Form **990-PF** Department of the Treasury Internal Revenue Service

Taxes STMT

21 Travel, conferences, and meetings

Depreciation and depletion

Occupancy

18

19 20

EXTENDED TO NOVEMBER 15, 2018

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.

ntern	nal Revenue Service Go to ww	w.irs.gov/Form990PF for inst	ructions and the latest in	formation.	Open to Public Inspection
For	calendar year 2017 or tax year beginning		, and ending		
Nar	me of foundation			A Employer identification	n number
	THE KJELLSTROM FAMILY FOU			20-6368876	
	mber and street (or P.O. box number if mail is not delivered to str	eet address)	Room/suite	B Telephone number	
	845 WEAVER ROAD			815-637-95	84
	y or town, state or province, country, and ZIP or foreig COCKFORD,IL 61114	n postal code		C If exemption application is p	pending, check here
G C	Check all that apply: Initial return	Initial return of a fo	ormer public charity	D 1. Foreign organization	s, check hereÞ
	Final return	Amended return		0	
	Address change	Name change		2. Foreign organizations me check here and attach co	omputation
нc		exempt private foundation		E If private foundation sta	
	Section 4947(a)(1) nonexempt charitable trust		ation	under section 507(b)(1)(A), check here …
		inting method: X Cash	Accrual	F If the foundation is in a	
•	rom Part II, col. (c), line 16)	Other (specify)	· .	under section 507(b)(1)(B), check here …▶
-	\$ 11,150,442. (Part I, co				(4)
Pa	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may no necessarily equal the amounts in column (a).)		(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
	1 Contributions, gifts, grants, etc., received	3,817,945.		N/A	
	2 Check 🕨 🗴 if the foundation is not required to attach Sch. B				
	 2 Check X if the foundation is not required to attach Sch. B 3 Interest on savings and temporary cash investments 				
	4 Dividends and interest from securities		92,650.		STATEMENT 1
	5a Gross rents				
	b Net rental income or (loss)				
e	6a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a 2,097,538	151,520.			
Revenue	b assets on line 6a 2,097,538.				
Sev	7 Capital gain net income (from Part IV, line 2)		151,520.		
"	8 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	4,124,002.			STATEMENT 2
	12 Total. Add lines 1 through 11	0 5 0 0	2,4/1,06/		0.
	13 Compensation of officers, directors, trustees, etc.		0.		0.
	14 Other employee salaries and wages				
ŝ	15 Pension plans, employee benefits				
Expenses	16a Legal fees	21,300.	0.		0
xpe	b Accounting fees STMT 3	31,735.	31,735.		
Ш е			JI,/35.		0.
ive	17 Interest				

3,151.

and Administrative Printing and publications 22 Other expenses STMT 6 30. 0. Operating 23 24 Total operating and administrative 59,716. 34,886. expenses. Add lines 13 through 23 194,800. **25** Contributions, gifts, grants paid 26 Total expenses and disbursements. 254,516 34,886. Add lines 24 and 25 27 Subtract line 26 from line 12: 7,931,601. **a** Excess of revenue over expenses and disbursements 2,436,181. b Net investment income (if negative, enter -0-)_____ N/A C Adjusted net income (if negative, enter -0-).

5

3,151.

723501 01-03-18 LHA For Paperwork Reduction Act Notice, see instructions.

0.

0.

0.

194,800.

194,800.



Form 990-PF (2017) THE KJELLSTROM FAMILY E			FOUNDATION	6368876 Page 2	
Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only.		Balance Sheets Attached schedules and amounts in the description	Beginning of year	End o	
F			(a) Book Value	(b) Book Value	(c) Fair Market Value
		Cash - non-interest-bearing		4 224 205	4 224 205
		Savings and temporary cash investments	115,414.	4,331,287.	4,331,287.
	3	Accounts receivable			
		Less: allowance for doubtful accounts	211.		
	4	Pledges receivable			
	_	Less: allowance for doubtful accounts			
		Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
	_	disqualified persons			
	'	Other notes and loans receivable			
		Less: allowance for doubtful accounts			
Assets		Inventories for sale or use			
Ass		Prepaid expenses and deferred charges			
		Investments - corporate stock Investments - corporate bonds			
		Investments - land, buildings, and equipment: basis			
	''	Less: accumulated depreciation			
	12	Less: accumulated depreciation			
	13	Investments - other STMT 8	2,804,625.	6,080,208.	6,819,155.
	14	Land, buildings, and equipment: basis		0,000,2000	0,010,1001
	··	Less: accumulated depreciation			
	15	Other assets (describe ►)		
		Total assets (to be completed by all filers - see the	·		
		instructions. Also, see page 1, item I)	2,920,250.	10,411,495.	11,150,442.
	17	Accounts payable and accrued expenses			
		Grants payable			
S		Deferred revenue			
Liabilities		Loans from officers, directors, trustees, and other disqualified persons			
abi	21	Mortgages and other notes payable			
	22	Other liabilities (describe 🕨)		
	23	Total liabilities (add lines 17 through 22)	. 0.	0.	
		Foundations that follow SFAS 117, check here			
6		and complete lines 24 through 26, and lines 30 and 31.			
Ce	24	Unrestricted			
Net Assets or Fund Balances		Temporarily restricted			
Ä	26	Permanently restricted			
ŭ		Foundations that do not follow SFAS 117, check here $\dots \blacktriangleright X$			
Ĕ		and complete lines 27 through 31.		0 000 050	
ts o		Capital stock, trust principal, or current funds		2,920,250.	
sse		Paid-in or capital surplus, or land, bldg., and equipment fund		0.	
μĂ		Retained earnings, accumulated income, endowment, or other funds		7,491,245.	
ž	30	Total net assets or fund balances	2,920,250.	10,411,495.	
		Table 19 - F 19 Provide and a state of the Manual Kalana and	2 0 2 0 2 5 0	10 /11 /05	
_	31	Total liabilities and net assets/fund balances		10,411,495.	
Ρ	art	Analysis of Changes in Net Assets or Fund	Balances		
1	Total	net assets or fund balances at beginning of year - Part II, column (a), li	ne 30		
		t agree with end-of-year figure reported on prior year's return)		1	2,920,250.
2					7,931,601.
3	Othe	amount from Part I, line 27a r increases not included in line 2 (itemize) ► BASIS ADJU	STMENTS	3	2,509.
		ines 1, 2, and 3			10,854,360.
5	Decr	eases not included in line 2 (itemize) 🕨	SEE STA		442,865.

_	· · · · ·		LSTROM FAMI						2	20-636	8876	Page 3
	(a) List and describe	the kind(s)	of property sold (for exan r common stock, 200 shs.	nple, real esta		(b) P D	How ac - Purc - Dona	quired hase ation		e acquired day, yr.)	(d) Dat (mo., d	
1a												
b		STAT	EMENTS									
e												
	(e) Gross sales price	(f) D	epreciation allowed (or allowable)		st or other basis xpense of sale					Gain or (loss ıs (f) minus		
a	l											
-					1,946,01	8.					151	,520.
_	Complete only for assets showing	ng gain in c	olumn (h) and owned by t	he foundation	on 12/31/69.					Col. (h) gain		
	(i) FMV as of 12/31/69) Adjusted basis as of 12/31/69		cess of col. (i) col. (j), if any			CO	. (k), but Losses	not less tha s (from col. (n -0-) or (h))	
a												
						_						
e											151	,520.
	Capital gain net income or (net ca	pital loss)	If gain, also enter If (loss), enter -0-			}	2					,520.
3	Net short-term capital gain or (los If gain, also enter in Part I, line 8,		ed in sections 1222(5) and			J						
_	If (loss), enter -0- in Part I, line 8					<u> </u>	3			N/A		
			ection 4940(e) for					nent Ind	come			
(Fo	or optional use by domestic private	e foundatio	ns subject to the section 4	940(a) tax on	net investment in	come	e.)					
lf s	section 4940(d)(2) applies, leave th	nis part bla	nk.									
	as the foundation liable for the sec Yes," the foundation doesn't qualif					iod?					Yes	X No
_	Enter the appropriate amount in (-				ntries	-					
	(a) Base period years Calendar year (or tax year beginni	ng in)	(b) Adjusted qualifying dist		Net value of no		ritable-			Distril (col. (b) div	(d) Dution ratio vided by col.	())
	2016			0,000.				0,067				40955
	2015			4,890. 7,819.				6,440 3,714				55029 59026
	<u>2014</u> 2013			1,370.				$\frac{5,714}{7,115}$				<u>85153</u>
	2013			3,000.				$\frac{7,113}{6,011}$				23720
	2012		•			_	,	• , • = =				
2	Total of line 1, column (d)								. 2		.2	63883
3	Average distribution ratio for the											
	the foundation has been in existen	nce if less t	han 5 years						. 3		• 0	52777
4	Enter the net value of noncharitab	ole-use ass	ets for 2017 from Part X, li	ne 5					. 4		3,674	,493.
5	Multiply line 4 by line 3								. 5		193	,929.
6	Enter 1% of net investment incon	ne (1% of F	Part I, line 27b)						. 6		24	,362.
7	Add lines 5 and 6								. 7		218	,291.
8	Enter qualifying distributions fron								. 8		194	,800.
	If line 8 is equal to or greater than See the Part VI instructions.	n line 7, che	eck the box in Part VI, line	1b, and comp	lete that part usin	g a 1º	% tax r	ate.				

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	Excise Tax Based on Investment Income (Section 4940(a			1948 -	see instru	uctio	ns)
	ot operating foundations described in section 4940(d)(2), check here 🕨 🗔 and enter						
Date	f ruling or determination letter: (attach copy of letter if necess	sary-see instruc	ctions)				
b Dome	stic foundations that meet the section 4940(e) requirements in Part V, check here $~ ightarrow$ [and enter 1	%	1	4	8,7	24.
of Pa	t I, line 27b						
c All ot	er domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of	f Part I, line 12,	col. (b). 丿				
2 Tax u	nder section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; other	rs, enter -0-) 💠		2			0.
	nes 1 and 2			3	4	8,7	24.
	e A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; other			4			0.
5 Taxt	ased on investment income. Subtract line 4 from line 3. If zero or less, enter -0-			5	4	8,7	24.
6 Credi	s/Payments:						
a 2017		6a	2,607.	•			
		6b	0.	•			
c Tax p	id with application for extension of time to file (Form 8868)	6c	0.	•			
d Back	- ····································	6d	0.				
7 Total	redits and payments. Add lines 6a through 6d			7		2,6	07.
8 Enter	any penalty for underpayment of estimated tax. Check here 🛄 if Form 2220 is attache	ed		8			0.
9 Taxo	ue. If the total of lines 5 and 8 is more than line 7, enter amount owed		►	9	4	6,1	17.
10 Over	ayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		►	10			
	he amount of line 10 to be: Credited to 2018 estimated tax 🕨		Refunded 🕨	11			
Part V	-A Statements Regarding Activities						
1a Durin	the tax year, did the foundation attempt to influence any national, state, or local legislation	on or did it parti	cipate or intervene	e in		Yes	No
any p	litical campaign?				1a		X
b Did it	spend more than \$100 during the year (either directly or indirectly) for political purposes?	? See the instru	ctions for the defir	nition	1b		X
If the	answer is "Yes" to 1a or 1b , attach a detailed description of the activities and copies of ar	ny materials put	olished or				
	uted by the foundation in connection with the activities.						
c Did th	e foundation file Form 1120-POL for this year?				1c		X
	he amount (if any) of tax on political expenditures (section 4955) imposed during the yea						
(1) (n the foundation. \blacktriangleright \$ (2) On foundation managers. \blacktriangleright	▶ \$	0.	,			
e Enter	he reimbursement (if any) paid by the foundation during the year for political expenditure	e tax imposed o	n foundation				
	yers. ▶ \$0.						
2 Has t	e foundation engaged in any activities that have not previously been reported to the IRS?	?			2		X
	," attach a detailed description of the activities.						
	e foundation made any changes, not previously reported to the IRS, in its governing instr						
	s, or other similar instruments? If "Yes," attach a conformed copy of the changes						X
4a Did th	e foundation have unrelated business gross income of \$1,000 or more during the year?				4a		X
b If "Ye	," has it filed a tax return on Form 990-T for this year?			N	/A 4b		
	here a liquidation, termination, dissolution, or substantial contraction during the year? $_{\dots}$				5		X
	," attach the statement required by General Instruction T.						
	e requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either	r:					
5	anguage in the governing instrument, or						
	tate legislation that effectively amends the governing instrument so that no mandatory di						
rema	n in the governing instrument?				6	X	
7 Did th	e foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete	e Part II, col. (c)	, and Part XV		7	X	
	the states to which the foundation reports or with which it is registered. See instructions.	▶					
IL							
	answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attor	- ,	- ,				
	h state as required by General Instruction G? If "No," attach explanation				8b	X	
	foundation claiming status as a private operating foundation within the meaning of sectio		(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				77
	017 or the tax year beginning in 2017? See the instructions for Part XIV. If "Yes," complete						X
10 Did a	y persons become substantial contributors during the tax year? If "Yes," attach a schedule list	sting their names a	and addresses				X

 Form 990-PF (2017)
 THE
 KJELLSTROM
 FAMILY
 FOUNDATION

 Part VII-A
 Statements
 Regarding
 Activities (continued)

			V	NI.
			Yes	No
	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			х
10	section 512(b)(13)? If "Yes," attach schedule. See instructions	11		
12		12		х
12	If "Yes," attach statement. See instructions Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	12	х	21
10	Website address \triangleright N/A	10		
14	The books are in care of ► DAN G. LOESCHER Telephone no. ►815-63	7-9	584	
	Located at ▶ 6845 WEAVER ROAD, SUITE 200, ROCKFORD, IL	114		
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 2017, 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	rt VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		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?			
	(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.)			
	5 , 5 , <u> </u>			
0	If any answer is "Yes" to $1a(1)$ -(6), did any of the acts fail to qualify under the exceptions described in Regulations	46		
	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			
G	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 2017?	1c		Х
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation	10		21
2	defined in section 4942(j)(3) or 4942(j)(5)):			
a	At the end of tax year 2017, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning			
	before 2017?			
	If "Yes," list the years			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect			
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach			
	statement - see instructions.) N/A	2b		
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
	▶,,,,,			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
	during the year? Yes 🗴 No			
b	If "Yes," did it have excess business holdings in 2017 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 2017.)	3b		
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		Х
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that			37
	had not been removed from jeopardy before the first day of the tax year beginning in 2017?	4b		X

Form 990-PF (2017) THE KJELLSTROM FAMILY FOUNDATION Pa

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rt VII-B	Statements I	Regarding Activit	ies for Whi	ch Form 4720	May Be Required (continued)	

5a	During the year, did the foundation pay or incur any amount to:		Yes	No
	(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?			
	(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive? Yes X No			
	(3) Provide a grant to an individual for travel, study, or other similar purposes? Yes 🗴 No			
	(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? See instructions Yes X 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?			
b	If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations			
	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? 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? Yes X 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? Yes 🗴 No			
b	If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction?	7b		
Da	rt VIII Information About Officere Directore Tructore Foundation Managere Highly			

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1 List all officers, directors, trustees, and 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				
ROCKFORD, IL 61107	0.50	500.	0.	Ο.
JON BATES	TRUSTEE			
946 N 2ND STREET				
ROCKFORD, IL 61107	0.50	1,000.	0.	Ο.
PAUL LOGLI	TRUSTEE			
612 N MAIN ST #300				
ROCKFORD, IL 61103	0.50	1,000.	0.	0.
DAN LOESCHER	TRUSTEE			
6845 WEAVER RD, SUITE 200				
ROCKFORD, IL 61114	0.50	1,000.	0.	0.
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			componidation	
Total number of other employees paid over \$50,000			►	0

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

Form 990-PF (2017)

THE	KJELLSTROM	FAMTLY	FOUNDATION

P	art X Minimum Investment Return (All domestic foundations m	nust complet	e this part. Foreign four	ndations, s	see instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable	e. etc., purpos	es:		
a	Average monthly fair market value of securities		1a	3,164,878.	
	Average of monthly cash balances		1b	565,572.	
c	Fair market value of all other assets			1c	
d	Total (add lines 1a, b, and c)			1d	3,730,450.
e	Reduction claimed for blockage or other factors reported on lines 1a and				
	1c (attach detailed explanation)	1e	Ο.		
2	Acquisition indebtedness applicable to line 1 assets			2	0.
3	Subtract line 2 from line 1d			3	3,730,450.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount,	see instructio	ns)	4	55,957.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on	Part V, line 4		5	3,674,493.
6	Minimum investment return. Enter 5% of line 5			6	183,725.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and			d certain	
	foreign organizations, check here 🕨 🔲 and do not complete this part.)				
1	Minimum investment return from Part X, line 6			1	183,725.
2a	Tax on investment income for 2017 from Part VI, line 5		48,724.		
b	Income tax for 2017. (This does not include the tax from Part VI.)	2b			
C	Add lines 2a and 2b			2c	48,724.
3	Distributable amount before adjustments. Subtract line 2c from line 1			3	135,001.
4	Recoveries of amounts treated as qualifying distributions			4	0.
5	Add lines 3 and 4			5	135,001.
6	Deduction from distributable amount (see instructions)			6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part	XIII, line 1		7	135,001.
P	art XII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purp				
-	Expenses, contributions, gifts, etc total from Part I, column (d), line 26			10	194,800.
				1a 1b	194,000.
2	Program-related investments - total from Part IX-B Amounts paid to acquire assets used (or held for use) directly in carrying out charitab			2	•
2	Amounts set aside for specific charitable projects that satisfy the:	ne, e.c., purpo	565	2	
-				3a	
	Suitability test (prior IRS approval required) Cash distribution test (attach the required schedule)			3a 3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; an			4	194,800.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investigation of the reduced rate of tax on net investigation of the reduced rate of tax on tax on the reduced rate of tax on tax on tax on the reduced rate of tax on		сч	7	194,000.
J	income. Enter 1% of Part I, line 27b			5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4			6	194,800.
U	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years w			-	-
	4940(e) reduction of tax in those years.		y whomen are roundation (juannuo 101	
					Earm 000-DE (2017)

Part XIII Undistributed Income (see instructions)

	(a)	(b)	(c)	(d)
	Corpus	Years prior to 2016	2016	2017
1 Distributable amount for 2017 from Part XI,		•		
line 7				135,001.
2 Undistributed income, if any, as of the end of 2017:				
a Enter amount for 2016 only			472.	
b Total for prior years:				
3 Excess distributions carryover, if any, to 2017:		0.		
a From 2012				
b From 2013				
c From 2014				
dFrom 2015				
eFrom 2016	0.			
 f Total of lines 3a through e 4 Qualifying distributions for 2017 from 	0.			
Part XII, line 4: \triangleright \$ 194,800.				
a Applied to 2016, but not more than line 2a			472.	
b Applied to undistributed income of prior			1/2•	
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus		01		
(Election and include instructions)	Ο.			
d Applied to 2017 distributable amount				135,001.
e Remaining amount distributed out of corpus	59,327.			
5 Excess distributions carryover applied to 2017	0.			0.
(If an amount appears in column (d), the same amount must be shown in column (a).)				-
6 Enter the net total of each column as indicated below:				
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	59,327.			
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 2016. Subtract line			0	
4a from line 2a. Taxable amount - see instr			0.	
f Undistributed income for 2017. Subtract				
lines 4d and 5 from line 1. This amount must be distributed in 2018				0.
7 Amounts treated as distributions out of				0•
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required - see instructions)	Ο.			
8 Excess distributions carryover from 2012				
not applied on line 5 or line 7	Ο.			
9 Excess distributions carryover to 2018.				
Subtract lines 7 and 8 from line 6a	59,327.			
10 Analysis of line 9:				
a Excess from 2013				
b Excess from 2014				
c Excess from 2015				
dExcess from 2016				
e Excess from 2017 59, 327.				

Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9) N/A							
1 a If the foundation has received a ruling or determination letter that it is a private operating							
foundation, and the ruling is effective for 2017, enter the date of the ruling							
b Check box to indicate whether the foundate				1942(j)(3) or 494	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) 2017	(b) 2016	(c) 2015	(d) 2014	(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			if the foundation	had \$5,000 or moi	re in assets		
at any time during th	e year-see instr	uctions.)					

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).)

DAN LOESCHER

Form 990-PF (2017)

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

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

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

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

SEE STATEMENT 9

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:

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THE KJELLSTROM FAMILY FOUNDATION Part XV Supplementary Information (continued)

Show any relationship to any recipient Poundation recipient Purpose of grant or contribution Amount a Paid during the year a Paid during the year a Boy scours of America Social welfare None Fublic Social welfare 20,00 Boy scours of America 2820 MCRARLAND ROAD ROCKFORD, IL 61107 NONE Fublic Social welfare 20,00 C.A.S.A. 211 S. COURT STREET ROCKFORD AREA LUTHERAN MINISTRIES NONE Fublic Social welfare 5,00 ROCKFORD AREA LUTHERAN MINISTRIES NONE Fublic Social welfare 9,00 ROCKFORD AREA LUTHERAN MINISTRIES NONE Fublic Social welfare 9,00 ROCKFORD, IL 61101 NONE Fublic Social welfare 9,00 ROCKFORD, IL 61101 NONE Fublic Social welfare 10,00 MIDWAY VILLAGE MUSEUM ROCKFORD, IL 61101 NONE Fublic Social welfare 10,00	3 Grants and Contributions Paid During the		Payment		
a Paid during the year BOY SCOUTS OF AMERICA SOCIAL WELFARE DUBLIC C.A. S. A. 20,00 C.A. S. A. 211 S. COURT STREET SOCKFORD, IL 61101 C.A. S.A. 211 S. COURT STREET SOCKFORD AREA LUTHERAN MINISTRIES NONE PUBLIC SOCIAL WELFARE SOCIAL WELFARE SOCKFORD, IL 61101 SOCKFORD, IL 61104	Recipient	If recipient is an individual, show any relationship to any foundation manager	status of	Purpose of grant or contribution	Amount
BOY SCOUTS OF AMERICA ROCKPARLAND ROAD ROCKPARD, IL 61107 C.A.S.A. NONE PUBLIC C.A.S.A. NONE PUBLIC SOCIAL WELFARE PUBLIC SOCIAL WELFARE PUBLIC SOCIAL WELFARE SOCIAL WELFARE		or substantial contributor	recipient		
2820 MCFARLAND ROAD ROCKFORD, IL 61107 20,0 C.A.S.A. 211 S. COURT STREET ROCKFORD, IL 61101 5,0 ROCKFORD AREA LUTHERAN MINISTRIES NONE PUBLIC SOCIAL WELFARE 115 N. WYMAN STREET ROCKFORD, IL 61101 9,0 FRIENDS OF THE CORONADO S14 N MAIN STREET ROCKFORD, IL 61101 9,0 FRIENDS OF THE CORONADO NONE PUBLIC ARTS 10,0 FRIENDS OF THE CORONADO NONE PUBLIC ARTS 10,0 FRIENDS OF THE CORONADO NONE PUBLIC SOCIAL WELFARE 10,0 FOULIC SOCIAL WELFARE SOCIAL WELFARE 10,0 10,0 TOTAL SEE CONTINUATION SHEET(S) ▶ 34 194,80	a Paid during the year				
2320 MCFARLAND ROAD ROCKFORD, IL 61107 20,00 C.A.S.A. 211 S. COURT STREET ROCKFORD, IL 61101 5,00 ROCKFORD AREA LUTHERAN MINISTRIES NONE PUBLIC SOCIAL WELFARE 115 N. WYMAN STREET ROCKFORD, IL 61101 9,00 FRIENDS OF THE CORONADO S14 N MAIN STREET ROCKFORD, IL 61101 0,00 MIDWAY VILLAGE MUSEUM ROCKFORD, IL 61101 10,00 MIDWAY VILLAGE MUSEUM ROCKFORD, IL 61101 5,00 MIDWAY VILLAGE MUSEUM ROCKFORD, IL 61107 5,00 Total SEE CONTINUATION SHEET(S) ▶ 3a 194,80					
ROCKFORD, IL 61107 20,00 C.A.S.A. 211 S. COURT STREET ROCKFORD, IL 61101 5,00 ROCKFORD AREA LUTHERAN MINISTRIES NONE PUBLIC SOCIAL WELFARE 115 N. WYMAN STREET ROCKFORD, IL 61101 9,00 FRIENDS OF THE CORONADO 314 N MAIN STREET ROCKFORD, IL 61101 9,00 MIDWAY VILLAGE MUSEUM ROCKFORD, IL 61101 10,00 MIDWAY VILLAGE MUSEUM ROCKFORD, IL 61101 5,00 MIDWAY VILLAGE MUSEUM ROCKFORD, IL 61107 5,00 Total SEE CONTINUATION SHEET(S) 5 32 194,80		NONE	PUBLIC	SOCIAL WELFARE	
C.A.S.A. 211 S. COURT STREET ROCKFORD, IL 51101 ROCKFORD, IL 51101 ROCKFORD AREA LUTHERAN MINISTRIES NONE PUBLIC SOCIAL WELFARE SOCIAL WELFARE PUBLIC SOCIAL WELFARE PUBLIC SOCIAL WELFARE 10,00 FRIENDS OF THE CORONADO NONE PUBLIC RATS I0,00 NONE PUBLIC SOCIAL WELFARE SOCIAL WELFARE SOCIA					
211 S. COURT STREET ROCKFORD, IL 61101 5,00 ROCKFORD AREA LUTHERAN MINISTRIES NONE PUBLIC SOCIAL WELFARE 115 N. WYMAN STREET ROCKFORD, IL 61101 9,00 FRIENDS OF THE CORONADO NONE PUBLIC ARTS 314 N MAIN STREET ROCKFORD, IL 61101 10,00 MIDWAY VILLAGE MUSEUM 6799 GUILFORD ROAD ROCKFORD, IL 61107 5,00 Total SEE CONTINUATION SHEET(S) ▶ 3a 194,80 b Approved for future payment	ROCKFORD, IL 61107				20,000
211 S. COURT STREET ROCKFORD, IL 61101 5,00 ROCKFORD AREA LUTHERAN MINISTRIES NONE PUBLIC SOCIAL WELFARE 115 N. WYMAN STREET ROCKFORD, IL 61101 9,00 FRIENDS OF THE CORONADO 314 N MAIN STREET ROCKFORD, IL 61101 10,00 MIDWAY VILLAGE MUSEUM 6799 GUILFORD ROAD ROCKFORD, IL 61107 5,00 Total SEE CONTINUATION SHEET(S) ▶ 3a 194,80 b Approved for future payment					
ROCKFORD AREA LUTHERAN MINISTRIES NONE PUBLIC SOCIAL WELFARE 115 N. WYMAN STREET ROCKFORD, IL 61101 9,00 FRIENDS OF THE CORONADO NONE PUBLIC ARTS 314 N MAIN STREET ROCKFORD, IL 61101 10,00 MIDWAY VILLAGE MUSEUM NONE PUBLIC SOCIAL WELFARE 6799 GUILFORD ROAD ROCKFORD, IL 61107 5,00 Total SEE CONTINUATION SHEET(S) 3a 194,80	C.A.S.A.	NONE	PUBLIC	SOCIAL WELFARE	
ROCKFORD AREA LUTHERAN MINISTRIES NONE PUBLIC SOCIAL WELFARE 115 N. WYMAN STREET ROCKFORD, IL 61101 9,00 FRIENDS OF THE CORONADO NONE PUBLIC ARTS 314 N MAIN STREET ROCKFORD, IL 61101 10,00 MIDWAY VILLAGE MUSEUM NONE PUBLIC SOCIAL WELFARE 6799 GUILFORD ROAD ROCKFORD, IL 61107 5,00 Total SEE CONTINUATION SHEET(S) 3a 194,80	211 S. COURT STREET				
115 N. WYMAN STREET 9,00 ROCKFORD, IL 61101 9,00 FRIENDS OF THE CORONADO NONE 314 N MAIN STREET 0 ROCKFORD, IL 61101 10,00 MIDWAY VILLAGE MUSEUM NONE 6799 GUILFORD ROAD NONE ROCKFORD, IL 61107 5,00 Total SEE CONTINUATION SHEET(S) b Approved for future payment 3a	ROCKFORD, IL 61101				5,000
115 N. WYMAN STREET 9,00 ROCKFORD, IL 61101 9,00 FRIENDS OF THE CORONADO NONE 314 N MAIN STREET PUBLIC ROCKFORD, IL 61101 10,00 MIDWAY VILLAGE MUSEUM NONE 6799 GUILFORD ROAD NONE ROCKFORD, IL 61107 5,00 Total SEE CONTINUATION SHEET(S) b Approved for future payment 3a					
115 N. WYMAN STREET 9,00 ROCKFORD, IL 61101 9,00 FRIENDS OF THE CORONADO NONE 314 N MAIN STREET PUBLIC ROCKFORD, IL 61101 10,00 MIDWAY VILLAGE MUSEUM NONE 6799 GUILFORD ROAD NONE ROCKFORD, IL 61107 5,00 Total SEE CONTINUATION SHEET(S) b Approved for future payment 3a	ROCKFORD AREA LUTHERAN MINISTRIES	NONE	PUBLIC	SOCIAL WELFARE	
FRIENDS OF THE CORONADO NONE PUBLIC ARTS 314 N MAIN STREET 10,00 ROCKFORD, IL 61101 10,00 MIDWAY VILLAGE MUSEUM NONE PUBLIC 6799 GUILFORD ROAD ROCKFORD, IL 61107 5,00 Total SEE CONTINUATION SHEET(S) 3a 194,80 b< Approved for future payment			[
314 N MAIN STREET 10,00 ROCKFORD, IL 61101 10,00 MIDWAY VILLAGE MUSEUM NONE 6799 GUILFORD ROAD SOCIAL WELFARE 6799 GUILFORD ROAD 5,00 ROCKFORD, IL 61107 5,00 Total SEE B Approved for future payment 194,80					9,000.
314 N MAIN STREET 10,00 ROCKFORD, IL 61101 10,00 MIDWAY VILLAGE MUSEUM NONE 6799 GUILFORD ROAD SOCIAL WELFARE 6799 GUILFORD ROAD 5,00 ROCKFORD, IL 61107 5,00 Total SEE CONTINUATION SHEET(S) b Approved for future payment 194,80					
314 N MAIN STREET 10,00 ROCKFORD, IL 61101 10,00 MIDWAY VILLAGE MUSEUM NONE 6799 GUILFORD ROAD SOCIAL WELFARE 6799 GUILFORD ROAD 5,00 ROCKFORD, IL 61107 5,00 Total SEE CONTINUATION SHEET(S) b Approved for future payment 194,80					
ROCKFORD, IL 61101 10,04 MIDWAY VILLAGE MUSEUM NONE 6799 GUILFORD ROAD SOCIAL WELFARE 6799 GUILFORD ROAD 5,04 ROCKFORD, IL 61107 5,04 Total SEE b Approved for future payment 194,84	FRIENDS OF THE CORONADO	NONE	PUBLIC	ARTS	
MIDWAY VILLAGE MUSEUM 6799 GUILFORD ROAD ROCKFORD, IL 61107 Total SEE CONTINUATION SHEET(S) > 3a 194,80 b Approved for future payment	314 N MAIN STREET				
6799 GUILFORD ROAD 5,00 ROCKFORD, IL 61107 5,00 Total SEE CONTINUATION SHEET(S) ▶ 3a 194,80 b Approved for future payment	ROCKFORD, IL 61101				10,000.
6799 GUILFORD ROAD 5,00 ROCKFORD, IL 61107 5,00 Total SEE CONTINUATION SHEET(S) b Approved for future payment 3a					
6799 GUILFORD ROAD 5,00 ROCKFORD, IL 61107 5,00 Total SEE CONTINUATION SHEET(S) b Approved for future payment 3a					
ROCKFORD, IL 61107 5,00 Total SEE CONTINUATION SHEET(S) b Approved for future payment 3a		NONE	PUBLIC	SOCIAL WELFARE	
Total SEE_CONTINUATION_SHEET(S) 3a 194,80 b Approved for future payment 3a 194,80					5,000.
b Approved for future payment		NTINUATION SHE	T(S)	► 3a	194,800.
NONE					
	NONE				
Total > 3b					0

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.	Unrelate	d business income		ded by section 512, 513, or 514	(e)
1 Program service revenue:	(a) Business code	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income
a	coue		code		
a					
·					
с					
0					
e					
Ease and contracts from government agencies					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments			14	92,650.	
4 Dividends and interest from securities			14	92,050.	
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			1	4 101 205	
7 Other investment income			14	4,121,395.	2,607.
8 Gain or (loss) from sales of assets other than inventory			18	151,520.	
9 Net income or (loss) from special events				131,3200	
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
a					
· · · · · · · · · · · · · · · · · · ·					
с					
0					
		0.		4,365,565.	2,607.
12 Subtotal. Add columns (b), (d), and (e)					4,368,172.
13 Total. Add line 12, columns (b), (d), and (e)					4,300,172.
(See worksheet in line 13 instructions to verify calculations.)					
Part XVI-B Relationship of Activities to	o the Acco	omplishment of Ex	emp	t Purposes	
Line No. Explain below how each activity for which incon	ne is reported i	n column (e) of Part XVI-A	contrib	uted importantly to the accomp	lishment of
the foundation's exempt purposes (other than b				. , , ,	
N/A					

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THE KIELLSTROM FAMILY FOUNDATION

	,			II FOONDATIO			00070	ιaς	ye i j
Part XVII	Information Re Exempt Organ		sfers to a	ind Transactions a	and Relation	onships With Nonch	aritable		
1 Did the or			of the followin	ig with any other organizat	ion described in	section 501(c)	· ·	fes	No
	• •			g to political organizations			-		
•	from the reporting found	,			•				
				•			1a(1)		х
									X
							1a(2)		
b Other trar									v
(1) Sales	s of assets to a noncharita	ble exempt organizat	tion				1b(1)		<u>X</u>
									X
	(3) Rental of facilities, equipment, or other assets								X
									Х
(5) Loan	s or loan guarantees						1b(5)		Х
(6) Perfo	ormance of services or me	mbership or fundrai	sing solicitatio	ons			1b(6)		Х
c Sharing o	f facilities, equipment, ma	iling lists, other asse	ts, or paid em	ployees			1c		Х
						fair market value of the good		ts,	
or service	s given by the reporting fo	oundation. If the four	ndation receiv	ed less than fair market va	lue in any trans	action or sharing arrangemer	ıt, show in		
column (d) the value of the goods,	other assets, or serv	ices received.						
(a)Line no.	(b) Amount involved	(c) Name of	noncharitable	e exempt organization	(d) Dese	cription of transfers, transactions, a	and sharing arra	ngemer	nts
			N/A						
			•						
2a Is the fou	ndation directly or indirect	tly affiliated with, or i	related to, one	or more tax-exempt organ	nizations descri	bed			
	501(c) (other than sectio	•	-				Yes	X	No
	omplete the following sch								
b in 100, 0	(a) Name of org			(b) Type of organization	1	(c) Description of relation	onship		
	N/A						•		
Lindo	nonalting of parium. I dealers	that I have avamined this	a vatura inaludia		d atatamanta, and	to the best of my knowledge			
and h				ng accompanying schedules an n taxpayer) is based on all infor			May the IRS dis return with the	scuss th	nis ar
Sign				1			shown below?	See ins	tr.
Here					_ /		X Yes		No
Sigi	nature of officer or trustee			Date	Title				
	Print/Type preparer's na	ime	Preparer's s	ignature	Date	Check if PT	IN		
						self- employed			
Paid	DAN G. LOE	SCHER					000965		
Preparer	Firm's name ► LOE	SCHER & A	SSOCIA	TES, LTD.		Firm's EIN ► 36-	403800)6	
Use Only									
	Firm's address ▶ 68	45 WEAVER	ROAD,	SUITE 200					
	ROCKFORD, IL 61114					Phone no. 815-	637-95	584	

Phone no. 815-637-9584

Part IV Capital Gains and Lo	osses for Tax on Investment Income					
	d describe the kind(s) of property sol rick warehouse; or common stock, 2			(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
	RAYMOND JAMES STA					
b SEE ATTACHED R	RAYMOND JAMES STA			Р		
	RAYMOND JAMES STA			Р		
d SEE ATTACHED R	RAYMOND JAMES STA			Р		
e SEE ATTACHED R	RAYMOND JAMES STA			Р		
	RAYMOND JAMES STA			Р		
g SEE ATTACHED R	RAYMOND JAMES STA	TEMENT A/C 78875	792	Р		
	RAYMOND JAMES STA					
	RAYMOND JAMES STA			P		
,	RAYMOND JAMES STA			P		
	RAYMOND JAMES STA			P		
	RAYMOND JAMES STA		837	P		
	TIGATION SETTLEM			P		
	TIGATION SETTLEM	ENT		P		
0 CAPITAL GAINS	DIVIDENDS					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale) Gain or (loss) Ilus (f) minus (g)	
a 560.		457.			· · · ·	103.
b 3,345.		2,148.				1,197.
c 308,927.		294,633.				14,294.
d 6,645.		6,673.				<28.
e 24,132.		21,514.				2,618.
f 3,448.		3,197.				251.
g 388,421.		367,628.				20,793.
h 967,479.		864,151.				103,328.
i 5,128.		3,882.				1,246.
89,921.		91,396.				<1,475.
k 249,435.		242,340.				7,095.
47,999.		47,999.				0.
m 11.						11.
n 113.						113.
o 1,974.	1					1,974.
	ng gain in column (h) and owned by	the foundation on 12/31/69		(I) Los	ses (from col. (h))	
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any		Gains (excess	of col. (h) gain over ot less than "-0-")	col. (k),
a						103.
<u>b</u>						1,197.
<u> </u>	1					14,294.
d						<28.
e						2,618.
f						251.
g	1					20,793.
<u> </u>						103,328.
i						1,246.
i						<1,475.
k						7,095.
						0.
m						11.
n						113.
0						1,974.
2 Capital gain net income or (net c	apital loss) { If gain, also enter If (loss), enter "-C	r in Part I, line 7	2			151,520.
	ss) as defined in sections 1222(5) an					•
If (loss), enter "-0-" in Part I, line		J	3		N/A	

THE KJELLSTROM FAMILY FOUNDATION

20-6368876

Part XV Supplementary Informatio		FOUNDATIO		68876
3 Grants and Contributions Paid During the				
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
	or substantial contributor	recipient		
ROCKFORD UNIVERSITY	NONE	PUBLIC	EDUCATION	
5050 E. STATE STREET				
ROCKFORD, IL 61108				50,000
GOLDIE FLOBERG CENTER	NONE	PUBLIC	SOCIAL WELFARE	
58 W. ROCKTON ROAD				
ROCKTON, IL 61072				10,000
DISCOVERY CENTER	NONE	PUBLIC	SOCIAL WELFARE	
711 N. MAIN STREET				
ROCKFORD, IL 61103				25,000
K-FACT	NONE	PUBLIC	SOCIAL WELFARE	
227 N. CHURCH STREET				
ROCKFORD, IL 61101				10,000
	Novie			
SHELTER CARE MINISTRIES 218 7TH STREET	NONE	PUBLIC	SOCIAL WELFARE	
ROCKFORD, IL 61104				20,000
MUSIC ACADEMY	NONE	PUBLIC	EDUCATION	
226 S. 2ND STREET ROCKFORD, IL 61104				10,800
ROCKFORD DANCE COMPANY	NONE	PUBLIC	EDUCATION	
711 N. MAIN STREET ROCKFORD, IL 61103				20,000
Total from continuation sheets				145,800

FORM 990-PF	DIVIDENDS	AND INT	EREST	FROM SEC	URITIES	STATEMENT 1
SOURCE	GROSS AMOUNT	CAPIT GAIN DIVIDE	S	(A) REVENUE PER BOOK		
RAYMOND JAMES A/C#2862W165	13,476.		0.	13,47	6. 13,470	5.
RAYMOND JAMES A/C#348HF227	20,181.	1,	716.	18,46	5. 18,46	ō.
RAYMOND JAMES A/C#3510P057	5,118.		82.	5,03	6. 5,030	5.
RAYMOND JAMES A/C#51972471	1,041.		0.	1,04	1. 1,041	1.
RAYMOND JAMES A/C#77128837	30,265.		0.	30,26	5. 30,26	5.
RAYMOND JAMES A/C#78875792	24,543.		176.	24,36	7. 24,36	7.
TO PART I, LINE 4	94,624.	1,	974.	92,65	0. 92,650).
FORM 990-PF		OTHER	INCO	ME		STATEMENT 2
DESCRIPTION				(A) VENUE BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
ANNUITY PROCEEDS EXCISE TAX REFUND			4	,121,395. 2,607.	2,226,897	
TOTAL TO FORM 990-P	F, PART I,	LINE 11	4	,124,002.	2,226,897	
FORM 990-PF						STATEMENT 3
		ACCOUN	TING	г <u>е е</u> е е е е е е е е е е е е е е е е е		STATEMENT 3
DESCRIPTION		(A) EXPENSES PER BOOK		(B) T INVEST- NT INCOME	(C) ADJUSTED NET INCOM	(D) CHARITABLE E PURPOSES
ACCOUNTING/TAX PREP	FEES	21,30	0.	0	•	0.
TO FORM 990-PF, PG	1, LN 16B	21,30	0.	0	•	0.

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FORM 990-PF C	OTHER PROFES	SIONAL FEES	STATEMENT 4		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLI PURPOSES	
INVESTMENT MANAGEMENT FEES	31,735.	31,735.		0.	
 TO FORM 990-PF, PG 1, LN 16C =	31,735.	31,735.		0.	
FORM 990-PF	TAX	ES	S	TATEMENT 5	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		(D) CHARITABLI PURPOSES	
FOREIGN TAXES ON INVESTMENTS	3,151.	3,151.		0.	
TO FORM 990-PF, PG 1, LN 18 =	3,151.	3,151.		0 .	
FORM 990-PF	OTHER E	XPENSES	S	FATEMENT (
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLI PURPOSES	
ANNUAL STATE FILING FEE	30.	0.		0.	
TO FORM 990-PF, PG 1, LN 23	30.	0.		0.	
FORM 990-PF OTHER DECREASE	ES IN NET AS	SETS OR FUND H	BALANCES S	FATEMENT 7	
DESCRIPTION				AMOUNT	
FAIR MARKET VALUE OF ASSET TH	RANSFERS OVE	R COST		442,865.	
TOTAL TO FORM 990-PF, PART II	II, LINE 5			442,865	

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FORM 990-PF OTHER	INVESTMENTS		STATEMENT 8
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#348HF227 SEE ATTACHED STATEMENT A/C#2862W165	COST COST COST COST	1,090,695. 880,908. 988,456. 3,120,149.	970,729. 1,074,539. 1,089,035. 3,684,852.
TOTAL TO FORM 990-PF, PART II, LINE	13	6,080,208.	6,819,155.

FORM 990-PF

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

STATEMENT 9

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

(Rev. January 2017)

Department of the Treasury

Internal Revenue Service

Application for Automatic Extension of Time To File an **Exempt Organization Return**

File a separate application for each return.

▶ Information about Form 8868 and its instructions is at www.irs.gov/form8868 .

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/efile, click on Charities & Non-Profits, and click on e-file for Charities and Non-Profits.

Automatic 6-Month Extension of Time. Only submit original (no copies needed).

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

				Enter file	er's identify	ring number
Type or print	or Name of exempt organization or other filer, see instructions.					on number (EIN) or
•	THE KJELLSTROM FAMILY FOUN		20-63	68876		
File by the due date for filing your	Number, street, and room or suite no. If a P.O. box, 6845 WEAVER ROAD	see instruc	tions.	Social se	Social security number (SSN)	
return. See instructions.	City, town or post office, state, and ZIP code. For a ROCKFORD, IL 61114	foreign add	Iress, see instructions.			
Enter the	Return Code for the return that this application is for (file a separa	ate application for each return)			0 4
Applicat	ion	Return	Application			Return
Is For	For Code Is For					Code
Form 990) or Form 990-EZ	01	Form 990-T (corporation)			07
Form 990)-BL	02	Form 1041-A			08
Form 472	20 (individual)	03	Form 4720 (other than individual)			09
Form 990)-PF	04	Form 5227			10
Form 990)-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11
Form 990	Form 990-T (trust other than above) 06 Form 8870					12
 If this box 1 I refor for 	organization does not have an office or place of busine is for a Group Return, enter the organization's four digi If it is for part of the group, check this box ▶ quest an automatic 6-month extension of time until the organization named above. The extension is for the X calendar year 2017 or tax year beginning ne tax year entered in line 1 is for less than 12 months,	t Group Exe and atta NOVEI e organizati	emption Number (GEN) uch a list with the names and EINs o <u>MBER 15, 2018</u> , to file on's return for: d ending	f this is fo f all memb	r the whole pers the extension organiza	group, check this ension is for.
	\Box Change in accounting period	oncontrodo		i ina rotai		
3a lftl	nis application is for Forms 990-BL, 990-PF, 990-T, 472	0, or 6069,	enter the tentative tax, less any			
	nrefundable credits. See instructions.			3a	\$	0.
b If th	nis application is for Forms 990-PF, 990-T, 4720, or 606	69, enter an	y refundable credits and			
est	imated tax payments made. Include any prior year ove	rpayment a	llowed as a credit.	3b	\$	2,607.
	ance due. Subtract line 3b from line 3a. Include your p	5	, , ,			0
	using EFTPS (Electronic Federal Tax Payment System)			3c	\$	0.
Caution: instructio	If you are going to make an electronic funds withdrawans.	al (direct de	bit) with this Form 8868, see Form 8	453-EO a	nd Form 88	79-EO for payment
LHA F	or Privacy Act and Paperwork Reduction Act Notice	e, see instr	uctions.		Form	8868 (Rev. 1-2017)