922 N ILLINOIS ROUTE 2, Oregon, IL 61061 RELATIONSHIP: NONE

AMOUNT OF GRANT PAID

STATEMENT 17

PURPOSE OF GRANT:

FOUNDATION STATUS OF RECIPIENT:

GENERAL

PC

2,500.

RECIPIENT NAME:
HOWARD CENTER FOR FAMILY
RELIGION AND SOCIETY
ADDRESS:
934 N MAIN ST
Rockford,, IL 61103
RELATIONSHIP:
NONE
PURPOSE OF GRANT:
GENERAL

GENERAL
FOUNDATION STATUS OF RECIPIENT:
PC
AMOUNT OF GRANT PAID

RECIPIENT NAME:
ILLINOIS EXECUTIVE MANSION
ASSOCIATION
ADDRESS:
410 E. JACKSON STREET
Springfield, IL 62704
RELATIONSHIP:
NONE
PURPOSE OF GRANT:
GENERAL

 BERGSTROM INC CHARITABLE FOUNDATION 36-6692339 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID ______ RECIPIENT NAME: BOYLAN CENTRAL CATHOLIC HIGH SCHOOL ADDRESS: 4000 SAINT FRANCIS DRIVE, Rockford, IL 61103 **RELATIONSHIP:** NONE PURPOSE OF GRANT: GENERAL FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID 16,668. RECIPIENT NAME: REMEDIES RENEWING LIVES ADDRESS: 516 GREEN ST, Rockford, IL 61102 **RELATIONSHIP:** NONE PURPOSE OF GRANT: **GENERAL** FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID 10,000. RECIPIENT NAME: MENDELSSOHN CLUB MENDELSSOHN CHORALE STARS AND STRIPES ADDRESS: 1218 LOCUST ST, Philadelphia, PA 19107 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL FOUNDATION STATUS OF RECIPIENT:

AMOUNT OF GRANT PAID

RECIPIENT NAME:

OSF HEALTHCARE SYSTEM

FOR GENERAL SUPPORT OF ST. ANTHONY HOSPI

ADDRESS:

800 NE GLEN OAK ,

Avenue Peoria, IL 61603

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

GENERAL

FOUNDATION STATUS OF RECIPIENT:

PC

RECIPIENT NAME:

ROCKFORD AREA CONVENTION AND

VISITORS BUREAU CHARITABLE FOUNDATION

ADDRESS:

102 N MAIN ST,

Rockford,, IL 61101

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

GENERAL

FOUNDATION STATUS OF RECIPIENT:

PC

RECIPIENT NAME:

BRAVEHEARTS THERAPEUTIC RIDING

AND EDUCATIONAL CENTER

ADDRESS:

7319 MAXON RD,

Harvard, IL 60033

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

GENERAL

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID 5,000.

BERGSTROM INC CHARITABLE FOUNDATION 36-6692339 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID -----RECIPIENT NAME: PILGRIM BAPTIST CHURCH ADDRESS: 1301 W 21ST AVE, Gary, IN 46407 **RELATIONSHIP:** NONE PURPOSE OF GRANT: GENERAL FOUNDATION STATUS OF RECIPIENT: PC AMOUNT OF GRANT PAID 25,000. RECIPIENT NAME: ST. PAUL LUTHERAN CHURCH YES CLUB ADDRESS: 67 N 5TH ST, Newark, OH 43055 RELATIONSHIP: NONE PURPOSE OF GRANT: **GENERAL** FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID 10,000. RECIPIENT NAME: KIWANIS CHARITIES OF ROCKFORD, INC. ADDRESS: 8472 ROCKFORD, IL 61126 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID 2,500.

BERGSTROM INC CHARITABLE FOUNDATION 36-6692339 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID RECIPIENT NAME: GIRL SCOUTS OF THE UNITED STATES OF AMERICA ADDRESS: 420 5TH AVE, New York, NY 10018 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL FOUNDATION STATUS OF RECIPIENT: PCAMOUNT OF GRANT PAID 1,500. RECIPIENT NAME: ANDERSON GARDENS ADDRESS: 318 SPRING CREEK RD ROCKFORD, IL 61107 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL FOUNDATION STATUS OF RECIPIENT: PC AMOUNT OF GRANT PAID 3,825. RECIPIENT NAME: YOUTH FOR CHRIST USA INC ADDRESS: 232 MAIN STREET NW BOURBONNAIS, IL 60914 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL FOUNDATION STATUS OF RECIPIENT:

AMOUNT OF GRANT PAID

BERGSTROM INC CHARITABLE FOUNDATION 36-6692339 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID ______ RECIPIENT NAME: GOODWILL INDUSTRIES OF NORTHERN ILLINOIS, INC. ADDRESS: 615 N. LONGWOOD STREET Rockford, IL 61110 **RELATIONSHIP:** NONE PURPOSE OF GRANT: GENERAL FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID 2,500.

TOTAL GRANTS PAID:

545,743.

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