Form **990-PF**

Department of the Treasury Internal Revenue Service

Return of Private Foundation or Section 4947(a)(1) Trust Treated as 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.
 Go to www.irs.gov/Form990PF for instructions and the latest information.



For cale	ndar year 2019 or tax year beginning		, and ending		
Name o	f foundation			A Employer identification	number
THE	KJELLSTROM FAMILY FOUNI	20-6368876			
	and street (or P.O. box number if mail is not delivered to street a	B Telephone number			
	5 WEAVER ROAD		200	815-637-95	84
	rown, state or province, country, and ZIP or foreign p KFORD , IL 61114	ostal code		C If exemption application is pe	ending, check here
G Checl	all that apply: 📃 Initial return	lnitial return of a fo	rmer public charity	D 1. Foreign organizations	s, check here
	Final return	Amended return		2. Foreign organizations me	eting the 85% test
	Address change	Name change		2. Foreign organizations me check here and attach co	mputation
	x type of organization: X Section 501(c)(3) ex	• •		E If private foundation sta	
		Other taxable private founda ng method: X Cash		under section 507(b)(1)	
		ther (specify)		F If the foundation is in a under section 507(b)(1)	
►\$	10,709,413. (Part I, colum	nn (d), must be on cash basi	s.)		
Part	Analysis of Revenue and Expenses	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements
	(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a).)	expénses per books	income	income	for charitable purposes (cash basis only)
1	Contributions, gifts, grants, etc., received	343,036.		N/A	
2	Check Ch				
3	cash investments	200 002	200 002		
4	Dividends and interest from securities	309,223.	309,223.		STATEMENT 1
	Gross rents				
	Net rental income or (loss) I Net gain or (loss) from sale of assets not on line 10	482,722.			
	Gross sales price for all 3.55 state of assets not of mile no 3.55 state of all 3.55	10277220			
Revenue	Capital gain net income (from Part IV, line 2)		482,722.		
<u>ه</u> ۳	Net short-term capital gain				
9	Income modifications				
	Gross sales less returns and allowances				
	Less: Cost of goods sold				
	Gross profit or (loss)				
11	Other income	1,134,981.	791,945.		
12	Total. Add lines 1 through 11 Compensation of officers, directors, trustees, etc.	6,000.	0.		0.
14	Other employee salaries and wages				
15	Pension plans, employee benefits				
	Legal fees STMT 2	145.	0.		0.
ens t	Accounting fees STMT 3	24,949.	0.		0.
EXD 0	Other professional fees STMT 4	55,349.	55,349.		0.
. <mark>e</mark> 17 .≥	Interest	F 0.4F	F 04F		
81 at	Taxes STMT 5	5,845.	5,845.		0.
19 19	Depreciation and depletion				
Administrative Expenses 0 15 14 15 15 14 15 15 19 15 19 15 19 15 19 15 19 15 10 15 10 10 15 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 1	Occupancy Travel, conferences, and meetings				
	Printing and publications				
Operating and 57 57 57 57 57 57 57 57 57 57 57 57 57	Other expenses STMT 6	1,638.	0.		0.
24 atiu	Total operating and administrative				
per	expenses. Add lines 13 through 23	93,926.	61,194.		0.
20	Contributions, gifts, grants paid	869,760.			869,760.
26	Total expenses and disbursements.		C1 104		
	Add lines 24 and 25	963,686.	61,194.		869,760.
	Subtract line 26 from line 12:	171,295.			
	Excess of revenue over expenses and disbursements Net investment income (if negative, enter -0-)	111,233.	730,751.		
	Adjusted net income (if negative, enter -0-)		,	N/A	

923501 12-17-19 LHA For Paperwork Reduction Act Notice, see instructions.

	00-PF (2019) THE KJELLSTROM FAMILY FO	Beginning of year	End o	6368876 Pa f year
art	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only.	(a) Book Value	(b) Book Value	(c) Fair Market Value
1	Cash - non-interest-bearing		1.	1
	Savings and temporary cash investments	480,001.	794,761.	794,761
	Accounts receivable			
Ŭ	Less: allowance for doubtful accounts			
4	Pledges receivable			
Ŧ	Less: allowance for doubtful accounts			
5				
	Grants receivable			
0				
7	disqualified persons			
1	Other notes and loans receivable			
_	Less: allowance for doubtful accounts			
8	Inventories for sale or use			
9	Prepaid expenses and deferred charges			
	Investments - U.S. and state government obligations			
	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 7	9,365,112.	9,221,646.	9,914,65
14	Land, buildings, and equipment: basis			
	Less: accumulated depreciation			
15	Other assets (describe)			
	Total assets (to be completed by all filers - see the			
10	instructions. Also, see page 1, item I)	9,845,113.	10,016,408.	10 709 41
17	Accounts payable and accrued expenses	5,010,110	10,010,1000	10,,00,11
18				
19	Grants payable			
	Deferred revenue			
20	Loans from officers, directors, trustees, and other disqualified persons			
21	Mortgages and other notes payable			
22	Other liabilities (describe ►)			
		0	0	
23	Total liabilities (add lines 17 through 22)	0.	0.	
	Foundations that follow FASB ASC 958, check here			
	and complete lines 24, 25, 29, and 30.			
24	Net assets without donor restrictions			
25	Net assets with donor restrictions			
	Foundations that do not follow FASB ASC 958, check here 🕨 🗴			
	and complete lines 26 through 30.			
26	Capital stock, trust principal, or current funds	2,920,250.	2,920,250.	
27	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
28	Retained earnings, accumulated income, endowment, or other funds	6,924,863.	7,096,158.	
29	Total net assets or fund balances	9,845,113.	10,016,408.	
_•		,		
30	Total liabilities and net assets/fund balances	9,845,113.	10,016,408.	
	III Analysis of Changes in Net Assets or Fund Bal			
		20000		

	(must agree with end-of-year figure reported on prior year's return)	1	9,845,113.
2	Enter amount from Part I, line 27a	2	171,295.
3	Other increases not included in line 2 (itemize)	3	0.
4	Add lines 1, 2, and 3	4	10,016,408.
5	Decreases not included in line 2 (itemize) 🕨	5	0.
6	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 29	6	10,016,408.
			Lorm 000-DE (0010)

_			LSTROM FAMII			C E1	ה או	ГТАСН		0-636 TATEMI		Page 3
	-		of property sold (for exam				How ac - Purch			acquired		te sold
_			r common stock, 200 shs.		,	D	- Purci - Dona	tion	` (mo., d	ay, yr.)	(mó., c	lay, yr.)
<u>1</u> a												
_t						+						
e												
_	(e) Gross sales price	(f) D	epreciation allowed (or allowable)		st or other basis expense of sale					ain or (loss) s (f) minus (
_2												
_t												
	7 210 276				6,829,55	4.					482	,722.
_	Complete only for assets showin	g 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			col		not less than (from col. (
_t												
											482	,722.
2	Capital gain net income or (net ca	pital loss)	If gain, also enter If (loss), enter -0-	in Part I, line - in Part I, line	7	. }	2			482,722.		
3	Net short-term capital gain or (los	s) as defin				ĺ						
	If gain, also enter in Part I, line 8,	column (c).	· · ·								
F	If (loss), enter -0- in Part I, line 8 Part V Qualification U	nder Se	ection 4940(e) for	Reduced	Tax on Net	Inve	3 stme	ent Inco	me	N/A		
	or optional use by domestic private											
			-				•)					
IT	section 4940(d)(2) applies, leave th	lis part bla	nk.									
	as the foundation liable for the sect					riod?					Yes	X No
1	"Yes," the foundation doesn't qualify Enter the appropriate amount in e		()			ntripe						
<u> </u>			(b)		ore making any e	(c)					(d) oution ratio	
	(a) Base period years Calendar year (or tax year beginnir	ng in)	Adjusted qualifying dist	tributions	Net value of no			use assets		Distrib (col. (b) div	utión ratio ided by col	. (c))
	2018			0,439.				0,735	•		.0	75853
	2017			4,800.		3	<u>,674</u>	4,493	•			53014
	2016			0,000.		2	<u>,930</u>	0,067	•			40955
_	2015			4,890. 7,819.		<u>2</u> 2	<u>, 990</u>	5,440 3,714	•			<u>55029</u> 59026
-	2014		15	7,019.		2	,07.	5,/14	•		• 0	J9020
2	Total of line 1, column (d)								2		.2	83877
3	Average distribution ratio for the 5	5-year base	e period - divide the total o	on line 2 by 5.0), or by the numb	er of y	vears					
	the foundation has been in existen	nce if less t	han 5 years						3		.0	56775
4	Enter the net value of noncharitab	le-use asse	ets for 2019 from Part X, li	ine 5					4		9,889	,663.
5 Multiply line 4 by line 3					5		561	,486.				
6	Enter 1% of net investment incom	e (1% of P	art I, line 27b)						6		7	,308.
7	Add lines 5 and 6								7		568	,794.
8	Enter qualifying distributions from	ı Part XII, I	ine 4						8		869	,760.
_	If line 8 is equal to or greater than See the Part VI instructions.											

Part WI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4	_	m 990-PF (2019) THE KJELLSTROM FAMILY FOUNDATION 20-6368	8876		Page 4
Dute of ruling or determination letter: (attach copy of letter if necessary-see instructions) 1 7,308. b Ommatic boundations that met the section 4940(a) requirements in Part V, check here ► IX and enter 1% 1 7,308. c All other domestic boundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of Part I, line 12, col. (b) 2 0. 3 7,308. 4 0. 3 7,308. 4 0.00000000000000000000000000000000000	Pa	art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see in	nstruc	tion	s)
b Densetic foundations that met the section 4940(e) requirements in Part V, check here ► [X] and etter 1% 1 7, 308. c All other domestic foundations etter 2% of the 27b. Exempt foreign organizations, enter 4% of Part I, line 12, col. (b) 2 0. 2 tax under section 511 (domestic section 497(a)(1) trusts and laxable foundations only; others, enter -0. 3 7, 308. 4 do ther in the section in 497(a)(1) trusts and laxable foundations only; others, enter -0. 3 7, 308. 5 Condit/Payments: 2019 estimated tax payments and 2018 overpayment credited to 2019 6a 44, 269. 6 Condit/Payments: 6a 0. 6 0. 7 Totabed on the paylication or exection of the file (Form 8868) 6 0. 0. 8 ackup withholding arroneously withheld 7 44, 269. 0. 0. 9 Totabed on the total of lines 5 and 8 as more than line 7, other amount overpaid 1 0. 0. 0. 9 Totabed on the total of lines 5 and 8 as more than line 7, other amount overpaid 1 0. 0. 0. 0. 10 Overpayment. It lines 7 and the total of lines 5 and 8, bit the nearonet overpaid 1 0. 0. 0. 0. 0. 0. 0. 0. 0. 0.	1	a Exempt operating foundations described in section 4940(d)(2), check here 🕨 🥅 and enter "N/A" on line 1.			
of Part Line 270. All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of Part I, line 12, col. (b) 2 3 0. 2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0.) 3 7, 308. 3 Additions 1 and 2 3 7, 308. 5 7, 308. 4 Concent by any domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0.) 5 7, 308. 5 Constat-Poynemics: 6 0. 5 7, 308. 6 Constat-Poynemics: 6 0. 6 0. 7 Total credits and paynetis. Add thes 6 through 6d 7 444, 269. 6 0. 9 Tax dec. If total credits and a paynetis. Add thes 6 through 6d 7 444, 269. 8 0. 9 Tax dec. If total credits and B more than in 6 form 8869 36, 961. 10 36, 961. 10 36, 961. 10 36, 961. 10 36, 961. 10 36, 961. 10 36, 961. 10 36, 961. 10 36, 961. 10 36, 961. 10 36, 961. 10 36, 961. 10 36, 961. 10 36, 961. 10 36, 961. 10					
e Al other domestic foundations enter 2% of line 27b. Sampt foreign organizations, enter 4% of Part I, Ine 12, ool. (b) J 2 2 Tax under satisfies 3 (Idomestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-) 2 3 3 data lines 1 and 2 3 7, 30 8. 4 Subtite A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-) 3 7, 30 8. 4 Subtite A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-) 5 7, 30 8. 6 Credits/Payments: 6a 0. 6 0. 6 Zhorg Marting Barginston for careasion of time to the (form 8868) 6 0. 6 7 Total credits and payments: 6a inter any perturb for undergaparation of standated tax. Check here □ if Form 2220 is attached 9 7 7 Total credits and payments: 7 44, 269. 9 36, 961. 10 Overpayment. 1me To none trans total with the total of lines 3 and 8 is more than itin 0, anter anount oved 10 0. 9 Tax builde and payments: 1me To none trans total with the total of lines 3 and 8 is more than itim 0, anter an anount oved 10 10 10 10 Overpayment. 1me To none trans total or the attrans the dataled descorption or the atrinule anount overpaid <	l	b Domestic foundations that meet the section 4940(e) requirements in Part V, check here 🕨 🗴 and enter 1% 🕴 📘		7,3	08.
e Al other domestic foundations enter 2% of the 27b. Sempt foreign organizations, enter 4% of Part I, line 12, ool. (b) J 2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0)		of Part I, line 27b			
a data lines 1 and 2 a 7, 308. 4 Subtite A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0- 5 7, 308. 6 OrdisPAyments: a 7, 308. 5 7, 308. 8 2019 estimated tax payments and 2018 overpayment credited to 2019 6a 6a 0. 6a 0. 6 Catchy Phyments: a 0. 6a 0. 0. 6a 0. 0. 0.		c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of Part I, line 12, col. (b)			
4 Subtle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0	2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)			
4 Subtle A (income) tax (domestic section 4947(a)(1) tusts and taxable foundations only; others, enter -0	3	Add lines 1 and 2		7,3	
6 Cardin-Payments: a 2019 astimated tax payments and 2018 overpayment credited to 2019 b a d 4, 269. b Exempt foring organizations - tax withheld at source b d 0. c Tax paid with application for extension of time to file (Form 8868) b 0. g Backup withhelding errorenously withheld c 1. 7 Total credits and payments. Add lines 6a through 6d c 0. 8 c 1. c 1. 9 Tax due. If the total of lines 5 and 8 is more than in 0. e 1. 10 Overpayment. If lite 7 is more than the total of lines 5 and 8, enter the amount overpaid b 1. 11 Enter the amount of line 10 for the Credited to 2002 astimated tax > 36, 961. lite 1. 12 During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any optical campaign? 10 36, 961. lite X 14 the some than the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any optical campain or participate or intervene in any optical campain or participate or intervene in any optical campain of the soft bate on optical expenditures (section 4955) imposed during the year? 0. 14 the some and if any of tax to no policital expenditures (section 4955) imposed during the year? 0.	4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)			
a 2019 estimated tax payments and 2018 overpayment credited to 2019 b Exempt foreign organizations - tax withheld at source and the activities b D verpayment at the tax year, dd the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? b D verpayment is 'Yes' to 1a or 1b, attach a detailed description of the activities. c D verpayment and transport of the activities. c D verpayment is 'Yes' to 1a or 1b, attach a detailed description of the activities. c D verpayment and transport of the activities. c D verpayment and transport and the section 4955 i	5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- 5		7,3	08.
b Exempt foreign organizations - tax withheid at source B b 0. b c Tax pad with application for extension of time to file (Form 8868) B c 0. b d Backup withheid 7 44,269. 8 Enter any penalty for underapyments. Add lines 6 at through 6d 7 44,269. 8 Enter any penalty for underapyments. Add lines 6 at 8 is more than line 7, enter amount overal 9 10 Overpayment. If line 7 is more than the total of lines 5 and 8 is more than line 3, enter the amount overal 9 10 Overpayment. If line 7 is more than the total of lines 5 and 8 is more than the total of lines 5 and 8 is more than line 7, enter amount overal 9 11 During the tax year, did the foundation attempt to influence any national, state, or local legislation or did t participate or intervene in any optical campaign? 10 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did t participate or intervene in any optical campaign? 10 1a Uning the tax year, did the foundation attempt to influence any national, state, or local legislation or did the participate or intervene in any optical campaign? 10 1a Uning the tax year, did the foundation attempt to influence any national, state, or local legislation or did the did attempt or the activities. 0. 1a Uning the save is 'Se' to 1a or 1b, attach a detaile description of the activities. 0. 2 Enter the am	6				
c Tax paid with application for extension of time to file (Form 8868) 6c 0. d Backup withholding erroneously withhold 6c 0. 7 Total credits and paynets. Add lines 6a through 6d 7 444,269. 8 Enter any penalty for underpayneen to restimated tax. Check here in HF rorm 2220 is attached 8 0. 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount overal 9 9 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overal 9 9 9 Tax due. If the total of lines 5 and 8, enter the amount overal 9 9 366,961. 11 Enter the amount of line 10 to be: Credited to 2202 estimated tax ▶ 36,961. Retiredeet ▶ 11 0. Part VII-A. [Statements Regarding Activities 11 0. 12 14 attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities. 0. 0. 16 16 X 10 to the ponduation in E orm 120-POL for this year? 0. 0. 0. 12 0. 12 X 11 the answer is "Ves" to 1 a or 1b, attach a detailed description of the activities. 0. 0. 0. 0. 2	÷				
d Backup withholding erroneously withhold <u>66</u> 0. 7	l				
7 Total credits and payments. Add lines 6a through 6d					
8 Enter any penalty for underpayment of estimated tax. Check here ☐ if Form 2220 is attached 8 0. 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 9 9 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 10 36, 961. 11 Enter the amount of line 10 to be; Credited to 2020 estimated tax. ► 36, 961. 11 0. Part VII-A Statements Regarding Activities 36, 961. 11 0. Part VII-A Statements Regarding Activities 10 36, 961. 1 It he answer is 'Yes' to 1 or 10, attach a detailed description of the activities and copies of any materials published or distributed by the foundation ite ornor times ? 0. 0. 1 It he answer is 'Yes' to 1 or 10, attach a detailed description of the activities. 0. 0. 2. X 4 Enter the amount (if any) paid by the foundation managers. > \$ 0. 0. 2. X		d Backup withholding erroneously withheld 6d 0.			
8 Enter any penalty for underpayment of estimated tax. Check here ☐ if Form 2220 is attached 8 0. 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 9 9 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 10 36, 961. 11 Enter the amount of line 10 to be; Credited to 2020 estimated tax. ► 36, 961. 11 0. Part VII-A Statements Regarding Activities 36, 961. 11 0. Part VII-A Statements Regarding Activities 10 36, 961. 1 It he answer is 'Yes' to 1 or 10, attach a detailed description of the activities and copies of any materials published or distributed by the foundation ite ornor times ? 0. 0. 1 It he answer is 'Yes' to 1 or 10, attach a detailed description of the activities. 0. 0. 2. X 4 Enter the amount (if any) paid by the foundation managers. > \$ 0. 0. 2. X	7	Total credits and payments. Add lines 6a through 6d7	4	<u>4,2</u>	69.
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 10 36, 961. 11 10 36, 961. 11 0. 11 Enter the amount of line 10 to be: Credited to 2020 estimated tax ▶ 36, 961. 11 10 0. 12 During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? 10 11 0. 14 Bardemont than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition if the answer is 'Yes' to 1 a 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. 10 10 X 10 O . (2) On foundation managers. ▶ \$ 0. 0. 2 X 15 The the anount (if any) of tax on political expenditures (section 4955) imposed during the year? 0. 10 X 10 X 16 The the anount of the any of tax on political expenditures (section 4955) imposed during the year? 0. 2 X 10 X 16 The the anountation neage any changes, not previously peopried to the IRS? 0. 2 X 10 2	8	Enter any penalty for underpayment of estimated tax. Check here 🔄 if Form 2220 is attached			0.
11 Entry the amount of line 10 to be: Credited to 2020 estimated tax ▶ 36,961. Refunded ▶ 11 0. Part VII-A Statements Regarding Activities 1 1 0. 14 Entry the tax year, diff the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? 1 1 0. 11 During the tax year, diff the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? 1 1 X 11 During the tax year, diff the foundation iterecity or indirecity) for political purposes? See the instructions for the definition 1 X 11 During the tax year, diff the foundation in connection with the activities. 0. 0. 1 X 11 During the tax year, diff the foundation during the year? 0. 0. 1 X 11 During the tax one political expenditures (section 4955) imposed during the year? 0. 1 X 11 During the tax one political expenditure tax imposed on foundation managers. ▶ \$ 0. 0. 2 X 11 Text the anount (f any) political expenditures (section 4956) imposed during the year? 0. 2 X <td>9</td> <td>Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 9</td> <td></td> <td></td> <td></td>	9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 9			
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 any optitical campaign? Image: Statement St	10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	3	<u>6,9</u>	<u>61.</u>
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 any optitical campaign? Image: Statement St	11	Enter the amount of line 10 to be: Credited to 2020 estimated tax			0.
any political campaign? 1a X b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition	Pa	art VII-A Statements Regarding Activities			
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition	1	a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in		Yes	
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. Image: Comparison of the activities and copies of any materials published or distributed by the foundation in connection with the activities. Image: Comparison of the activities and copies of any materials published or distributed by the foundation is expenditure (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. (2) On foundation managers. (3) On the foundation any activities that have not previously been reported to the IRS? (1''es," attach a detailed description of the activities. (2) A state foundation may activities that have not previously reported to the IRS? (1''es," attach a detailed description of the activities. (2) A state foundation have unrelated business gross income of \$1,000 or more during the year? (1''es," has it filed at ax return on Form 990-T for this year? (1''es," attach the statement required by General Instruction T. (2) A state foundation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument, or (2) B state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument, or (3) B a 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 (3) B a X (4) A a a a streat is registered. See instructions.		any political campaign?	1a		
distributed by the foundation in connection with the activities. Image: Control of the foundation file Form 1120-POL for this year? Image: Control of the foundation file Form 1120-POL for this year? d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. ▶ §	I	b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition	1b		X
c Did the foundation file Form 1120-POL for this year? It X d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: 0. (1) On the foundation. ▶ \$		If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or			
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. ▶ \$		distributed by the foundation in connection with the activities.			
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. ▶ \$		c Did the foundation file Form 1120-POL for this year?	1c		Х
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. > \$		d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			
managers. ▶ \$O. 2 X If "Yes," attach a detailed description of the activities. 2 X If "Yes," attach a detailed description of the activities. 2 X If as the foundation made any changes, not previously reported to the IRS? 2 X If Yes," attach a detailed description of the activities. 3 X 4 bid the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes 3 X 4a bid the foundation have unrelated business gross income of \$1,000 or more during the year? N/A 4a X b If "Yes," has it filed a tax return on Form 990-T for this year? N/A 5 X If "Yes," attach the statement required by <i>General Instruction T</i> . 6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: • • 5 X • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? 6 X 7 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 <		(1) On the foundation. \triangleright \$ 0. (2) On foundation managers. \triangleright \$ 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 3 X 4a Did the foundation have unrelated business gross income of \$1,000 or more during the year? N/A 4a 4a X b If "Yes," has it filed a tax return on Form 990-T for this year? N/A 4b 5 X 4u bt 5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? N/A 4b 5 X 6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: • 6 X • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? • 6 X 7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV 6 X 8a Enter the states to which the foundation reports or with which it is registered. See instructions.		e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation			
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bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes 3 X 4a Did the foundation have unrelated business gross income of \$1,000 or more during the year? N/A b If "Yes," has it filed a tax return on Form 990-T for this year? N/A 5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? N/A 5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? N/A 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? 6 X 7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV 7 X 8a Enter the states to which the foundation reports or with which it is registered. See instructions.		If "Yes," attach a detailed description of the activities.			
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9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2019 or the tax year beginning in 2019? See the instructions for Part XIV. If "Yes," complete Part XIV			8b	Х	
year 2019 or the tax year beginning in 2019? See the instructions for Part XIV. If "Yes," complete Part XIV	9				
			9		Х
	10		10		Х

Form **990-PF** (2019)

	1 990-PF (2019) THE KJELLSTROM FAMILY FOUNDATION 20-636	58876		Page 5
Pa	art VII-A Statements Regarding Activities (continued)			
			Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			
	section 512(b)(13)? If "Yes," attach schedule. See instructions	. 11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?			
	If "Yes," attach statement. See instructions	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	. 13	Х	
	Website address > N/A			
14	The books are in care of ▶ DAN G. LOESCHER Telephone no. ▶ 815-6	<u>537-9</u>	584	
	Located at 6845 WEAVER ROAD, SUITE 200, ROCKFORD, IL ZIP+4	<u>51114</u>		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here		🕨	
	and enter the amount of tax-exempt interest received or accrued during the year 🕨 15	N	<u>I/A</u>	
16			Yes	
	securities, or other financial account in a foreign country?	. 16		X
	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
18	a During the year, did the foundation (either directly or indirectly):			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes 🗴 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.)			
1	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		X
	Organizations relying on a current notice regarding disaster assistance, check here			
(bid 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 2019?	1c		x
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation			
-	defined in section 4942(j)(3) or 4942(j)(5)):			
	a At the end of tax year 2019, did the foundation have any undistributed income (Part XIII, lines			
	6d and 6e) for tax year(s) beginning before 2019?			
	If "Yes," list the years ▶,,,,,,,			
I	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		
	the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
3:	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
	during the year?			
I	b If "Yes," did it have excess business holdings in 2019 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 Form 4720,			
	Schedule C, to determine if the foundation had excess business holdings in 2019.) N/A	3b		
٨	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	1	x
	b Did the foundation mixes during the year any amount in a manner that would joppardize its charmable purposes?			
	had not been removed from jeopardy before the first day of the tax year beginning in 2019?	4b		x
			1	

Form **990-PF** (2019)

Form 990-PF (2019) THE KJELLSTROM FAMILY FOUNDATION 20 Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)

20-	63	688	376	Page 6

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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))?		Yes	X No			
(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirect						
any voter registration drive?		Yes	XNo			
(3) Provide a grant to an individual for travel, study, or other similar purposes?		Yes	XNo			
(4) Provide a grant to an organization other than a charitable, etc., organization described in section						
4945(d)(4)(A)? See instructions		Yes	XNo			
(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for						
the prevention of cruelty to children or animals?		Yes	XNo			
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in F	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 maintaine		_				
expenditure responsibility for the grant? ${f N}/{f N}$	`A	Yes	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?	L	Yes	X No			
b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?				6b		X
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?	L	Yes	X No			
b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction?			N/A	7b		
8 Is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or		7				
excess parachute payment(s) during the year?			X No			
Part VIII Information About Officers, Directors, Trustees, Foundation Mana Paid Employees, and Contractors	igers, High	ιly				
1 List all officers, directors, trustees, and foundation managers and their compensation.						
			-1) -			

(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
JON BATES	TRUSTEE			
946 N 2ND STREET				
ROCKFORD, IL 61107	0.50	2,000.	0.	0.
PAUL LOGLI	TRUSTEE			
612 N MAIN ST #300				
ROCKFORD, IL 61103	0.50	2,000.	0.	0.
DAN LOESCHER	TRUSTEE			
6845 WEAVER RD, SUITE 200				
ROCKFORD, IL 61114	0.50	2,000.	0.	0.
	_			
2 Compensation of five highest-paid employees (other than those	included on line 1). If none,	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				

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

Form 990-PF (2019)

0

Form 990-PF (2019) THE KJELLSTROM FAMILY FOUNDATION	20-63	368876 Page 7
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		
Total number of others receiving over \$50,000 for professional services		• 0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical i	nformation such as the	
number of organizations and other beneficiaries served, conferences convened, research papers produced,		Expenses
1 SEE PART XV - LINE 3A		
		0.
2		
3		
4		
Part IX-B Summary of Program-Related Investments	I	
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.
I otal. Add lines 1 through 3		000 DE (0010)

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For	m 990-PF (2019) THE KJELLSTROM FAMILY FOUNDATION	20-	-6368876	Page 8
_	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations			i ago u
_				
	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		9,275,	110
	Average monthly fair market value of securities	1a		148.
	Average of monthly cash balances	1b	705	,140.
C	Fair market value of all other assets	10	10 040	267
	Total (add lines 1a, b, and c)	1d	10,040,	,207.
e	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	10,040,	<u>,267.</u>
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	150,	,604.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	9,889,	663.
6	Minimum investment return. Enter 5% of line 5	6	494,	483.
Ρ	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations an	d certain		
	foreign organizations, check here 🕨 🔄 and do not complete this part.)			
1	Minimum investment return from Part X, line 6	1	494	483.
2a	Tax on investment income for 2019 from Part VI, line 5			
	Income tax for 2019. (This does not include the tax from Part VI.)			
	Add lines 2a and 2b	2c	7.	308.
	Distributable amount before adjustments. Subtract line 2c from line 1	3		175.

Recoveries of amounts treated as qualifying distributions

Add lines 3 and 4

Deduction from distributable amount (see instructions)

Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1

Part XII Qualifying Distributions (see instructions) 1 Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: a Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26 869,760. 1a Program-related investments - total from Part IX-B 0. b 1b Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes 2 2 Amounts set aside for specific charitable projects that satisfy the: 3 Suitability test (prior IRS approval required) 3a a b Cash distribution test (attach the required schedule) 3b 869,760. Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4 4 4 5 Foundations that gualify under section 4940(e) for the reduced rate of tax on net investment 7,308. income. Enter 1% of Part I, line 27b 5 862,452. Adjusted qualifying distributions. Subtract line 5 from line 4 6 6 Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years. Form **990-PF** (2019)

0

0

487,175

487,175

4

5

6

7

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2018	(c) 2018	(d) 2019
1 Distributable amount for 2019 from Part XI,	001903		2010	2013
line 7				487,175.
2 Undistributed income, if any, as of the end of 2019:				·
a Enter amount for 2018 only			0.	
b Total for prior years:				
,,		0.		
3 Excess distributions carryover, if any, to 2019:				
a From 2014				
b From 2015				
c From 2016				
d From 2017 59,327.				
e From 2018 278,384.	227 711			
f Total of lines 3a through e	337,711.			
4 Qualifying distributions for 2019 from				
Part XII, line 4: $\$$ 869,760.			0.	
a Applied to 2018, but not more than line 2a			0.	
b Applied to undistributed income of prior		0.		
years (Election required - see instructions) c Treated as distributions out of corpus		0.		
(Election required _ each instructions)	0.			
d Analis d to 0040 distribute bis success	••			487,175.
e Remaining amount distributed out of corpus	382,585.			101/11/01
5 Excess distributions carryover applied to 2019	,,			
(If an amount appears in column (d), the same amount must be shown in column (a).)	0.			0.
6 Enter the net total of each column as indicated below:				
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	720,296.			
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 2018. Subtract line			0.	
4a from line 2a. Taxable amount - see instr f Undistributed income for 2019. Subtract			0.	
lines 4d and 5 from line 1. This amount must				
be distributed in 2020				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section $170(b)(1)(F)$ or $4942(g)(3)$ (Election				
may be required - see instructions)	0.			
8 Excess distributions carryover from 2014				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2020.				
Subtract lines 7 and 8 from line 6a	720,296.			
10 Analysis of line 9:				
a Excess from 2015				
b Excess from 2016				
c Excess from 2017 59, 327.				
d Excess from 2018 278,384.				
e Excess from 2019 382,585.				

		LLY FOUNDAT		20-63	58876 Page 10
Part XIV Private Operating Fou	indations (see ins	structions and Part VI	I-A, question 9)	N/A	
1 a If the foundation has received a ruling or d		1 1 0			
foundation, and the ruling is effective for 2					
b Check box to indicate whether the foundation	on is a private operatin	g foundation described i		1942(j)(3) or 49	42(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum	(a) 2019	(b) 2018	(c) 2017	(d) 2016	(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 gualifying					
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			f the foundation h	ad \$5,000 or mor	e in assets
at any time during the	vear-see instru	uctions.)			

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

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 **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., 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 8

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:

3 Grants and Contributions Paid During the Y	ear or Approved for Future	Payment		
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	Contribution	
a Paid during the year				
SOYS & GIRLS CLUB	NONE	PUBLIC	SOCIAL WELFARE	
040 N. 2ND STREET COCKFORD, IL 61107				40,000
URPEE MUSEUM 37 N. MAIN STREET	NONE	PUBLIC	SOCIAL WELFARE	
ROCKFORD, IL 61103				9,040
C.A.S.A. 211 S. COURT STREET ROCKFORD, IL 61101	NONE	PUBLIC	SOCIAL WELFARE	12,300
·				,
CARPENTER'S PLACE	NONE	PUBLIC	SOCIAL WELFARE	
1149 RAILROAD AVENUE ROCKFORD, IL 61104				86,157
CRUSADER COMMUNITY HEALTH FOUNDATION L200 W. STATE STREET	NONE	PUBLIC	SOCIAL WELFARE	
ROCKFORD, IL 61102	 NTINUATION SHEE			87,089
Total SEE_COI b Approved for future payment	ITINOATION SHEE		► 3a	869,760
NONE				

Part XVI-A

-A Analysis of Income-Producing Activities

	Unrelated	business income	Evolude	d by section 512, 513, or 514	
Enter gross amounts unless otherwise indicated.	(a) Business	(b) Amount	(C) Exclu- sion	(d) Amount	(e) Related or exempt function income
1 Program service revenue:	code	Amount	code	Amount	
a					
b					
C					
d					
e					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments				200.002	
4 Dividends and interest from securities			14	309,223.	
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					
than inventory			18	482,722.	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
a					
b					
c					
d					
e					
12 Subtotal. Add columns (b), (d), and (e)		0.		791,945.	0.
13 Total. Add line 12, columns (b), (d), and (e)					791,945.
(See worksheet in line 13 instructions to verify calculations.)					
Part XVI-B Relationship of Activities to	the Accon	plishment of Exe	empt P	Purposes	
Line No. Explain below how each activity for which incor the foundation's exempt purposes (other than be			contribut	ed importantly to the accompl	ishment of
the foundation's exempt purposes (other than b N/A		3 101 30011 pur p0303).			

Forr	n 990-PF (2019) THE KJELLSTROM FAMILY FOUNDATION	20-6368876	Pa	age 13
Pa	art XVII Information Regarding Transfers to and Transactions and Relationships With Exempt Organizations	Noncharitable		
1	Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c)		Yes	No
	(other than section 501(c)(3) organizations) or in section 527, relating to political organizations?			
a	Transfers from the reporting foundation to a noncharitable exempt organization of:			
	(1) Cash	1a(1)		X
	(2) Other assets	1a(2)		X
b				
	(1) Sales of assets to a noncharitable exempt organization	1b(1)		X
	(2) Purchases of assets from a noncharitable exempt organization			X
	(3) Rental of facilities, equipment, or other assets			X
	(4) Reimbursement arrangements			X
	(5) Loans or loan guarantees			X
	(6) Performance of services or membership or fundraising solicitations			X
C	Sharing of facilities, equipment, mailing lists, other assets, or paid employees	10		X
h	If the answer to any of the above is "Yes" complete the following schedule. Column (b) should always show the fair market value is	of the goods other ass	ets	

d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received.

(a) Line no	o.	(b) Amount involved	(c) Name of		exempt organization		(d) Description of transfers, transactions, and sharing arrangements			
	_			N/A						
	_									
	_									
in s	ection	ndation directly or indirect 501(c) (other than section omplete the following schoor (a) Name of org	on 501(c)(3)) or in se edule.			-			Yes X No	
		N/A	gamzation						Τσιατιστιστηρ	
		11/ H								
Sign Here	and be	penalties of perjury, I declare t lief, it is true, correct, and com	nplete. Declaration of pre						May the IRS discuss this return with the preparer shown below? See instr.	
	Sign	ature of officer or trustee			Date		Title	-		
		Print/Type preparer's na	ame	Preparer's si	gnature	D	late	Check if self- employed	PTIN	
Paid		DAN G. LOE	SCHER						P00096569	
Prepa Use (parer Firm's name LOESCHER & ASSOCIA			FES, LTD.	I		Firm's EIN	36-4038006		
		Firm's address ▶ 68	45 WEAVER	ROAD,	SUITE 200					
		RO	CKFORD, I	ь 61114	4			Phone no. 8	15-637-9584	

Form 990-PF (2019)

CONTINUATION FOR 990-PF, PART IV20-6368876PAGE1OF2

Part IV Capital Gains and Los	sses for Tax on Investment Income					
(a) List and	d describe the kind(s) of property solo rick warehouse; or common stock, 20		(b) How acquired P - Purchase	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)	
	AYMOND JAMES STAT		D - Donation	(, auj, j)	(
b SEE ATTACHED R		-				
c SEE ATTACHED R						
d SEE ATTACHED R						
e CUMBERLAND CNT			P			
f EL CAJON CA RE			 P			
g SEE ATTACHED R		37 P				
h SEE ATTACHED R		37 P				
i SEE ATTACHED R	AYMOND JAMES STAT	TEMENT A/C 771288	37 P			
j GINNIE MAE			P			
k GINNIE MAE			P			
HOMESTREET BAN			P			
m GOLDMAN SACHS			P			
n HOMESTREET BAN			P			
0 HOMESTREET BAN	K SEATTLE WA		P			
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale) Gain or (loss) plus (f) minus (g)		
a 931,977.		938,577.			<6,600.>	
b 4,040,942.		3,593,125.			447,817.	
<u>c 1,247,931.</u>		1,226,541.			21,390.	
d 323,440.		309,598.			13,842.	
e 86,234.		84,589.			1,645.	
<u>f</u> 31,245.		28,927.			2,318.	
<u>g</u> <u>19,741.</u>		19,370.			371.	
h 150,164.		149,104.			1,060.	
<u>i</u> 65,657.		65,657.			0.	
j . 1		65. 1.			<65.>	
<u>k 1.</u> 1 83,000.		83,000.			0.	
02 000		83,000.			0.	
m 83,000. n 33,000.		33,000.			0.	
<u>0</u> <u>33,000.</u>		33,000.			0.	
	ng gain in column (h) and owned by t		(1) 0	sses (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 not less than "-0-")	col. (k),	
2					<6,600.>	
h					447,817.	
с с					21,390.	
d					13,842.	
e					1,645.	
f					2,318.	
g					371.	
h					1,060.	
i					0.	
j					<65.>	
k					0.	
					0.	
m					0.	
n 0						
0					0.	
2 Capital gain net income or (net ca	apital loss) { If gain, also enter If (loss), enter "-0	in Part I, line 7	2			
3 Net short-term capital gain or (los	ss) as defined in sections 1222(5) an					
If gain, also enter in Part I, line 8, If (loss), enter "-0-" in Part I, line		}	3			

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Dort	IV/			• •					_						

Part IV Capital Gains and Lo	osses for Tax on Investment Income				
(a) List an 2-story b	d describe the kind(s) of property sold rick warehouse; or common stock, 20	d, e.g., real estate, 00 shs. MLC Co.	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a HOMESTREET BAN	K SEATTLE WA		P		
b GOLDMAN SACHS			P		
C HOMESTREET BAN	K SEATTLE WA		P		
d MERIDIAN BANK	DEVON PA		P		
e CAPITAL GAINS	DIVIDENDS				
f					
h					
i					
k					
<u>n</u>					
0	,				
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		Gain or (loss) lus (f) minus (g)	
a 83,000.		83,000.			0.
<u>a</u> 83,000. <u>b</u> 33,000.		33,000.			0.
c 33,000.		33,000.			0.
d 33,000.		33,000.			0.
e 944.					944.
<u>f</u>					
<u>g</u>					
<u>h</u>					
<u>i</u>					
<u> </u>					
<u>k</u>					
<u> </u>	+				
<u>m</u>					
<u>n</u>					
0 Complete only for assets showi	ng gain in column (h) and owned by t	he foundation on 12/31/69	(1) 00	coc (from col (h))	
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	Gains (excess o	ses (from col. (h)) of col. (h) gain over ot less than "-0-")	col. (k),
				,	0.
<u>a</u>					0.
<u>b</u>					0.
c d					0.
e					944.
f					
g					
<u> </u>					
i					
i					
k					
m					
n					
0					
2 Capital gain net income or (net c	apital loss) { If gain, also enter If (loss), enter "-0	in Part I, line 7	2		482,722.
			-		
3 Net short-term capital gain or (lo If gain, also enter in Part I, line 8 If (loss), enter "-0-" in Part I, line	oss) as defined in sections 1222(5) and , column (c). 8	u (o):	3	N/A	

20-6368876

Part XV Supplementary Informatio				
3 Grants and Contributions Paid During the				
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)	or substantial contributor	recipient		
FRIENDS OF THE CORONADO	NONE	PUBLIC	ARTS	
314 N MAIN STREET				
ROCKFORD, IL 61101				5,000
TOTOTE ELODEDO CENIMED	NONE		COCTAL MELEADE	
GOLDIE FLOBERG CENTER 58 W. ROCKTON ROAD	NONE	PUBLIC	SOCIAL WELFARE	
ROCKTON, IL 61072				40,928
(((())))))))))))				40,520
LIFESCAPE COMMUNITY SERVICES	NONE	PUBLIC	SOCIAL WELFARE	
705 KILBURN AVENUE				
ROCKFORD, IL 61101				34,652
MIDWAY VILLAGE MUSEUM	NONE	PUBLIC	SOCIAL WELFARE	
6799 GUILFORD ROAD				
ROCKFORD, IL 61107				24,400
MUSIC ACADEMY	NONE	PUBLIC	EDUCATION	
226 S. 2ND STREET				<u> </u>
ROCKFORD, IL 61104				60,800
NATURAL LAND INSTITUTE	NONE	PUBLIC	SOCIAL WELFARE	
320 S. THIRD STREET				
ROCKFORD, IL 61104				2,500
NORTHERN IL CENTER FOR NONPROFIT	NONE	PUBLIC	SOCIAL WELFARE	
EXCELLENCE				
8500 E. STATE STREET				
ROCKFORD, IL 61108				33,972
RAMP	NONE	PUBLIC	SOCIAL WELFARE	
202 MARKET STREET ROCKFORD, IL 61107				60,000
NOCALOND, IN OILO?				
ROCK HOUSE KIDS	NONE	PUBLIC	SOCIAL WELFARE	
1325 7TH STREET				
ROCKFORD, IL 61104				3,249
ROCKFORD AREA LUTHERAN MINISTRIES	NONE	PUBLIC	SOCIAL WELFARE	
115 N. WYMAN STREET				
ROCKFORD, IL 61101				6,000
Total from continuation sheets				635,174

THE KJELLSTROM FAMILY FOUNDATION Part XV Supplementary Information

20-6368876

Part XV Supplementary Information				
3 Grants and Contributions Paid During the		-		
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
ROCKFORD RESCUE MISSION	NONE	PUBLIC	SOCIAL WELFARE	
715 W. STATE STREET				
ROCKFORD, IL 61102				86,155.
SEVERSON DELLS	NONE	PUBLIC	SOCIAL WELFARE	
8786 MONTAGUE ROAD				
ROCKFORD, IL 61102				25,000.
STARLIGHT THEATER	NONE	PUBLIC	SOCIAL WELFARE	
3301 N. MULFORD ROAD				
ROCKFORD, IL 61114				49,657.
STEPHENS COLLEGE	NONE	PUBLIC	EDUCATION	
1200 E. BROADWAY	NONE	FOBLIC	EDUCATION	
COLUMBIA, MO 65215				34,600.
WACA OF DOCK DIVED VALLEY	NONE	PUBLIC	COCTAL WELEADE	
YMCA OF ROCK RIVER VALLEY 200 Y BOULEVARD	NONE	POBLIC	SOCIAL WELFARE	
ROCKFORD, IL 61107				52,156.
ELLIS ELEMENTARY SCHOOL 222 S CENTRAL AVENUE	NONE	PUBLIC	EDUCATION	
ROCKFORD, IL 61102				5,000.
SHELTER CARE MINISTRIES 218 7TH STREET	NONE	PUBLIC	SOCIAL WELFARE	
ROCKFORD, IL 61104				12,500.
	NONE			
SALVATION ARMY P.O. BOX 4159	NONE	PUBLIC	SOCIAL WELFARE	
ROCKFORD, IL 61110				6,500.
;				
DOGUTODD ADD MIGDIN	NONE		EDUCATION	
ROCKFORD ART MUSEUM 711 N. MAIN STREET	NONE	PUBLIC	EDUCATION	
ROCKFORD, IL 61103				2,500.
	NONE		EDUCADION	
KLEHM ARBORETUM 2715 S MAIN STREET	NONE	PUBLIC	EDUCATION	
ROCKFORD, IL 61102				12,000.
Total from continuation sheets	·····	·	·····	

20-6368876

Part XV Supplementary Informatio		FOUNDATION		68876
3 Grants and Contributions Paid During the				
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
STEAM ACADEMY AT HASKELL SCHOOL	NONE	PUBLIC	EDUCATION	
515 MAPLE STREET ROCKFORD, IL 61103				11,000.
CCS / YOUTH BUILD	NONE	PUBLIC	SOCIAL WELFARE	
917 S MAIN STREET ROCKFORD, IL 61101				6,000.
CENTER FOR SIGHT & HEARING P.O. BOX 5944	NONE	PUBLIC	SOCIAL WELFARE	
ROCKFORD, IL 61125				7,295.
RIVER SOUTH DEVELOPMENT FOUNDATION 200 PRAIRIE STREET #201	NONE	PUBLIC	SOCIAL WELFARE	
ROCKFORD, IL 61101				25,000.
ROCK VALLEY COLLEGE FOUNDATION	NONE	PUBLIC	EDUCATION	
3301 N. MULFORD ROAD ROCKFORD, IL 61114				12,500.
ROCKFORD DANCE COMPANY	NONE	PUBLIC	SOCIAL WELFARE	
711 N. MAIN STREET ROCKFORD, IL 61103				3,905.
ROCKFORD SYMPHONY ORCHESTRA	NONE	PUBLIC	SOCIAL WELFARE	
711 N. MAIN STREET ROCKFORD, IL 61103		IODIIC		3,905.
FAMILY COUNSELING SERVICES 531 N LONGWOOD STREET, SUITE 103	NONE	PUBLIC	SOCIAL WELFARE	8 000
ROCKFORD, IL 61107				8,000.
Total from continuation sheets				

Schedule B

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

Name of the organization

Schedule of Contributors

Attach to Form 990, Form 990-EZ, or Form 990-PF.
 Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2019

Employer identification number

20-6368876

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THE KJELLSTROM FAMILY FOUNDATION

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

Check if your organization is covered by the **General Rule** or a **Special Rule**. **Note:** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

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

Special Rules

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (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 for an *exclusively* set is charitable, etc., burpose. 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 for an *exclusively* set is the set of the parts unless to the set of the year for an *exclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year for an *exclusively* set of the parts unless to the set of the year for an *exclusively* set 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 for an *exclusively* set of the parts unless the **form any form any**

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.

Employer identification number

20-6368876

THE KJELLSTROM FAMILY FOUNDATION

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
1	JANET A. KJELLSTROM TRUST 6845 WEAVER ROAD, SUITE 200 ROCKFORD, IL 61114	\$ <u>343,036.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization

Employer identification number

20-6368876

THE KJELLSTROM FAMILY FOUNDATION

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

	Noncash Property (see instructions). Use duplicate copies of Part	····	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		 \$	
(a) No. from	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
Part I			
		\$	
(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
		<u> </u>	
		\$	
	(b)	(c) FMV (or estimate)	(d) Date received
(a) No. from	Description of noncash property given	(See instructions.)	Buterecented
No. from	Description of noncash property given	(See instructions.)	
No.	Description of noncash property given	(See instructions.)	

Schedule	B (Form 990, 990-EZ, or 990-PF) (2019)		Page 4		
-	organization		Employer identification number		
тне к	JELLSTROM FAMILY FOUNDA	TTON	20-6368876		
Part III		tions to organizations described in secti- a) through (e) and the following line entry. charitable, etc., contributions of \$1,000 or less	on 501(c)(7), (8), or (10) that total more than \$1,000 for the year 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 gift			
	Transferee's name, address, a	and 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 of gift				
	Transferee's name, address, a	and 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 of gift			
	Transferee's name, address, a	and 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 of gift			
	Transferee's name, address, a	and ZIP + 4	Relationship of transferor to transferee		

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FORM 990-PF	DIVIDENDS	S AND INTER	EST F	ROM SECUR	ITIES ST	FATEMENT 1
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDEND		(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
JANET ANN KJELLSTROM TRUST RAYMOND JAMES	56,964		0.	56,964.	56,964.	
A/C#210AX025 RAYMOND JAMES	2,274.		0.	2,274.	2,274.	
A/C#277T4780 RAYMOND JAMES	3,406.		0.	3,406.	3,406.	
A/C#340WL110 RAYMOND JAMES	118,018.	. 94	4.	117,074.	117,074.	
A/C#3786X438 RAYMOND JAMES	22,311		0.	22,311.	22,311.	
A/C#394Y8598 RAYMOND JAMES	32,475		0.	32,475.	32,475.	
A/C#51972471 RAYMOND JAMES	2,742.		0.	2,742.	2,742.	
A/C#527TD553 RAYMOND JAMES	904		0.	904.	904.	
A/C#5345L346 RAYMOND JAMES	6,043.		0.	6,043.	6,043.	
A/C#5349T188 RAYMOND JAMES	904		0.	904.	904.	
A/C#626W1570 RAYMOND JAMES	27,792.		0.	27,792.	27,792.	
A/C#6704P908 RAYMOND JAMES	2,274.		0.	2,274.	2,274.	
A/C#77128837 RAYMOND JAMES	30,838.		0.	30,838.	30,838.	
A/C#800X9753 RAYMOND JAMES	1,354.	•	0.	1,354.	1,354.	
A/C#8433L926 RAYMOND JAMES	904.	•	0.	904.	904.	
A/C#892MD110	964	•	0	964.	964.	
TO PART I, LINE 4	310,167.	94	4.	309,223.	309,223.	
FORM 990-PF		LEGAL	FEES	3	S	FATEMENT 2
DESCRIPTION		(A) EXPENSES PER BOOKS		(B) INVEST- S INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
LEGAL FEES		145.		0.		0.
TO FM 990-PF, PG 1,	LN 16A	145.		0.		0.
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FORM 990-PF	ACCOUNTING FEES		STATEMENT 3	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ACCOUNTING/TAX PREP FEES	24,949.	0.		0.
TO FORM 990-PF, PG 1, LN 16B	24,949.	0.		0.
FORM 990-PF C	THER PROFES	SIONAL FEES	S	TATEMENT 4
FORM 990-PF C	THER PROFES (A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C)	(D) CHARITABLE PURPOSES
	(A) EXPENSES	(B) NET INVEST-	(C) ADJUSTED	(D) CHARITABLE

FORM 990-PF	TAX	TAXES		STATEMENT 5	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
FOREIGN TAXES ON INVESTMENTS	5,845.	5,845.		0.	
TO FORM 990-PF, PG 1, LN 18	5,845.	5,845.		0.	

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FORM 990-PF	OTHER EXPENSES S'			TATEMENT 6
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
MISCELLANEOUS	1,638.	0.		0.
TO FORM 990-PF, PG 1, LN 23	1,638.	0.		0.

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FOR	M 990-PF		OTHER	INVESTMENTS		STATEMENT 7
DES	CRIPTION			VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
SEE	ATTACHED	STATEMENT	A/C#77128837	COST	933,126.	972,198.
SEE	ATTACHED	STATEMENT	A/C#626W1570	COST	961,417.	1,015,881.
SEE	ATTACHED	STATEMENT	A/C#394Y8598	COST	992,683.	1,033,072.
SEE	ATTACHED	STATEMENT	A/C#527TD553	COST	33,000.	33,048.
SEE	ATTACHED	STATEMENT	A/C#892MD110	COST	33,000.	33,011.
SEE	ATTACHED	STATEMENT	A/C#800X9753	COST	33,000.	33,023.
SEE	ATTACHED	STATEMENT	A/C#8433L926	COST	33,000.	33,048.
SEE	ATTACHED	STATEMENT	A/C#5349T188	COST	33,000.	33,048.
SEE	ATTACHED	STATEMENT	A/C#277T4780	COST	83,000.	83,058.
SEE	ATTACHED	STATEMENT	A/C#6704P908	COST	83,000.	83,120.
SEE	ATTACHED	STATEMENT	A/C#210AX025	COST	83,000.	83,120.
SEE	ATTACHED	STATEMENT	A/C#340WL110	COST	2,976,193.	3,401,530.
SEE	ATTACHED	STATEMENT	A/C#3786X438	COST	1,959,186.	2,026,375.
SEE	ATTACHED	STATEMENT	A/C#5345L346	COST	985,041.	1,051,119.
тоти	AL TO FORM	M 990-PF, 1	PART II, LINE	13	9,221,646.	9,914,651.

FORM 990-PF GRANT APPLICATION SUBMISSION INFORMATION PART XV, LINES 2A THROUGH 2D

STATEMENT 8

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