Form **990-PF**

Return of Private Foundation

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

Room/suite

n this form as it may be made public. e instructions is at WWW.irs.gov/form990pf.

6 Open to Public Inspection

A Employer identification number

815-637-9584

f C If exemption application is pending, check here ... i >

D 1. Foreign organizations, check here

2. Foreign organizations meeting the 85% test, check here and attach computation

20-6368876

B Telephone number

OMB No. 1545-0052

Department of the Treasury Internal Revenue Service					instructions is a	
For calendar year 2016	or tax year beginning				, and endi	ng
Name of foundation						
THE KJELLS	TROM FAMIL	Y FOUN	DATION			
Number and street (or P.O.	box number if mail is not de	elivered to street	address)		Ro	om
6845 WEAVE	R ROAD					
City or town, state or pr ROCKFORD ,		P or foreign p	ostal code		·	
G Check all that apply:	Initial retur	n	Initial	return of a fo	ormer public char	rity
	Final return		Amer	nded return		
	Address ch	ange	Name	e change		
H Check type of organiz	ation: X Section	n 501(c)(3) ex	empt private fo	oundation		
Section 4947(a)(l) nonexempt charitable		Other taxable p		ation	
I Fair market value of al	assets at end of year	J Accounti	ng method:	X Cash	Accrual	
(from Part II, col. (c)	line 16)	0t	her (specify)			
▶\$	2,972,343.	(Part I, colu	mn (d) must l	be on cash l	basis.)	
	evenue and Expenses ounts in columns (b), (c), an		(a) Rever	nue and per books	(b) Net inves	

	\square Section 4947(a)(1) nonexempt charitable trust	E If private foundation status was terminated under section 507(b)(1)(A), check here▶				
	air market value of all assets at end of year J Accountin	Other taxable private founda	Accrual			
		her (specify)		F If the foundation is in		
	1011 Part II, coll. (c), line 10 (Part I, colline 10)	mn (d) must be on cash h	nasis)		1)(B), check here	
_	art Analysis of Revenue and Expenses			(a) Adjusted set	(d) Disbursements	
ГС	(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a).)	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	for charitable purposes (cash basis only)	
	1 Contributions, gifts, grants, etc., received			N/A	(cash basis only)	
	2 Check ► X if the foundation is not required to attach Sch. B			11/21		
	Check Check					
		58,270.	58,270.		STATEMENT 1	
	4 Dividends and interest from securities	50,270.	30,270.		SIAIEMENI I	
	5a Gross rents					
	b Net rental income or (loss)	<48,398.				
ne	6a Net gain or (loss) from sale of assets not on line 10	<40,390.	>			
en l	b assets on line 6a		0.			
Revenue	7 Capital gain net income (from Part IV, line 2)		0.			
	• Net short-term capital gain					
	9 Income modifications 10a and allowances					
	b Less: Cost of goods sold					
	c Gross profit or (loss)					
	11 Other income	0 070				
	12 Total. Add lines 1 through 11	9,872.	58,270.		0	
	13 Compensation of officers, directors, trustees, etc.	4,000.	0.		0.	
	14 Other employee salaries and wages					
ŝ	15 Pension plans, employee benefits					
Expenses	16a Legal fees					
be	b Accounting fees c Other professional fees STMT 2	26.620				
ũ	c Other professional fees STMT 2	36,639.	36,639.		0.	
tive	17Interest18TaxesSTMT	10.000	1 000			
itra	18 Taxes STMT 3	12,289.	1,999.		0.	
inis	19 Depreciation and depletion					
Щ,	20 Occupancy					
and Administrative	21 Travel, conferences, and meetings	140				
		140.	0.		0.	
ing	23 Other expenses STMT 4	47.	0.		0.	
perating	24 Total operating and administrative	F2 11F			0	
ope		53,115.	38,638.		0.	
0	25 Contributions, girts, grants paid	120,000.			120,000.	
	26 Total expenses and disbursements.	172 115			100.000	
	Add lines 24 and 25	173,115.	38,638.		120,000.	
	27 Subtract line 26 from line 12:	162 242				
	a Excess of revenue over expenses and disbursements	<163,243.	> 10 620			
	b Net investment income (if negative, enter -0-)		19,632.	NT / 7		
	C Adjusted net income (if negative, enter -0-)			N/A		

Foi	orm 990-PF (2016) THE KJELLSTROM FAMILY FOUNDATION 20-6368876 Page 2					
Ρ	art	II Balance Sheets Attached schedules and amounts in the description	Beginning of year	End of	-	
_			(a) Book Value	(b) Book Value	(c) Fair Market Value	
		Cash - non-interest-bearing	95,380.	115 /1/	115 /1/	
		Savings and temporary cash investments	95,300.	115,414.	115,414.	
	3		217.	211.	211.	
		Less: allowance for doubtful accounts	217.	211.	211.	
	4	Pledges receivable Less: allowance for doubtful accounts				
	5	Grants receivable				
	6	Receivables due from officers, directors, trustees, and other				
	ľ	disqualified persons				
	7	Other notes and loans receivable				
		Less: allowance for doubtful accounts				
ស	8	Inventories for sale or use				
Assets	9	Prepaid expenses and deferred charges				
Ÿ		Investments - U.S. and state government obligations				
	b	Investments - corporate stock				
	c	Investments - corporate bonds				
	11	Investments - land, buildings, and equipment: basis 🕨				
		Less: accumulated depreciation				
	12	Investments - mortgage loans				
	13	Investments - other STMT 5	2,987,896.	2,804,625.	2,856,718.	
	14	Land, buildings, and equipment: basis				
		Less: accumulated depreciation				
		Other assets (describe)				
	16	Total assets (to be completed by all filers - see the	3,083,493.	2,920,250.	2,972,343.	
_	17	instructions. Also, see page 1, item I)	5,005,495.	2,920,230.	2,972,943.	
Liabilities		Grants payable				
		Deferred revenue				
		Loans from officers, directors, trustees, and other disqualified persons				
abil		Mortgages and other notes payable				
Ë		Other liabilities (describe)				
		· · · · · · · · · · · · · · · · · · ·				
	23	Total liabilities (add lines 17 through 22)	0.	0.		
		Foundations that follow SFAS 117, check here				
ŝ		and complete lines 24 through 26 and lines 30 and 31.				
Ce	24	Unrestricted				
alar		Temporarily restricted				
Fund Balances	26	Permanently restricted				
Ē		Foundations that do not follow SFAS 117, check here > X				
	07	and complete lines 27 through 31.	3,083,493.	2,920,250.		
ets	27	Capital stock, trust principal, or current funds Paid-in or capital surplus, or land, bldg., and equipment fund	<u> </u>	2,920,230		
Net Assets or	28	Retained earnings, accumulated income, endowment, or other funds	0.	0.		
et /	30	Total net assets or fund balances	3,083,493.	2,920,250.		
z						
	31	Total liabilities and net assets/fund balances	3,083,493.	2,920,250.		
				· · · ·		
	art					
1		I net assets or fund balances at beginning of year - Part II, column (a), line 3	0			
	•				3,083,493.	
		r amount from Part I, line 27a			<163,243.>	
3	Uthe	r increases not included in line 2 (itemize)			U. 2 020 250	
		lines 1, 2, and 3			2,920,250.	
		I net assets or fund balances at end of year (line 4 minus line 5) - Part II, colu	umn (b), line 30		2,920,250.	
_			\ <i>//</i> ······························	•		

4	Add lines 1, 2, and 3
5	Decreases not included in line 2 (itemize)

2,920,250. Form **990-PF** (2016)

_			LSTROM FAMI						20-636	8876	Page 3
	•		nd(s) of property sold (e.g.		Income	(b)	How acquired	(a) Da	te acquired	(d) Dat	a cold
	2-story brick wa		or common stock, 200 shs			тер D	łow acquired - Purchase - Donation		, day, yr.)	(mo., da	ay, yr.)
<u>1a</u> b		SUDA	PEMENTS								
C		DIA.									
d											
e											
	(e) Gross sales price	(f)[Depreciation allowed (or allowable)		st or other basis expense of sale				Gain or (loss lus (f) minus		
a											
b											
<u></u>											
d 	1 501 250				1,569,75	6				<48	,398.>
	Complete only for assets showin	ng gain in i	l column (h) and owned by t			•••		(I) Gaine	(Col. (h) gain		,
	(i) F.M.V. as of 12/31/69		j) Adjusted basis as of 12/31/69	(k) Ex	cess of col. (i) col. (j), if any		C	οl. (k), bι	it not less that es (from col. (n -0-) or	
a											
b											
C											
d										- 10	- 2 0 0
e						_				<48	,398.>
2	Capital gain net income or (net ca	ıpital loss)	If gain, also enter If (loss), enter -0-			. }	2			<48	<u>,398.</u> >
	Net short-term capital gain or (los If gain, also enter in Part I, line 8, If (loca) enter 0, in Part I, line 8,	column (c	:).			}			N/A		
P	If (loss), enter -0- in Part I, line 8 Part V Qualification U		ection 4940(e) for		Tax on Net	. ノ Inv	3 estment In	come			
	or optional use by domestic private		· · · ·								
				10-10(u) tax on	not investment in	come	••)				
lf s	ection 4940(d)(2) applies, leave the	his part bla	ank.								
Wa	is the foundation liable for the sec	tion 4942	tax on the distributable am	ount of any ye	ear in the base per	iod?				Yes	X No
	Yes," the foundation does not qual										
1	Enter the appropriate amount in (each colur	• ,	structions be	fore making any e	ntries	•			(d)	
	(a) Base period years Calendar year (or tax year beginni	ng in)	(b) Adjusted qualifying dist		Net value of no		itable-use asset		Distrit (col. (b) div	(d) oution ratio rided by col.	
	2015			4,890.			,996,44				55029
	2014			7,819.			,673,71				59026
	2013			1,370.			,717,11				
	2012			3,000.			,656,01				23720
	2011		4	0,294.		1	,847,21	6.		• 0	21813
	Total of line 1, column (d)							2		.2	44741
	Average distribution ratio for the state foundation has been in existent		•	• •	•	-		3		.0	48948
4	Enter the net value of noncharitab	le-use ass	sets for 2016 from Part X, I	ine 5				4		2,930	,067.
5	Multiply line 4 by line 3							5		143	,421.
6	Enter 1% of net investment incon	ne (1% of	Part I, line 27b)					6			196.
7	Add lines 5 and 6							7		143	,617.
8	Enter qualifying distributions fron	n Part XII,	line 4					8		120	,000.
	If line 8 is equal to or greater than See the Part VI instructions.										

	-6368876	
Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948	3 - see instru	uctions)
1a Exempt operating foundations described in section 4940(d)(2), check here 🕨 🛄 and enter "N/A" on line 1.		
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 here 🕨 🗔 and enter 1% 🔰 🚺	I	393.
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-)	:	0.
3 Add lines 1 and 2 3		393.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		0.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	i	393.
6 Credits/Payments:		
a 2016 estimated tax payments and 2015 overpayment credited to 2016 6a 3,000.		
b Exempt foreign organizations - tax withheld at source 6b		
c Tax paid with application for extension of time to file (Form 8868) 6c		
d Backup withholding erroneously withheld 6d		
7 Total credits and payments. Add lines 6a through 6d7	,	3,000.
8 Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8	1	
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	0	2,607.
11 Enter the amount of line 10 to be: Credited to 2017 estimated tax ► 2,607. Refunded ► 1	1	0.
Part 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 participate or intervene 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)?	1b	X
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published	or	
distributed by the foundation in connection with the activities.		
c Did the foundation file Form 1120-POL for this year?	1 C	X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:		
(1) On the foundation. \blacktriangleright \$ 0. (2) On foundation managers. \blacktriangleright \$ 0.		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation		
managers. ▶ \$0.		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS?	2	X
If "Yes," attach a detailed description of the activities.		
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or		
bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		X
4a 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?	<u>N/A 4b</u>	177
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year?		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		
• By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law		
remain in the governing instrument?		X
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	7	X
· · · · · · · · · · · · · · · · · · ·		
8a Enter the states to which the foundation reports or with which it is registered (see instructions)		
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)		v
of each state as required by General Instruction G? If "No," attach explanation		X
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar		v
year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? <i>If "Yes," complete Part XIV</i>		
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10	

 Form 990-PF (2016)
 THE
 KJELLSTROM
 FAMILY
 FOUNDATION

 Part 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		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		Х	
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 ► DAN G. LOESCHER Telephone no. ► 815-63		584		
	Located at ► 6845 WEAVER ROAD, SUITE 200, ROCKFORD, IL				
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		/A		
16	At any time during calendar year 2016, 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				
	foreign country 🕨				
Pa	art 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? Yes 🗴 No				
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)				
	a disqualified person? Yes 🔀 No				
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes 🔀 No				
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?				
	(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 🗴 No				
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations				
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	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 2016?	1c		Х	
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 2016, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning				
	before 2016?				
	14 IV / II 1 - + - 4 •				
b	o 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.				
3a	▶,,, _,, _				
	during the year?				
ŀ	If "Yes," did it have excess business holdings in 2016 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 2016.)	3b			
4	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	τa			
L	had not been removed from jeopardy before the first day of the tax year beginning in 2016?	4b		Х	
		۳IJ		17	

Form **990-PF** (2016)

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Form 990-PF (2016) THE KJELLSTROM FAMILY FOUNDATION 20 Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)

5a During the year did the foundation pay or incur any amount to:				
(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	🗌 Ye	s 🛛 No		
(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly,				
any voter registration drive?	🗌 Ye	s 🛛 No		
(3) Provide a grant to an individual for travel, study, or other similar purposes?		s 🛛 No		
(4) Provide a grant to an organization other than a charitable, etc., organization described in section				
4945(d)(4)(A)? (see instructions)	🗌 Ye	s 🛛 No		
(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for				
the prevention of cruelty to children or animals?	🗌 Ye	s 🛛 No		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regul				
section 53.4945 or in a current notice regarding disaster assistance (see instructions)?		N/A	5b	
Organizations relying on a current notice regarding disaster assistance check here				
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained				
expenditure responsibility for the grant? N/A	🗌 Ye	s 🗌 No		
If "Yes," attach the statement required by Regulations section 53.4945-5(d).				
6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on				
a personal benefit contract?	🗌 Ye	s 🛛 No		
b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?			6b	Х
If "Yes" to 6b, file Form 8870.				
7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	🗌 Ye	s 🛛 No		
b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction?	<u></u>	N/A	7b	
Part VIII Information About Officers, Directors, Trustees, Foundation Manage Paid Employees, and Contractors	ers, Highly	/		

1 List all officers, directors, trustees, foundation managers and their compensation.

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
JANET ANN KJELLSTROM	TRUSTEE		·	
5901 CHURCHVIEW DRIVE	1			
ROCKFORD, IL 61107	0.50	1,000.	0.	0.
JON BATES	TRUSTEE			
946 N 2ND STREET	7			
ROCKFORD, IL 61107	0.50	0.	0.	0.
PAUL LOGLI	TRUSTEE			
612 N MAIN ST #300	7			
ROCKFORD, IL 61103	0.50	1,500.	0.	Ο.
DAN LOESCHER	TRUSTEE			
6845 WEAVER RD, SUITE 200	7			
ROCKFORD, IL 61114	0.50	1,500.	0.	Ο.
2 Compensation of five highest-paid employees (other than those in		enter "NONE."		
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE	•		compensation	
	-			
	-			
]			
Total number of other employees paid over \$50,000			>	0

Part VIII Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)	Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter "NC	NE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Tetel number of others receiving over \$50,000 for professional carviess		• 0
Total number of others receiving over \$50,000 for professional services		0
	<u> </u>	
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical in number of organizations and other beneficiaries served, conferences convened, research papers produced,	etc.	Expenses
1SEE PART XV - LINE 3A		
		0.
2		
3		
4		
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on lines	1 and 2.	Amount
1 N/A		
2		
All other program-related investments. See instructions.		
3		
Total. Add lines 1 through 3	►	0.

THE KJELLSTROM FAMILY FOUNDATION

For	m 990-PF (2016) THE KJELLSTROM FAMILY FOUR	NDATION		20-	6368876	Page 8
Ρ	art X Minimum Investment Return (All domestic foundations	must complete this pa	rt. Foreign four	ndations, s	ee instructions.)	
1	Fair market value of assets not used (or held for use) directly in carrying out charita	ıble, etc., purposes:				
a	Average monthly fair market value of securities			1a	2,837	
	Average of monthly cash balances			1b	137	,037.
C	Fair market value of all other assets			1c		18.
d	Total (add lines 1a, b, and c)			1d	2,974	,687.
е	Reduction claimed for blockage or other factors reported on lines 1a and					
	1c (attach detailed explanation)	1e	0.			
2	Acquisition indebtedness applicable to line 1 assets			2		0.
3	Subtract line 2 from line 1d			3	2,974	,687.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amound	nt, see instructions)		4		,620.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and	on Part V, line 4		5	2,930	
6	Minimum investment return. Enter 5% of line 5			6	146	,503.
Ρ	art XI Distributable Amount (see instructions) (Section 4942(j)(3)		g foundations an	d certain		
	foreign organizations check here 🕨 🥅 and do not complete this par	rt.)				
1	Minimum investment return from Part X, line 6			1	146	,503.
2a	Tax on investment income for 2016 from Part VI, line 5	2a	393.			
b	Income tax for 2016. (This does not include the tax from Part VI.)	2b				
C	Add lines 2a and 2b			2c		393.
3	Distributable amount before adjustments. Subtract line 2c from line 1			3	146	,110.
4	Recoveries of amounts treated as qualifying distributions			4		0.
5	Add lines 3 and 4			5	146	,110.
6	Deduction from distributable amount (see instructions)			6		0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Pa			7	146	,110.
P	art XII Qualifying Distributions (see instructions)					
-						
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., pa	-			100	
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26			1a 🛛	120	<u>,000.</u>
b	Program-related investments - total from Part IX-B			1b		0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charit	table, etc., purposes		2		
3	Amounts set aside for specific charitable projects that satisfy the:					
a	Suitability test (prior IRS approval required)			3a		
b	Cash distribution test (attach the required schedule)			3b		
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8,	and Part XIII, line 4		4	120	,000.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net inv					
	income. Enter 1% of Part I, line 27b			5		0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4			6	120	,000.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years 4940(e) reduction of tax in those years.			ualifies for	the section	

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2015	(c) 2015	(d) 2016
1 Distributable amount for 2016 from Part XI,	001000		2010	
line 7				146,110.
2 Undistributed income, if any, as of the end of 2016:			0	
a Enter amount for 2015 only			0.	
b Total for prior years:		0.		
3 Excess distributions carryover, if any, to 2016:		0.		
h Europa 0040				
F 0040				
f Total of lines 3a through e	25,638.			
4 Qualifying distributions for 2016 from	23,030.			
Part XII, line 4: ►\$ 120,000.				
a Applied to 2015, but not more than line 2a			0.	
b Applied to undistributed income of prior				
years (Election required - see instructions)		ο.		
c Treated as distributions out of corpus				
(Election required and instructions)	Ο.			
d Applied to 2016 distributable amount				120,000.
e Remaining amount distributed out of corpus	0.			
ů i i	25,638.			25,638.
5 Excess distributions carryover applied to 2016 (If an amount appears in column (d), the same amount must be shown in column (a).)	23,0301			2370301
6 Enter the net total of each column as indicated below:				
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5 \dots	0.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of				
deficiency has been issued, or on which				
the section 4942(a) tax has been previously				
assessed		0.		
d Subtract line 6c from line 6b. Taxable		0		
amount - see instructions		0.		
e Undistributed income for 2015. Subtract line			0	
4a from line 2a. Taxable amount - see instr			0.	
f Undistributed income for 2016. Subtract				
lines 4d and 5 from line 1. This amount must				472.
be distributed in 2017				4/2•
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required - see instructions)	0.			
8 Excess distributions carryover from 2011				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2017.	J•			
Subtract lines 7 and 8 from line 6a	Ο.			
10 Analysis of line 9:	5.			
a Excess from 2012				
b Excess from 2013				
c Excess from 2014				
d Excess from 2015				
e Excess from 2016				

Part XIV Private Operating Fo	undations (see in:	structions and Part VII	-A, question 9)	N/A	
1 a If the foundation has received a ruling or o	letermination letter that	it is a private operating			
foundation, and the ruling is effective for 2	016, enter the date of t	he ruling			
b Check box to indicate whether the foundat				4942(j)(3) or 🗌 4942	2(j)(5)
2 a Enter the lesser of the adjusted net	Tax year	-	Prior 3 years		
income from Part I or the minimum	(a) 2016	(b) 2015	(c) 2014	(d) 2013	(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					
exempt activities					
e Qualifying distributions made directly					
for active conduct of exempt activities.					
Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the					
alternative test relied upon: a "Assets" alternative test - enter:					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter					
2/3 of minimum investment return					
shown in Part X, line 6 for each year					
listed c "Support" alternative test - enter:					
(1) Total support other than gross					
investment income (interest,					
dividends, rents, payments on					
securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public					
and 5 or more exempt					
organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from					
an exempt organization					
(4) Gross investment income					
Part XV Supplementary Inform	nation (Comple	te this part only	if the foundation	had \$5,000 or mor	e in assets
at any time during th					

THE KJELLSTROM FAMILY FOUNDATION

1 Information Regarding Foundation Managers:

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

JANET ANN KJELLSTROM

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

NONE

Form 990-PF (2016)

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

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

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

SEE STATEMENT 6

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

c Any submission deadlines:

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

20-6368876

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3 Grants and Contributions Paid During the		Payment		
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
MIDWAY VILLAGE MUSEUM	NONE	PUBLIC	SOCIAL WELFARE	
6799 GUILFORD ROAD				
ROCKFORD, IL 61107				5,000
ETHNIC HERITAGE MUSEUM	NONE	PUBLIC	SOCIAL WELFARE	
1129 S MAIN STREET				
ROCKFORD, IL 61101				20,000.
BOY SCOUTS OF AMERICA	NONE	PUBLIC	SOCIAL WELFARE	
2820 MCFARLAND ROAD				20.000
ROCKFORD, IL 61107				20,000.
COMMUNITY FOUNDATION OF NORTHERN	NONE	PUBLIC	SOCIAL WELFARE	
ILLINOIS	NONE	TOPHIC	BOCIAL WEIFARE	
946 N 2ND STREET				
ROCKFORD, IL 61107				5,000.
FRIENDS OF THE CORONADO	NONE	PUBLIC	ARTS	
314 N MAIN STREET				
ROCKFORD, IL 61101				10,000.
Total SEE CO	NTINUATION SHE	ET(S)	> 3a	120,000.
b Approved for future payment				
NONE				
Total			► 3b	0.

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.	Unrelate	ed business income		ded by section 512, 513, or 514	(e)
	(a) Business code	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income
1 Program service revenue: a	COUE		couc		
a					
с					
d					
۵					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments					
4 Dividends and interest from securities			14	58,270.	
5 Net rental income or (loss) from real estate:					
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal					
property					
7 Other investment income					
8 Gain or (loss) from sales of assets other			1 1 0	40.000	
than inventory			18	<48,398.>	•
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory			_		
11 Other revenue:					
a					
D					
C					
e		0		9,872.	0.
2 Subtotal. Add columns (b), (d), and (e)					9,872.
13 Total . Add line 12, columns (b), (d), and (e)				ـــــــــــــــــــــــــــــــــــــ	9,012.
See worksheet in line 13 instructions to verify calculations.)					
Part XVI-B Relationship of Activities to	o the Acco	omplishment of E	xemp	t Purposes	
Line No. Explain below how each activity for which incon	ne is reported	in column (e) of Part XVI-	A contrit	outed importantly to the accomm	olishment of
the foundation's exempt purposes (other than b					
N/A					

Form	990-PF	(201	6)
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ROCKFORD, IL 61114

Part :		Information Re		sfers To a	and Transactions a	and Relation	ships With No	ncharitable		ige io
1 Dia		Exempt Organ		- 6 41 6 - 11					Vee	No
					g with any other organizati		ection 50 I(C) of		Yes	NO
		from the reporting found			27, relating to political organ	1128110115?				
					-			10(1)		x
										X
		assets						1a(2)		
			bla avomat organiza	tion				16(1)		x
(1)	Durch	or assets to a nonunania	ncharitable exempt (arganization						X
(2)	Pulcii	ases of assets from a no	or other accete	UI YAIIIZALIUII				ID(2)		X
										X
										X
		mance of services or me								X
• • •				-						X
					ployees dule. Column (b) should al					<u></u>
					ed less than fair market val				5615,	
) the value of the goods,				ue in any nansau	on or sharing arrange	ineni, snow in		
(a)Line n		(b) Amount involved			e exempt organization	(d) Deseries	ion of transfers, transaction	and charing a		
	0.			N/A		(u) Descript	ion of transfers, transaction	ons, and sharing a	rangeme	ms
			<u> </u>	N/A						
			<u> </u>							
	_									
			<u> </u>							
			<u> </u>							
	Ļ									
					or more tax-exempt organ			<u> </u>	37	а
)(3)) or in sect	tion 527 ?			Ves	Ă	No
b If "	Yes," co	mplete the following sch			(h) Turne of experimetion	1	(a) Description of w	alationabia		
		(a) Name of org	Jamzation		(b) Type of organization		(c) Description of re	elationship		
		N/A								
	Lindor	penalties of perium. I doctors	that I have examined the	is return includia	g accompanying schedules and	statements and to t	he hest of my knowledge			
Cian					n taxpayer) is based on all inforr			May the IRS return with th	discuss e prepar	this rer
Sign Here					1			shown below	(see ins	str.)?
nere	Sign	ature of officer or trustee			Data	TRUST	L'EE	_ X Yes	; L	_ No
	Sigli	Print/Type preparer's na		Dranarar's a	Date	Title Date	Check if	PTIN		
		i i inivi ype preparer S lla	ame	Preparer's s	iynature	Date	self- employed			
Paid			CUED				Jon Unpityeu		560	
Prepa	arer	DAN G. LOE					Firm's EIN ► 3	P00096		
Use		Firm's name LOE	IDCUEK & A	ALJUGG	тер, ЦТД.		FIRM'S EIN 5	0-40300	00	
000	y	Firm's address ► 68	45 WEAVEE		SUTTE 200					

Phone no. 815-637-9584 Form **990-PF** (2016)

(a) List and describe the kind(s) of property sold, e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.(b) How acquired P - Purchase D - Donation(c) Date acquired (mo., day, yr.)(d) Date sold (mo., day, yr.)1aSEEATTACHEDRAYMONDJAMESSTATEMENTA/C77128837PbSEEATTACHEDRAYMONDJAMESSTATEMENTA/C77128837PcSEEATTACHEDRAYMONDJAMESSTATEMENTA/C77128837PdSEEATTACHEDRAYMONDJAMESSTATEMENTA/C3510P057PeSEEATTACHEDRAYMONDJAMESSTATEMENTA/C3510P057PfSEEATTACHEDRAYMONDJAMESSTATEMENTA/C3510P057PgSEEATTACHEDRAYMONDJAMESSTATEMENTA/C3510P057PgSEEATTACHEDRAYMONDJAMESSTATEMENTA/C3510P057PgSEEATTACHEDRAYMONDJAMESSTATEMENTA/C78875792PhSEEATTACHEDRAYMONDJAMESSTATEMENTA/C78875792PjSEEATTACHEDRAYMONDJAMESSTATEMENTA/C78875792PiSEEATTACHEDRAYMONDJAMESSTATEMENTA/C78875792P
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f SEEATTACHEDRAYMONDJAMESSTATEMENTA/C3510P057Pg SEEATTACHEDRAYMONDJAMESSTATEMENTA/C3510P057Ph SEEATTACHEDRAYMONDJAMESSTATEMENTA/C78875792Pi SEEATTACHEDRAYMONDJAMESSTATEMENTA/C78875792Pj SEEATTACHEDRAYMONDJAMESSTATEMENTA/C78875792P
g SEE ATTACHED RAYMOND JAMES STATEMENT A/C 3510P057Ph SEE ATTACHED RAYMOND JAMES STATEMENT A/C 78875792Pi SEE ATTACHED RAYMOND JAMES STATEMENT A/C 78875792Pj SEE ATTACHED RAYMOND JAMES STATEMENT A/C 78875792P
h SEE ATTACHED RAYMOND JAMES STATEMENT A/C 78875792Pi SEE ATTACHED RAYMOND JAMES STATEMENT A/C 78875792Pj SEE ATTACHED RAYMOND JAMES STATEMENT A/C 78875792P
i SEE ATTACHED RAYMOND JAMES STATEMENT A/C 78875792Pj SEE ATTACHED RAYMOND JAMES STATEMENT A/C 78875792P
j SEE ATTACHED RAYMOND JAMES STATEMENT A/C 78875792 P
k SEE ATTACHED RAYMOND JAMES STATEMENT A/C 78875792 P + SEE ATTACHED RAYMOND JAMES STATEMENT A/C 78875792 P
m COST BASIS ADJUSTMENT P
o (f) Depreciation allowed (g) Cost or other basis (h) Gain or (loss)
(e) Gross sales price (or allowable) plus expense of sale (e) plus (f) minus (g)
a 325,492. 315,902. 9,590
b 178,618. 177,302. 1,316
c 71,677. 0 000 000 000 000 000 000 000 000 00
d 284,920. <a>288,796. <3,876
e 1,064. 1,161. <97
f 3,899. 3,705. 194 g 7,253. 6,926. 327
h 457,874. 514,143. <56,269 i 2,715. 3,874. <1,159
<u>i 2,715.</u> <u>3,874.</u> <1,159 <u>j 165,540.</u> 172,594. <7,054
$\frac{k}{13,783}$ 13,676. 107
m /,946. /,946 n 262. 262
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (I) Losses (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 of col. (h) gain over col. (k), but not less than "-0-")
a 9,590
b 1,316
<u>c</u> 0
d <3,876
e <97
f 194
g 327
h <56,269
i <1,159
j <7,054
k 107
1 315 7 946
m 7,946
2 Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7 } 2 <48,398
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6):
If gain, also enter in Part I, line 8, column (c). If (loss), enter "-0-" in Part I, line 8 N/A

THE KJELLSTROM FAMILY FOUNDATION

20-6368876

Part XV Supplementary Information				
3 Grants and Contributions Paid During the Ye	ear (Continuation)			
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)	or substantial contributor	recipient	Contribution	
	NONE	PUBLIC	SOCIAL WELFARE	
200 Y BLVD ROCKFORD, IL 61107				60,000.
Total from continuation sheets	I	L	I	60,000.

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

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

2016

Employer identification number

Name of the	organization
-------------	--------------

THE KJELLSTROM FAMILY FOUNDATION

20-	630	688	76

Organization type (check or	ne):
Filers of:	Section:
Form 990 or 990-EZ	501(c)() (enter number) organization
	4947(a)(1) nonexempt charitable trust not treated as a private foundation
	527 political organization
Form 990-PF	X 501(c)(3) exempt private foundation
	4947(a)(1) nonexempt charitable trust treated as a 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

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't 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 isn't covered by the General Rule and/or the Special Rules doesn't 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 doesn't 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) (2016)

Name of organization

Employer identification number

THE KJELLSTROM FAMILY FOUNDATION

20-6368876

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	JANET ANN KJELLSTROM 5901 CHURCHVIEW DRIVE #26 ROCKFORD, IL 61107	\$	Person Payroll Noncash X (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			
	Name, address, and ZIP + 4	\$	Person Payroll OKAN Payroll OKA			
(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 One Noncash (Complete Part II for noncash contributions.)			

Schedule B (Form 990, 990-EZ, or 990-PF) (2016)

623452 10-18-16

20-6368876

THE KJELLSTROM FAMILY FOUNDATION

Part II Noncash Property (See instructions). Use duplicate copies of Part II if additional space is needed.

Part II	Noncash Property (See instructions). Use duplicate copies of Pa	rt 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	(c) FMV (or estimate) (See instructions)	(d) Date received
_		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
			00 000 E7 or 000 DE\ /2

Schedule B (Form 990, 990-EZ, or 990-PF) (2016)

Schedule B (Form 990, 990-EZ, or 990-PF) (2016)				
Name of organization				

Page 4

Name of orga	anization		Employer identification number		
тне кј	ELLSTROM FAMILY FOUNDA	TION	20-6368876		
Part III		tributions to organizations described columns (a) through (e) and the follo us, charitable, etc., contributions of \$1,000 o	d in section 501(c)(7), (8), or (10) that total more than \$1,000 f owing line entry. For organizations		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
 		(e) Transfer of git			
	Transferee's name, address, a	Ind ZIP + 4	Relationship of transferor to transferee		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
_	(e) Transfer Transferee's name, address, and ZIP + 4		of gift Relationship of transferor to transferee		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
	(e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee				
			Relationship of transferor to transferee		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
-	(e) Transfer of gift				
	Transferee's name, address, a	Ind ZIP + 4	Relationship of transferor to transferee		

FORM 990-PF	DIVIDENDS	AND INTER	EST FROM SECUR	ITIES ST	PATEMENT 1
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDEND	REVENUE	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
RAYMOND JAMES A/C#3510P057 RAYMOND JAMES	4,925.	7	0. 4,855.	4,855.	
A/C#51972471	34.		0. 34.	34.	
RAYMOND JAMES A/C#77128837	22,686.		0. 22,686.	22,686.	
RAYMOND JAMES A/C#78875792	30,887.	19	2. 30,695.	30,695.	
TO PART I, LINE 4	58,532.	26	2. 58,270.	58,270.	
FORM 990-PF	ОТ	HER PROFES	SIONAL FEES	SI	CATEMENT 2
		(A) EXPENSES	(B) NET INVEST-	(C) ADJUSTED	(D) CHARITABLE
DESCRIPTION		PER BOOKS	MENT INCOME	NET INCOME	PURPOSES
DESCRIPTION INVESTMENT MANAGEMENT					
	 F FEES	PER BOOKS	MENT INCOME		PURPOSES
INVESTMENT MANAGEMENT	 F FEES	PER BOOKS 36,639.	MENT INCOME 36,639. 36,639.	NET INCOME	PURPOSES
INVESTMENT MANAGEMENT TO FORM 990-PF, PG 1	F FEES	PER BOOKS 36,639. 36,639.	MENT INCOME 36,639. 36,639.	NET INCOME	PURPOSES 0. 0.
INVESTMENT MANAGEMENT TO FORM 990-PF, PG 1, FORM 990-PF	F FEES	PER BOOKS 36,639. 36,639. TAX (A) EXPENSES	MENT INCOME 36,639. 36,639. 36,639. ES (B) NET INVEST-	NET INCOME	PURPOSES 0. 0. 0. CATEMENT 3 (D) CHARITABLE
INVESTMENT MANAGEMENT TO FORM 990-PF, PG 1 FORM 990-PF DESCRIPTION FOREIGN TAXES ON INVESTMENTS	F FEES	PER BOOKS 36,639. 36,639. TAX (A) EXPENSES PER BOOKS 1,999.	MENT INCOME 36,639. 36,639. 36,639. ES (B) NET INVEST- MENT INCOME 1,999.	NET INCOME	PURPOSES 0. 0. 0. CATEMENT 3 (D) CHARITABLE PURPOSES 0.

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FORM 990-PF	OTHER EXPENSES		STATEMENT 4	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ANNUAL STATE FILING FEE DIV PD ON SHORT POSITION	15. 32.	0.0.		0.0.
TO FORM 990-PF, PG 1, LN 23	47.	0.		0.

FORM 990-PF OTHER	INVESTMENTS		STATEMENT 5
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
SEE ATTACHED STATEMENT A/C#77128837 SEE ATTACHED STATEMENT A/C#78875792 SEE ATTACHED STATEMENT A/C#3510P057	COST COST COST	993,477. 1,515,937. 295,211.	989,938. 1,570,653. 296,127.
TOTAL TO FORM 990-PF, PART II, LINE 1	-	2,804,625.	2,856,718.

FORM 990-PF

GRANT APPLICATION SUBMISSION INFORMATION PART XV, LINES 2A THROUGH 2D

STATEMENT 6

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

DAN LOESCHER 6845 WEAVER ROAD, SUITE 200 ROCKFORD, IL 61114

TELEPHONE NUMBER

815-637-9584

EMAIL ADDRESS

KJELLSTROMFDN@LAWEALTH.COM

FORM AND CONTENT OF APPLICATIONS

ORGANIZATIONS ARE REQUIRED TO COMPLETE THE GRANT APPLICATION AND INCLUDE SPECIFIED ADDITIONAL SUPPORTING INFORMATION.

ANY SUBMISSION DEADLINES

GRANT APPLICATIONS ARE REVIEWED THREE TIMES A YEAR.

RESTRICTIONS AND LIMITATIONS ON AWARDS

NONE